
Feet - problems and treatments

Summary

- Most common foot problems can be easily avoided and simply treated.
 - Make sure that you and your children wear shoes that fit properly and support your feet.
 - Abnormalities in the movement of your feet or legs, poor technique or incorrect footwear may cause foot or shin pain.
 - Seek advice from a podiatrist regarding the best treatment for you.
 - People with diabetes should check their feet daily and have them assessed by a podiatrist at least once a year.
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Many things can cause foot pain and injury. The repetitive way in which our feet and legs move is very important. Podiatrists assess abnormalities in foot and leg movement – as well as techniques, surfaces and footwear – when diagnosing causes and prescribing treatments for foot and leg pain.

Foot pain

Many people have pain in the base of their foot. This could be due to overuse of one of many different structures in your foot. Common examples are sesamoiditis (inflammation of structures surrounding two small bones under the big toe joint) and plantar fasciitis (overuse of a ligament-like structure that runs underneath the length of the foot).

Pain on standing first thing in the morning is a classic symptom of plantar fasciitis. It is one of the most common problems experienced by runners, accounting for about 10 per cent of running injuries. It is also common among middle-aged people, particularly if they are overweight. It often starts with low-grade pain in the arch or heel of the foot and can get worse over weeks or months.

Causes of foot pain

Foot pain is usually caused by a mechanical problem with your feet such as poor foot biomechanics, muscle imbalances, poor training techniques or incorrect footwear.

Treatment of foot pain

A podiatrist may prescribe an insole and assess your footwear. Continuing problems may need a cortisone injection or surgery. However, most people with plantar fasciitis don't need injections or surgery.

Flat feet, fallen arches and foot pain

'Flat feet' and 'fallen arches' are terms used to describe lowering of the long inner arch of the foot.

In the past, we thought that flat feet were a sign of a poorly developed or poorly structured foot. Now we know that people with flat feet function generally well and that flat feet don't cause many foot problems. The most important factor in foot soreness and injury is not how flat or high your arches are, but the way you walk and move. If your feet move abnormally while you are walking or standing, this can make you more prone to injuries and foot soreness.

Shin splints or shin pain

'Shin splints' is a term covering a number of common pains that occur in the shin area during or after sport. The pain can come from a number of structures in the shin area, including tendons, muscles, bones and ligaments, and occurs at the point where muscle attaches to bone at the front or inside of the shin.

Causes of shin pain

Shin pain usually occurs because of poor biomechanics (the way your feet and legs move while you run or play sport), poor training techniques or, in some cases, over-training. The surface you are running or playing your sport

on can also contribute to shin pain. A podiatrist would consider all of these elements when assessing your shin pain and deciding on the best remedy.

Warming up and stretching before sport, and cooling down and stretching afterwards, can help prevent shin pain.

Corns and calluses on the feet

A callus is an area of hard, thickened skin on the foot that forms in response to pressure or friction, usually through poor-fitting shoes. When pressure is concentrated in a small area, a corn, which has a central core, may develop. If the pressure is not relieved, calluses and corns can become painful.

Common sites of corns and calluses are the ball of the foot, under the big toe, tips of toes and any bony prominence. 'Soft' corns may develop between the toes, where the skin is moist from sweat or inadequate drying. Sometimes, the pressure of the corn or callus may cause inflammation, which can result in pain, swelling and redness.

Symptoms of corns and calluses

The symptoms can include:

- Thickened patch of hard skin on the foot
- Hard, small bump of skin that may have a central core
- White and rubbery bumps of skin ('soft' corns)
- Pain when pressure or friction is applied to the area.

Causes of corns and calluses

Anyone can develop corns or calluses, but some groups of people are particularly at risk, including:

- Elderly people – because ageing skin loses elasticity and fatty tissue
- People who spend a lot of time standing up – because of the continuous weight-bearing pressure on their feet
- People with feet that roll inwards (flat feet) – because of excessive pressure on the ball of the foot beneath the big toe, and the inside of the heel
- People with feet that roll outwards (high-arched feet) – because of excessive pressure on the outside of the foot
- A person with foot complaints (such as a hammer toe, bunions or arthritis) – because a bony prominence can rub against the shoe or neighbouring toes
- People who regularly wear shoes that are narrow, tight, ill-fitting or high-heeled.

Treatment for corns and calluses

The body protects skin tissues from pressure or friction damage by producing an area of hard skin. So unless the cause of the pressure or friction is found and removed, calluses and corns will continue to form. Over-the-counter treatments, such as corn plasters, can damage the healthy surrounding skin if you use them incorrectly. Never try to cut away or scrape a callus, as there is a risk of infection if you accidentally cut yourself.

If you have corns or calluses, or think you may be developing them, see a podiatrist for treatment. Options may include:

- Identifying and removing the cause of friction and pressure
- Professional reduction of the callus or corn to relieve pain
- Customised padding to redistribute pressure
- Permanent shoe inserts (orthoses) to offer long-term pressure relief
- Advice on appropriate footwear
- Advice on appropriate foot care, such as applying moisturiser daily.

Corns and calluses in people with diabetes

Care of all foot problems is particularly important for people with diabetes. Be guided by your doctor or podiatrist, but general suggestions include:

- Make foot care part of your daily routine. Look at and feel each foot for signs of injury including bruises, blisters, broken or cracked skin, hot or cold areas, corns and calluses, and discolouration. If your eyesight is poor, get someone else to check your feet for you.
- If you find a cut or break in the skin, wash the area with warm salty water, apply an antiseptic and cover with a clean dressing.
- Do not treat corns and calluses yourself. Seek advice from a podiatrist.

Tinea on the feet

Tinea is a contagious fungal infection of the skin. It is easy to catch and is often picked up in public areas, such as communal showers. It usually develops between the toes and along the arch of the foot. The skin can change in appearance, becoming red, moist and itchy, and sometimes developing small blisters.

Avoiding tinea

To avoid catching tinea you should:

- Wear shoes whenever you are in public areas
- Wear thongs in public showers.

Treatment for tinea

Treatments for tinea include:

- Anti-fungal creams available from a pharmacist
- Asking a podiatrist for advice.

Bunions

Bunions are a foot deformity in which the first joint of the big toe becomes prominent because the big toe leans inwards. The joint is easily inflamed by pressure and can be very painful.

Treatment for bunions

Treatments for bunions include:

- Wearing shoes that fit properly and do not have a high heel
- Asking a podiatrist for advice
- Surgery in some cases.

Papillomas

Papillomas, also known as warts, are caused by a virus. They are commonly picked up in humid communal environments such as public showers and swimming pools.

Preventing papillomas

The best way to avoid catching papillomas on your feet is to wear thongs in public places such as showers and pools.

Treatment for papillomas

Papillomas often go away without treatment. However, treatment can minimise the risk of the infection spreading. You can buy over-the-counter preparations from the pharmacist, but seek advice from a podiatrist, as there are many different treatment options.

Ingrown toenails

Ingrown toenails are generally caused by poor nail-cutting technique, abnormal nail shape or poorly fitted footwear.

Prevention of ingrown toenails

Ways of avoiding ingrown toenails include:

- Do not cut nails into the corners – this can leave a spike of nail that can embed itself into or irritate the flesh next to the nail. If you do have to cut your toenails into the corners, make sure that a nail spike is not left behind.
- Make sure that you and your children wear shoes that fit properly.

Treatment of ingrown toenails

Some people have toenails that are prone to ingrowing regardless of how they cut them. In these cases, the only permanent solution is to remove the outer margins of the nail through a minor surgical procedure. Seek advice from your doctor or a podiatrist.

Diabetes and foot problems

People with diabetes have a greater risk of serious foot problems. They should check their feet daily for cuts, blisters, bruises or signs of injury. They should also wear well-fitted shoes that protect their feet from injury.

The main risk factors for the feet of people with diabetes are:

- Impaired circulation can delay healing.
- Nerve damage can cause people to lose sensation in their feet. This means a person may not know that their shoe is rubbing or that they have cut their foot.

Where to get help

- A podiatrist
- Your doctor
- Your local community health centre
- Australian Podiatry Association (Vic.) to find a podiatrist in your local area Tel. (03) 9895 4444.

Things to remember

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