



Congested Traffic at the Tarsal Tunnel

The tarsal tunnel is a narrow space located on the inside of the ankle. It is formed by the ankle bones and a band of ligaments that stretch across the foot. The ligaments act as protectors for arteries, veins, tendons, and nerves that are passing through.

The largest nerve entering the foot travels through the tarsal tunnel, the posterior tibial nerve (PTN). It is responsible for the sensation we feel on the sole of the foot and coordinates with muscles in the bottom of the foot to direct movement. When the PTN is compressed, discomforting things happen.

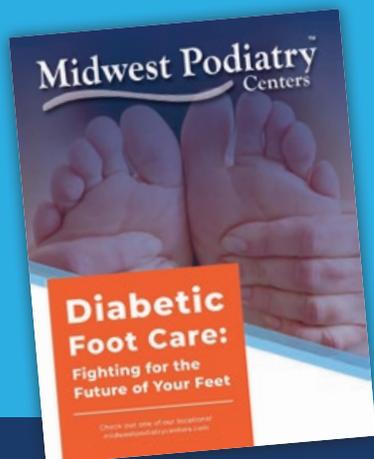
PTN compression typically prompts a tingling or burning sensation; numbness; or outright pain, including shooting pain in one's inner ankle that frequently extends into the foot. For some people, the discomfort may also involve the heel, extend to the arch or even the toes, or head north to one's calf.

Risk factors for tarsal tunnel syndrome include the following:

- Overpronation.
- Flat feet (sometimes a byproduct of overpronation).
- Ankle injuries (e.g., swelling, inflammation).
- Unwelcome visitors occupying space in the tarsal tunnel (e.g., varicose vein, ganglion cyst, tumor, or bone spur).
- Diabetes or arthritic conditions.
- Overuse (e.g., prolonged standing, walking, or running).

Left untreated, tarsal tunnel syndrome can cause permanent nerve damage. Early intervention using conservative measures has a good success rate in eliminating it or keeping it well managed. Surgery may be recommended in severe cases to release the nerve or to remove a growth.

Before treatment, a thorough evaluation and accurate diagnosis are required. That's where our office comes in. If you suffer from any lingering foot or ankle discomfort, please don't hesitate to give us a call.



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One Face of Diabetes: Peripheral Neuropathy

Peripheral neuropathy is a nerve disorder that typically affects the extremities. Repercussions for feet include a sensation of tingling, burning, or shooting pain; numbness; or impaired muscle movement.

Causes of peripheral neuropathy (PN) include blunt trauma (e.g., auto accident, sports injury), repetitive-stress injuries, certain medications, vitamin B12 deficiency, and alcoholism, among others. However, according to the American Podiatric Medical Association, the most frequent cause of PN is uncontrolled diabetes. Sixty to 70 percent of diabetics who aren't as vigilant in their care regimen as they should be will develop diabetic PN.

Numbness in the feet is of particular concern. Tingling or movement issues alert a person to a problem. With numbness, someone may develop a blister or suffer a scrape or laceration and never realize it, rendering them more susceptible to a dangerous ulcer and infection. Those with diabetic PN may also fail to sense damaging heat, cold, or pressure.

Although there is no cure for diabetic PN, the following measures can help manage it successfully:

- Prescription medications to relieve pain and burning.
- Physical therapy to improve balance and the ability to walk more easily.
- Custom orthotics to limit the movement of feet within shoes, decreasing friction; or to reduce pressure on vulnerable areas of the foot.
- Transcutaneous electrical nerve stimulation (TENS) treatment to alleviate pain.
- Daily foot inspections. Report any changes to your podiatrist, such as redness, swelling, sores, cuts, calluses, corns, blisters, etc.

Preventing diabetic PN is an even better remedy. Diligence with one's diabetes treatment regimen, a healthy diet, daily exercise, avoiding excessive alcohol intake, and quitting smoking are key.

Welcome Dr. Lisa Thatcher



We are thrilled to introduce our newest addition to the Midwest Podiatry Centers team, Dr. Lisa Thatcher. Dr. Thatcher brings experience and a passion for making sure that her patients do not have to live with foot or ankle pain. She feels strongly that the betterment of health care is an asset to the medical community. Dr. Thatcher received her Bachelor of Arts degree in Biology from Rollins College and went on to Barry University where she completed her education becoming a Doctor of Podiatric Medicine. She enjoys treating all types of foot and ankle conditions and likes to emphasize conservative care over surgical care. Dr. Thatcher performs various forefoot and rearfoot procedures when needed, and was surgically trained near Philadelphia, PA. Her philosophy in patient care has always been simple, treat them like family. She feels that everyone deserves to not only be treated by well-educated doctors, but by ones that truly care. Dr.

Thatcher is an artist and avid CrossFitter. She enjoys hiking, traveling, and exploring with her husband.

Please join us in welcoming Dr. Lisa Thatcher to our MPC family, she is looking forward to meeting patients and building relationships with them.



Ready Your Feet with Some Morning Stretches

There's nothing like waking up refreshed and ready to take on the day—unless you feel a sharp jolt of heel pain as soon as your feet hit the floor.

This symptom is often a sign of a problem that may need professional treatment, such as plantar fasciitis. We highly recommend letting us know if this sort of thing happens to you.

In the meantime, performing some stretches in the morning can help lessen that initial painful impact—plus it's good for you even if you don't have morning heel pain! Here are a couple easy morning exercises to try from the comfort of bed.

Towel Stretch

- You will need a towel that you can use as a strap, but a belt or resistance band will also work perfectly fine.
- Sit in bed with one leg out in front of you. Loop the strap around the underside of your foot, along the ball of the foot and toes.
- Take an end of the strap in each hand and gently pull back, flexing the top of the foot back.
- Hold for 30-45 seconds, repeating up to three times with each foot.

Toe Extension

- Sit with one leg crossed over the other. Grasp the toes of the crossed leg with one hand.
- Gently flex your toes back and flex your ankle upward as far as comfortably possible, feeling a stretch in the arch and your calf.
- Hold for 10 seconds, release, and repeat for 2-3 minutes per foot.

We can help you find additional stretches to meet your needs. Don't be afraid to ask!



Cilantro Lime Grilled Salmon

Yield: 4 servings; Prep time: 10 minutes; Total time: 25 minutes

Ingredients

- 4 (6-oz.) salmon fillets
- kosher salt
- freshly ground black pepper
- 4 tbsp. butter
- 1/2 c. lime juice
- 1/4 c. honey
- 2 garlic cloves, minced
- 2 tbsp. chopped cilantro

Directions

1. Season salmon with salt and pepper. Heat grill and place salmon on grill, flesh side down. Cook for 8 minutes then flip and cook on other side until salmon is cooked through, 6 minutes more. Let rest 5 minutes.
2. Meanwhile, make sauce: In a medium saucepan over medium heat, add butter, lime juice, honey, and garlic. Stir until butter is melted and all ingredients are combined. Turn off heat and add cilantro.
3. Pour sauce over salmon and serve.

HELPFUL TIPS:

- The skin helps keep the salmon together while cooking, makes flipping the fish a lot easier, and offers crispiness and great taste. You can go skinless, but it takes much more finesse. Besides, the skin can always be removed after cooking. Your call.
- Good-quality salmon's doneness can be checked with a fork. Once it easily flakes upon a bit of pressure (at the thickest part of the fillet), it should be good to go.
- Fish obviously sticks to grill grates, but as soon as those lovely char marks are achieved, the fish will release from the grates and will be super-easy to flip. If you're feeling ANY resistance when you peek at the underside of your fish, DON'T flip!

Recipe courtesy of www.delish.com.

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What the Color of Your Toenails Might be Trying to Tell You

Some toenails are a canvas for painting all sorts of colors, but what about the color of your nails when the polish and other decorations come off?

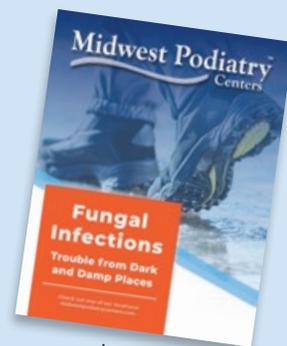
If your toenails are no longer the clearish hue they once were, it might be a sign of something afoot. In some cases, it might simply be the case of polish staining the nails over time, but other conditions can manifest a change in toenail color as well.

Your best option if you notice a change in your toenail color is to let us know. There are many reasons why toenails might change color, and we have the tools and expertise to help you determine what exactly is going on.

In general, however, here are a few possibilities:

- **A fungal toenail infection** will almost always result in a change in nail color, as well as thickening, brittleness and other unsightly symptoms. Common colors you may see from a fungal infection are yellowish, red-brown, green, or black.
- **Certain medical conditions** can also cause color changes. These may include diabetes, circulation issues, or heart and lung conditions. We may ask about your medical history if we are examining your nails for these reasons.
- **Trauma to the nail** can also cause discoloration that may last for longer than you expect. This can include black toenails in runners, which often causes the nail to fall off.

If your toenails are not the right shade, you should definitely bring it to our attention. We may have recommendations and treatments for you to regain natural clarity—and perhaps address an underlying



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