Wilton Footcare Associates
Dr. Michael Connor, D.P.M.

News and Updates March 2023

Play Ball! Spring, Baseball, and Foot and Ankle Health

Baseball and softball are not considered contact sports, but players' feet and ankles might beg to differ.

Running the bases, sliding into a base, pivoting to make a play, running on uneven ground, tripping on an object, and fouling a pitch off the ankle or foot all leave players susceptible to lower-extremity fractures and ankle sprains.

For catchers, squatting for long stretches renders them vulnerable to plantar fasciitis due to the excessive pressure being placed on their arches and heels. These conditions are ripe for heel spurs, too.

There is also a lot of standing around in baseball, then in an instant, a player is in full sprint mode. These sudden stop-and-goes heighten the risk of Achilles tendonitis.

Players can diminish their chances of injury by scanning the field for hazards prior to playing, doing gentle stretching and/or light jogging before taking the field, and wearing protective equipment such as foot/ankle guards to fend off foul balls while batting. Proper technique is also a factor in reducing baseball injuries (e.g., sliding).

Wearing good shoes is key, too. Molded cleats are an excellent choice, but they should be worn a few times prior to playing to gain a feel for them. Kids should never wear hand-me-downs. Baseball shoes should be fitted by a footwear specialist, with the wearer donning the type of socks they'll be playing in.

You or your child can't go wrong with a preventive foot and ankle exam at our office. We can also treat current foot and ankle injuries, recommend or prescribe orthotics, and assist with proper shoe selection/fit. Give our office a call today.

About the Doctor

Michael Connor, DPM

Dr. Connor has been in private practice in Wilton, CT for the past 30 years. He is on staff at Norwalk Hospital and is Board Certified in Podiatric Surgery. He treats all foot and ankle problems from children to adults with special interest in sports medicine and diabetic footcare.

Get Social w/Us

Tendons Not Named Achilles

Tendons are bands of tissue that connect muscle to bone. The Achilles tendon gets the spotlight in the foot/ankle area, but the peroneal tendons sometimes stir the pot, especially in athletes and dancers.

Each foot has two peroneal tendons. They run next to each other behind the outer ankle bone, then part company. One attaches to the outer part of the midfoot; the other makes a beeline to the inside of the arch.

The peroneal tendons stabilize the foot and ankle and are key components in preventing ankle sprains during activities with a lot of repetitive ankle motion. They also contribute power when pushing off.

Peroneal tendons can be irritated or injured in several ways:

- **Repetitive use, overuse, and trauma (e.g., ankle sprain)** may cause inflammation (tendonitis), pain, and swelling to one or both tendons.
- An **acute tear** in a tendon occurs suddenly via trauma or repetitive activity. A **degenerative tear** is due to overuse over a long period of time. The tendon gets overstretched, thins out, frays, and eventually tears. Tears are, unsurprisingly, painful and frequently cause swelling, weakness, and overall instability. High arches are an added risk factor for degenerative tears.
- **Subluxation** means that the tendons have slipped from their normal position. Trauma can do it; sometimes an inherited condition is responsible. A person may feel a snapping sensation around the ankle bone, intermittent pain behind the outside ankle bone, or weakness or instability in the ankle.

Following an exam and proper diagnosis at our office, conservative treatment measures are highly successful for inflammation. Subluxations may be managed conservatively, but many eventually require surgery. Tears often require surgery, with factors such as age, activity level, and overall health playing a role.

Mark Your Calendars

March 2 Dr. Seuss's birthday: He had neither a doctorate nor children, and his name is actually pronounced "Soice"!

March 7 National Cereal Day: Ranger Joe Popped Wheat Honnies was the first sweetened cereal (1939).

March 12 Daylight saving time begins: Only 70 of 195 countries observe daylight saving time.

March 17 St. Patrick's Day: The shortest St. Patty's Day parade route is 98 feet (Hot Springs, AR).

March 20 First day of spring: Children's growth rates are fastest during the spring (like weeds!).

March 25 Tolkien Reading Day: While pondering a sequel to The Hobbit, J. R. R. Tolkien initially named Bilbo Baggins' nephew "Bingo" instead of "Frodo."

March 27 World Theatre Day: *The Lion King* is the highest-grossing Broadway production of all time.

Building Happy (and Stronger) Memories with Pets

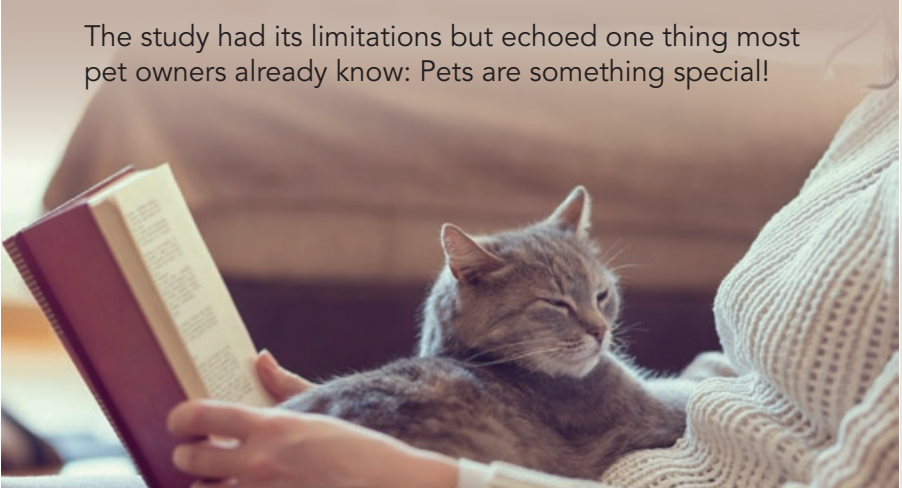
A study released at the American Academy of Neurology's 2022 annual meeting suggests that pet ownership may be a factor in delaying memory loss and other forms of cognitive decline in older adults. Prior studies have shown that the human–pet bond has positive health benefits such as lowering blood pressure and reducing stress levels. The 2022 study is the first to explore its effects on cognitive health.

The 1,369 study participants averaged 65 years of age at the start of the study and possessed normal cognitive function. Approximately 725 participants had pets, with roughly 440 of them having been long-term pet owners. Dogs and cats dominated the pet landscape, but rabbits, hamsters, birds, reptiles, and fish were represented as well. The study spanned six years and included multiple types of cognitive tests.

Over that time, cognitive scores decreased at a slower rate for pet owners, especially those who owned pets for more than five years. Since chronic stress is a risk factor for impaired cognitive abilities, researchers hypothesize that pet ownership may be an effective counter, as social companionship, a sense of duty and purpose, and the physical activity required to take care of some pets can lower stress, helping to fend off cognitive decline.

Researchers point out that it would not necessarily be a good idea for an older person to rush out to purchase a pet to preserve their brain power. If they already suffer with certain chronic physical or mental-health conditions, it could be a negative — for both owner and pet.

The study had its limitations but echoed one thing most pet owners already know: Pets are something special!



Diane's Colcannon

Servings: 8; Prep time: 20 min.; Cook time: 25 min.; Total time: 45 min.

Colcannon is a traditional Irish dish consisting of mashed potatoes with cabbage or kale. This budget-friendly dish can be served as an entrée or side dish, often alongside boiled ham or corned beef.

Ingredients

- 2½ pounds potatoes, peeled and cubed
- 4 slices bacon
- ½ small head cabbage, chopped
- 1 large onion, chopped
- ½ cup milk
- salt and pepper to taste
- ¼ cup butter, melted

Directions

1. Place potatoes into a saucepan with enough water to cover. Bring to a boil and cook until tender, 15 to 20 minutes. Drain.
2. While potatoes are cooking, cook bacon in a large skillet over medium-high heat, turning occasionally, until evenly browned, about 10 minutes. Drain bacon slices on paper towels; crumble and set aside. Reserve drippings in the skillet.
3. Sauté cabbage and onion in drippings in the skillet over medium heat until soft and translucent, 10 to 15 minutes; cover the skillet to decrease cooking time if desired. Remove from heat.
4. Mash potatoes with milk in a large bowl; season with salt and pepper. Fold in bacon, cabbage, and onion, then transfer mixture to a large serving bowl. Make a well in the center of potato mixture and pour in melted butter. Serve hot.

Recipe courtesy of www.allrecipes.com.

EPAT

Wilton Footcare Associates
Dr. Michael Connor, D.P.M.
27 Danbury Rd., Wilton, CT 06897 USA
203-761-1230 • WiltonPodiatry.com

The most advanced noninvasive treatment for musculoskeletal pain, extracorporeal pulse activation treatment (EPAT) is the most advanced and highly effective non-invasive treatment method cleared by the FDA. This proprietary technology is based on a unique set of pressure waves that stimulates the metabolism, enhances blood circulation and accelerates the healing process. Damaged tissue gradually regenerates and eventually heals. Learn more about EPAT here.

What are the possible side effects/complications? The noninvasive EPAT treatment has virtually no risk or side effects. In some cases patients may experience some minor discomfort which could continue a few days. It is normal to have some residual pain after intense exercise or a full day workout

What are the expected results? The beneficial effects of extracorporeal pulse activation treatment (EPAT) are often experienced after only three treatments. Some patients experience complete pain relief after the treatment, although it could take up to four weeks for pain relief to begin. The procedure eliminates pain and restores full mobility, thus improving your quality of life. Over 80% of patients treated report to be pain free/and or have significant pain reduction

Is it safe? Yes, this FDA cleared technology was developed in Europe and is currently used around the globe. A wealth of medical experience, state-of-the-art engineering and optimal quality have been built into each EPAT device, and extensive clinical studies and tests have confirmed its safety and efficacy

If performed by a qualified caregiver ExtracorporalPulse Activation Treament (EPAT) has virtually no risks or side effects

Why Consider Non-Invasive EPAT? EPAT has a proven success rate that is equal to or greater than that of traditional treatment methods (including surgery) and without the risks, complications and lengthy recovery time. EPAT is performed in the office, does not require anesthesia, requires a minimal amount of time, patients can bear weight (walk) immediately and return to normal activity within a few days of the procedure.

Benefits of Non-Invasive EPAT: Patients are immediately full weight-bearing; No incision – no risk of infection at the treatment site – no scar tissue formation; Patients are able to return to work/normal activities within 24–48 hours, resuming strenuous activities after four weeks; Patients evaluated for success at 12 weeks; Over 80% successful outcomes (Published data – Long-term pain relief – results retained); Cost Effective; Reduced cost from lost work; Fast, safe and effective; Does not require anesthesia

CALL 203-761-1230 for your appointment.

A Chip Off the Old … Bone

An avulsion fracture occurs when a tendon or ligament breaks off a small piece of the bone it's attached to. Direct force, sharp twists and turns, and sudden acceleration and stops can trigger an avulsion fracture. The attached ligament or tendon may be damaged as well.

In the lower extremities, avulsion fractures commonly strike the ankle, heel, and fifth metatarsal bone in the foot. Those who play sports and dancers are most at risk, with kids being even more susceptible due to growth spurts, as some bone is not fully hardened.

Symptoms include an initial popping sensation, pain, swelling, bruising, and increased pain with movement — often mimicking other conditions (e.g., ankle sprain). Delay in attaining an accurate diagnosis can lead to nerve irritation and chronic pain.

An avulsion fracture is generally diagnosed with an exam and X-ray. If the bone chip is too small for an X-ray to detect, a different imaging test may be called on. Avulsion fractures can frequently be treated conservatively with rest and ice packs. Others may require a boot or cast for immobilization, or crutches to keep weight off the affected area.

If the bone that chipped off is too far from the main bone to heal with conservative measures, surgery may be necessary.

Avulsion fractures take anywhere from a few weeks to six months to heal. It depends on the location and severity of the fracture, the type of treatment, and age and overall health of the patient.

If you experience nagging foot or ankle discomfort, your body is trying to tell you something. Give us a call to find relief.