

# Put Your Best Foot Forward

By: Joel Hirschberg, MD



The foot is a complex structure consisting of 26 bones, 33 joints, more than 100 muscles, tendons, ligaments, blood vessels, nerves, skin and soft tissue that work together to provide our bodies with support, balance and mobility. The average person walks more than 100,000 miles in a lifetime — the equivalent of walking from Los Angeles to New York City more than 35 times!

Even if we don't participate in long-distance walking or other sports, activities of everyday living have a major impact on our feet. Because of the number of joints in the foot and the strain we put on them, arthritis is a major cause of foot problems. The pain and stiffness caused by arthritis, and the inability of the foot to function normally, also contribute to problems elsewhere in the body.

**TYPES OF ARTHRITIS** There are more than 100 types of arthritis, but the three most often associated with the foot are: Osteoarthritis: a condition in which the cartilage in the joints wears away, making movement difficult and painful. Rheumatoid arthritis: the most crippling form of arthritis, it can cause severe deformities of the foot including bunions, hammertoes and other painful abnormalities. Gout: generally affecting the big toes, gout is caused by an excess of uric acid that collects and crystallizes in and around the joints. **MAKING A DIAGNOSIS** Since most therapies work best when started early, it is important that a diagnosis be made as soon as symptoms such as pain, swelling or stiffness occur. A physician may ask: When did the pain first occur? Is the pain constant or does it come and go? Is it worse during physical activity, at night or first thing in the morning? Has there ever been an injury to the foot? The evaluation may also include a gait analysis to show how the bones in the leg and foot line up, and to test the strength of the feet and ankles, as well as an X-ray, MRI or CT scan.

**ARTHRITIS TREATMENT OPTIONS** Treatment recommendations depend upon the type and severity of arthritis and on the individual patient. Oral medications and supplements: non-steroidal, antiinflammatory drugs (NSAIDs), such as ibuprofen, help reduce inflammation and pain. Glucosamine and chondroitin may help relieve pain. Orthotic devices (shoe inserts): provide support to improve the mechanics of the foot and relieve foot, leg and back pain and stress. Bracing: restricts motion and supports the joint to reduce pain and to prevent further deformity. Immobilization: protects the foot from movement to allow inflammation to subside. Steroid injections: reduce inflammation through injections directly into the joint. Physical therapy: strengthens the muscles for greater stability and to prevent injury. Surgery: Recent advances in techniques have made foot surgery a viable option for patients of all ages. **LIFESTYLE CHANGES CAN HELP** Losing even a few pounds can reduce pressure on the feet. Exercising regularly keeps joints moving. If arthritis makes weight-bearing exercises difficult, swimming may be a good alternative. Wear comfortable shoes with good arch supports and plenty of "wobble room" for the toes. (These days, it shouldn't be necessary to sacrifice style for comfort!) Allow time for stiff joints to loosen up after a period of inactivity, for example, when getting up in the morning. Alternate periods of standing and sitting to take weight off the feet. **EVENTS** Arthritis — What's New on the Horizon? Friday, December 8, 1:30 to 3 p.m. Arthritis — What Are the Treatment Options? Friday, January 19, 1:30 to 3 p.m. Joel Hirschberg, MD, Rheumatology, and Medical Director, Arthritis Program Annenberg Center for Health Sciences 760-773-4535