



foot notes

fall 2010

SOLEDOC

Thoughts

The green stuff— What happened to it?

What kind of green stuff? Usually most people start thinking of cash when we talk green, and in the last two years, we all should have been thinking of green preservation. Green in our savings, retirement, environment, and body. Yes, the last is directed toward the body.

Of the aforementioned items we have control of, the one “green” item with the most direct impact is the green affecting our body. *What are you talking about?* you may ask. Well, for starters, we saw how much control we had over retirement green, environmental green, and so forth. Savings went down, and the rest of the green stuff disappeared as well. So what is left?

Focusing on the body green is probably the best choice a person can make—going green inside with proper nutrition and antioxidants that directly affect your skin, the largest organ of the body.

Where to start: investment

The #1 investment is a Vita-mix or equivalent and mixing antioxidant drinks daily, including the pleasant-tasting (you won’t imbibe if it tastes bad) green drinks that contain kale, spinach, and broccoli combined with berries, oranges, and pomegranates, as well as other fresh fruits and veggies. Okay...they’re not all green. But these items all contain phytochemicals that promote healthy skin and deter degradation. They decrease oxidation, which in turn helps stop the destruction of lipids in skin and decreases the production of cancer-producing cells.

Next time you think of green, start at home with your own body. Taking better care of it will allow you to address the other concerns of environment, savings, and retirement.

Without your health, retirement becomes a longed-for illusion.

We only have one life to live, and how we choose to do so is an accumulation of “reasons or results.” A person can choose to live an excused life of reasons or a glorious one of results. The choice is ours, and I would hope in some way that I can be of service in helping any or all of you achieve great results in your life.

—Donald W. Orminski, D.P.M., F.A.C.F.A.S.



Donald W. Orminski
D.P.M., F.A.C.F.A.S.

Board-certified by the
American Board of
Podiatric Surgery

Visit our online
Foot Care Store

on our Web site:

www.cwpods.com



THANK YOU FOR ALL YOUR REFERRALS. WE APPRECIATE THEM!

The skinny on weight gain and feet

As foot and ankle specialists, we devote our time to working with patients to diagnose and treat their foot-related problems.

But we're also interested in our patients' general health and in preventive measures that can benefit their feet and ankles. That's why we want to bring up a rather sensitive topic: your weight.

Research tells us that being overweight—even by 10 to 25 pounds—can increase the chances of developing a variety of painful foot and ankle conditions, including inflammation of the tendons, osteoarthritis, sprains and strains, and more.

Foot and ankle problems often start with posture changes caused by carrying too much weight. As the knees come closer together while walking, body weight shifts, putting pressure on the insides of the feet. This flattens the arches, strains the tendons in the feet and ankles, and may lead to hip and back problems.

Being overweight makes you more likely to develop gout by increasing the production of uric acid in your body, causing sharp, often severe joint pain.

Being overweight also is one of the main factors that raise your risk of diabetes, which, in turn, can reduce the amount of blood flow that reaches your feet. More than 70,000 people with diabetes undergo foot or lower-leg amputations each year as a result.

If you're experiencing foot pain, come in for a consultation, and if you're overweight, consider a weight-reduction program. Low-impact aerobics, such as water aerobics, are great for exercising without hurting your feet and ankles. In addition, check with us to make sure your shoes provide the right cushioning and support for your feet and ankles.



Steps to take to help aging feet

Time takes a toll on our feet. Our feet change as we age, as our tissues weaken and muscle mass declines.

As tendons and ligaments loosen with age, we need bigger shoes, and we need to take care to avoid injuries while walking.

Over time, the front of the foot gets wider as the arch gets lower. This means the foot becomes longer, flatter, and more flexible, so the ankle rolls inward more easily, adding to an unsteady gait and increasing the risk of sprains.

The fat pads that cushion our feet and act as shock absorbers get thinner from the constant force of holding our weight. No matter your size, even if you gain weight as you age, the fat pads get skinnier, causing soreness and pain.

Along the bottom of the foot, the plantar fascia tendon that forms the arch becomes stretched with age. A lower arch can cause bunions, sometimes painful, bony protrusions on the big toe.

While older feet won't ever regain their youthful strength, you can take steps to help your feet age gracefully. Make sure to buy shoes that have good arch and ankle support, and plenty of cushioning, especially in the heel.

You may also need a wider shoe, not just a longer shoe. And remember to exercise your feet and ankles. Basic stretching and weight-bearing exercises help prevent muscle and bone loss and improve circulation to keep the spring in your step, even in the autumn of your years.



HEED YOUR HEELS

Cracked skin on the heels can be more than an unsightly annoyance. It may lead to serious infection.

Heel cracks begin with extra-dry skin. Frequent contact with moisture—whether from prolonged soaking, frequent swimming or hot-tubbing, or even wearing nonbreathable footwear—can make the dry skin even drier.

The key to avoiding problems is to consistently moisturize the feet. Before bed, slather on petrolatum-based emollients like Vaseline® or vitamin A&D ointment—not cream—and wear socks to keep the moisture on the skin, not on your sheets.

Don't take heel cracks lightly. Very quickly, they can produce sufficiently deep breaks in the skin that allow bacterial infections to take hold, which may become serious.

Keep a close check on heel cracks, use normal first-aid care if fissures develop, and always call us for an appointment if you see early signs of infection.

Diabetes facts and figures

We provide diagnosis and comprehensive treatment of diabetic foot conditions.

Diabetic foot ulcers account for more than 70,000 foot and lower-leg amputations each year in the United States.

Comprehensive foot-care programs can reduce diabetic-related amputations by 45 percent to 85 percent.

Dogs' super sense of smell can detect a dangerous drop in blood sugar in a human with 90 percent accuracy. Service dogs can be trained to alert their diabetic owners to low blood sugar by barking, pawing, or licking.

Prevent diabetic foot complications by making sure to:

- Control your blood-sugar levels.
- Wear properly fitted shoes to avoid getting sores.
- Inspect your feet every day; be alert for any changes.
- See us immediately if you have foot cuts, redness, blisters, or swelling.
- Keep regular exam appointments to avoid diabetic foot complications.

Make periodic visits to your primary care physician or endocrinologist, who can work with us to prevent and treat foot complications from diabetes.

Best Foot Forward Crossword

ACROSS

3. Abbreviation for treatment for sprains.
5. Feet have 250,000 of these glands.
9. Newer way to zap warts.
10. Type of fracture often caused by overuse.

DOWN

1. Hard, inflamed lump on toes.
2. Morton's neuroma results from a pinched _____.
4. Painful arthritis that often starts in the big toe.
6. Largest tendon in the body.
7. Ingrown toenails can be caused by trimming nails too _____.
8. Warts are caused by this.

(Answers are on the back page.)



Central Washington Podiatry Service

307 S. 12th Ave., Suite 9
Yakima, WA 98902

PRESORTED
STANDARD
U.S. POSTAGE PAID
MAILED FROM ZIP CODE 17604
PERMIT NO. 242

© Copyright 2010. Newsletters, Ink. Corp. Printed in the U.S.A. www.NewslettersInk.com

The information included in this newsletter is not intended as a substitute for professional podiatric advice. For your specific situation, please consult the appropriate health-care professional.



STOP SMOKING

Help your feet

Every November, the American Cancer Society holds the Great American Smokeout, a time to focus attention on the health risks of smoking tobacco.

Did you know that smoking tobacco can hurt your feet in addition to damaging your lungs and contributing to heart disease?

Often, we can tell if a person smokes just by looking at the skin on the feet, which is often discolored and thinner and shinier than nonsmokers' feet.

It has to do with blood flow. Smoking reduces blood circulation by contributing to the buildup of plaque in the arteries, leading to a condition called peripheral arterial disease, or PAD.

If you smoke, your risk of developing PAD is four times greater than if you don't.

Symptoms of PAD may include leg pain while walking and sores or injuries on the foot that heal poorly, if at all.

In severe cases, surgical procedures can open up the arteries and restore circulation to the foot. However, if the foot is badly damaged due to lack of blood flow, it may require amputation.

So this fall, we're joining our medical colleagues in urging smokers to consider quitting, for the health of their feet.



**Central Washington
Podiatry Service
Dr. Donald W. Orminski**

YAKIMA

307 S. 12th Avenue
Suite 9
Yakima, WA 98902

Appointment Phone:
(509) 248-4900

SUNNYSIDE

803 E. Lincoln Avenue
Sunnyside, WA 98944

Appointment Phone:
(509) 837-4228

BOTH OFFICES

Emergency Phone:
(509) 248-4900

Fax: **(509) 248-0609**

Web site: **www.cwpods.com**

E-mail: **clinic@cwpods.com**

Best Foot Forward Crossword answers:

(From page 3)

DOWN
1. corn
2. nerve
4. gout
6. Achilles
7. short
8. virus

ACROSS
3. rice
5. sweat
9. laser
10. stress

Did you know...

...that smoking tobacco can hurt your feet in addition to damaging your lungs and contributing to heart disease?