



PODIATRY AFFILIATES

WELCOME TO OUR FALL NEWSLETTER

In this edition, we will focus on winter (cold) injuries.

Under the beauty of a blanket of fresh-fallen snow, the outdoors beckons. For a while, winter doesn't feel quite so cold, and people of all ages feel a sense of youthful excitement about bundling up and getting outside.

Without warm, dry clothes, any wintertime outdoor activity is a potential health risk. Proper footwear--insulated, waterproof boots or shoes--is as important as coats, hats, or gloves in the outdoors during the winter.

Socks are also important. Podiatrists recommend a single pair of thick socks made of acrylic fibers, or a blend including them, that "wick" away moisture caused by perspiration in the boot.

Cold, wet feet should get back indoors quickly. In sub-freezing temperatures, wet extremities are in immediate danger of frostbite, a serious, painful condition that can result in loss of toes or fingers.

FROSTBITE

It's impossible to overstate the importance of understanding symptoms of frostbite. Skin-color changes can't be seen under a boot, but if toes are extremely cold for a prolonged period, feel burning or numb, there is a danger of frostbite.



In early frostbite one would experience burning, numbness, tingling and itching. The toes may appear white. In severe frostbite, sensation is completely lost and you will see the formation of blisters.

Immediate treatment should include getting indoors and removing any wet socks. Keep the foot elevated to reduce swelling. Avoid a gradual thaw. Rewarm the affected part rapidly using warm water (100-110 degrees). Do not rub the area as this causes tissue damage. Apply a sterile dressing and cotton balls between the toes if possible.

If you are in a situation where you can't get out of the cold right away and your toe or finger is frozen, you should not rewarm the part. The worst outcomes are when a frozen part is thawed and then refrozen.

While frostbite is a medical emergency there are other conditions that affect toes upon exposure to cold.

RAYNAUD'S DISEASE

This is a condition that causes some areas of the body (toes, fingers, tip of the nose, ears) to feel numb in response to cold temperatures or stress. In response to cold or damp conditions, the arteries in the toes or other parts go into a spasm limiting blood supply. There may be a "cascade" of color changes from white to blue to red. These attacks can last minutes to hours. Women are more likely to have Raynaud's disease. Most cases are easily treated with prevention of exposure to cold and medication (vasodilators) can be prescribed for attacks. Most cases of Raynaud's are mild and more of a nuisance than a disability. In some people Raynaud's disease can indicate an underlying disease such as Lupus or rheumatoid arthritis.



Jeffrey M. Carrel, DPM



David M. Davidson, DPM



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CHILBLAINS

This is a condition that affects the elderly, the sedentary and people with anemia. Chilblains is caused by exposure to cold but also indicates underlying peripheral vascular disease. Small, itchy red, swollen patches appear. Symptoms are most apparent once you warm up from being in the cold. Skin can be dry and cracked and the little toe is affected most often. Treatment includes the use of topical ointments containing heparin.



SKIING AND YOUR FEET

Shush, shush, shush. That's not the sound of a teacher asking the kids to be quiet—it's the sound of your skis pushing through fresh powder as you head down the slopes. As with most other sports, you need to keep close attention to your feet when choosing ski boots and when preparing your feet for skiing.

Every pair of feet is different, and boot manufacturers design ski boots to fit a variety of feet. When choosing ski boots for either buying or renting, it's important to remember that the boots need to be comfortable. It is best to have a professional work with you to fit your boots. Try to find a technician who is familiar with foot types and boot lasts. This will ensure that you choose the right boot for your foot and for your ability.

Since ski boots do not allow normal gait and limit the flexion at the ankle, the orthotics that you wear every day are not appropriate for insertion into your ski boots. Special orthotics for skiing can be designed and developed by a podiatric physician, when necessary. When purchasing new boots, you will need to bring those boots to your Doctor of Podiatric Medicine (DPM) so that your foot can be evaluated with the boot.

If you want to ensure that your feet stay comfortable and warm as you manage the moguls, consider purchasing toe heaters. The heaters have a small disk that can be placed in the sock or under an orthotic. Combined with a rechargeable battery pack, these heaters can provide a heat source throughout the day.

NEW PRODUCT SECTION

New Products:

- Silicone spacers for toes
- Silicone crest pads for hammer toes
- Topical antifungal that penetrates thicker nails
- Custom orthoses utilizing a digital scanner
- Custom insoles and diabetic shoes now available at our offices

See our website for details:

<http://www.podiatryaffiliates.com>

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We are pleased to announce that



EDWARD T. FITZPATRICK, D.P.M.
will be joining our practice on November 3, 2008
Wednesday 9-5 • Thursday 9-Noon • Friday 9-5
Amherst Office
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Dr. Fitzpatrick graduated from a three-year podiatry residency program at Beth Israel Deaconess Hospital, Boston, Massachusetts. He completed that program as Chief Podiatry Resident. Dr. Fitzpatrick has spent the past three years practicing at Kaiser Permanente in Fairfax, Virginia.

We welcome Dr. Fitzpatrick to our office. Patients may call to arrange an appointment at any convenient time.