

Dr. Pamela Kirby, DPM

Board Certified in Primary Podiatric Medicine

Practicing podiatry locally for over 18 years!



What is this newsletter trying to achieve?

Our mission to treat your foot problems don't stop at the office, we want to help educate our patients with overall knowledge of how to care for their feet and prevent future problems from occurring. This newsletter will bring you the latest in podiatry trends and what we have going on in the office. We look forward to providing you with helpful information and encourage your feedback on concerns you may have, or things you would like to see in the office.

New Patients:

Dr. Pamela Kirby's office is looking for new patients who are looking for the best in quality foot care. We are currently accepting new patients and can have them coming into the office as soon as a day or two as openings available.

When Should I See A Podiatrist? Find Out Here:

Every local drugstore has aisles of "do-it-yourself" medical fixes. For your feet they have blister and corn pads, insoles, fungus sprays, and nail clippers. So when you have foot and ankle problems, how do you know when to deal with them at home using over-the-counter (OTC) products and when to see the podiatrist?

- Blisters on your feet can often be handled at home without professional intervention. If the blister pops, cover it with a sterile dressing or Band-aid and watch it carefully to make sure it heals properly. If you suspect that you have an ingrown nail, it is best not to use OTC products. See your podiatrist as soon as possible to avoid the possibility of infection. The doctor can safely remove the ingrown nail and may be able to alleviate the problem entirely for the future.
- OTC wart removal medication is relatively mild but can cause ulcerations if left on too long. You can try to alleviate warts on the feet with these products, but the podiatrist has more effective medications and can also do simple procedures to rid you of warts. Wart removers should never be used if you have neuropathy except under the supervision of a podiatric physician.
- Despite numerous blogs and articles about treating onychomycosis (fungal nails) and warts with Vicks VapoRub, duct tape, bleach, white vinegar, and other household items, there are no scientific data or evidenced-based research studies to support these treatment options.
- Sprains and strains can be treated at home initially with the "RICE treatment" - rest, ice, compression, and elevation. If swelling is persistent, a visit to the podiatrist's office is in order to determine if there are any broken bones.
- Occasionally, home remedies can cause a new problem or make existing problems worse, so use them all in moderation. Anyone with diabetes or a peripheral vascular disease (PVD) who has foot and ankle problems should always opt to visit the podiatrist for even minor concerns. People who do not have diabetes or PVD should also be wary of pain, color changes, drainage, swelling, heat, or open areas in or on any part of the foot or ankle. These signs warrant a professional's experience in dealing with the problem.

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 Office Hours Monday thru Thursday 7:30 am-5:00 pm & Friday 7:30am-4:00pm
 Lunch 12:30pm-2:00pm

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DR. PAMELA KIRBY, PA

The Stride

New Foot Care Technologies (Footprints, Chicago)

Podiatric medicine and surgery are changing rapidly, as is all of medicine. Doctors of podiatric medicine now use the latest technology both in their offices and in the hospitals to diagnose and treat foot and ankle problems. These technologies are changing the face of medicine, and your doctor can provide you with more information. Ultrasound - Although x-ray is still used in most medical offices, ultrasound is another diagnostic technique available to your podiatrist. This technology allows for better visualization of the soft tissue structures, such as tendons and

evaluation of joints in motion. Also, there is orthotic scanning. Your doctor may have taken a plaster cast mold of your feet to make orthotics specifically for your individual feet. While this technique is used, there is new technology that allows your podiatrist to scan your foot with an



electronic device that capture the necessary data to contrast your custom orthotic. This is a big advancement and no sticky mold which can sometimes be a hassle for the patient and the podiatrist. And what is in store for the future, you ask? Well, being that fungal toenails are very common, podiatrists can treat this with a lot of different remedies. However, currently under consideration by the FDA is a laser treatment that will resolve fungal toenails and other fungal infections. Ask your podiatrist for more information on this new treatment.

If athletes get athlete's foot, do astronauts get mistletoe?

Go Online and Check Out the New Site:
www.pamkirby.com



We have updated our site this month and have changed things around a bit. There are some changes to the new patient forms and the privacy policy, so those are important to look over. Also, we have included all of our new and current staff under our "Staff" page and you

can see who works behind the scenes of this amazing practice. You can also check out some of our informational videos, hosted by Dr. Pamela Kirby herself, which can give you insight into some of the foot problems you may be having or existing foot conditions. Go check out the website and see

Running Barefoot? On the Beach?

Barefoot running has become an increasing trend and a possible alternative or training adjunct to running with shoes. While anecdotal evidence and testimonials proliferate on the Internet and in the media about the possible health benefits of barefoot running, research has not yet adequately shed light on the immediate and long term effects of this practice. Barefoot running has been touted as improving strength and balance, while promoting a more natural running style.

However, the risks of barefoot running include a lack of protection—which may lead to injuries such as puncture wounds—and increased stress on the lower extremities. Currently, scientific research has been inconclusive regarding the benefits and/or risks of barefoot running. Your best choice is to consult a podiatrist with a strong background in sports medicine to make an informed decision on all aspects of your running and training programs.



Bunions: Causes and What Can I Do?

A bunion is an enlargement on the side of the foot near the base of the big toe (hallux)—the metatarsophalangeal (MTP) joint. A bunion forms when the bone or tissue at the big toe joint moves out of place. The toe is forced to bend toward the others, causing an often painful lump of

bone on the foot. Wearing improperly fitted shoes is partly to blame for your bunions, but your shoes are not the underlying cause. Heredity definitely plays a role as well. You do not inherit the bunion, but you inherit the foot type that may lead to bunions.

Treatments for bunions include:

- **Wearing the Right Kind of Shoe**—Shoes should have a wide, flexible sole to support the foot and provide enough room in the toe box to accommodate the bunion.
- **Medications**—Anti-inflammatory drugs and cortisone injections can be prescribed by your podiatric physician to ease acute pain and inflammation.
- **Orthotic Devices**—In some cases, custom orthotic devices may be provided by your podiatric physician.
- **Surgical Options**—If conservative measures fail and you still have pain that interferes with daily activities, you may need surgery to relieve pressure and return the toe joint to its normal position.



Fungus on Your Toes? We Can Take Care of That!

I really wanted camouflage shoes, but I couldn't find any.

Do you have thick, yellowish, brittle, and easily cracked or broken toenails without having injured them? They are likely discolored due to a fungal infection called onychomycosis, which is the most common disease of the nails. The nail weakens as fungi continue to grow through the nail tissue. Since fungus grows faster than the nail, damage increases and the nail becomes more and more unsightly, with the infection spreading to the root or base of the nail. Yeast and molds are also suspected to cause toenail fungus. These types of fungi exist in warm and moist environments, like shower areas, locker rooms, swimming pools, and even your shoes (as toes are usually encased in shoes). People with circulatory problems, weak immune systems, or diabetes are at greater risk of developing fungal infections as well. Nail fungus has been difficult to treat with success. The only options in the

past have been topical or oral medications, which provide limited benefit. In addition, oral medication may cause liver damage. Now there is a safe, effective laser treatment for nail fungus. The laser destroys the fungus that causes onychomycosis with very little effect on the surrounding tissues. Treatment normally takes fewer than 20 minutes and there is no pain, although sometimes you may experience a warm or

tingling sensation. There are no age or health restrictions for laser treatments. Laser toenail treatment is considered aesthetic (cosmetic). Therefore, most health insurance plans do not cover treatment, and it can be costly. Consult with your podiatric physician to determine if this course of treatment is right for you.

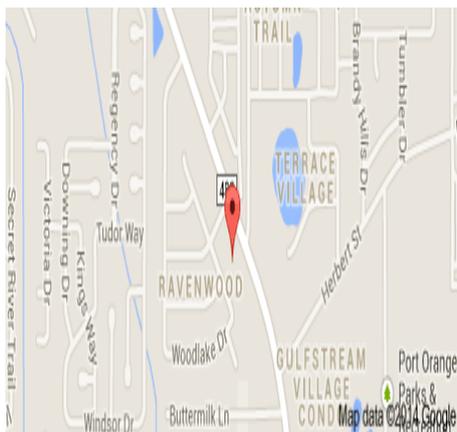


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The Stride

*Brought to you by the Office of
Dr. Pamela Kirby, PA*

Edited by Addison Kirby

Come See Us and Get Back On Your Feet!

Healthy Meals for Our Diabetic Patients **GOOD FOR ALL!**

Ingredients

- 6 sweet potatoes, cut into French fries
- 2 tablespoons canola oil
- 3 tablespoons taco seasoning
- 1/4 teaspoon cayenne pepper (if you want to add some spice and seasoning.)



Spicy Sweet Potato Fries

Calories:	169 kcal
Protein:	2.1 g
Sodium:	399 mg
Cholesterol:	0 mg
Fat:	4.7 g
Carbohydrates:	29 g

Directions

1. Preheat the oven to 425 degrees F (220 degrees C).
2. In a plastic bag, combine the sweet potatoes, canola oil, taco seasoning, and cayenne pepper. Close and shake the bag until the fries are evenly coated. Spread the fries out in a single layer on two large baking sheets.
3. Bake for 30 minutes, or until crispy and brown on one side. Turn the fries over using a spatula, and cook for another 30 minutes, or until they are all crispy on the outside and tender inside. Thinner fries may not take