

FOOT NOTES

THE NEWSLETTER FOR SPRINGFIELD PODIATRY AND ACCURATE FOOT & DIABETIC CARE

May, 2022 Edition

Important Things to Know About a Fracture

As we get into the warmer weather and become more active, injuries become more prevalent. We often see fractures in our office, so here is some helpful information for you to know.

Fracturing (breaking) some bones in your foot is easy to do while other bones, fortunately, are not so easy to break. Accidentally kicking the bedpost or another hard object is the most common way to fracture a toe. If this has happened to you, you know how incredibly painful it can be. The toes aren't necessarily the easiest bones to break but they are the most accessible, making them quite prone to fractures. Outside of the toes, the metatarsal bones behind the toes, other than the first metatarsal, are highly susceptible to fractures.

The base of the fifth metatarsal, which is on the outside middle part of the foot, often breaks when the ankle and foot are "rolled" under. A common ankle sprain can include a fracture of the fifth metatarsal base. Breaking this bone in a certain spot, called a Jones Fracture, can mean either surgery or 6 to 8 weeks in a cast. Some fifth metatarsal fractures can take up to 12 weeks to heal.

The second, third and fourth metatarsal bones are the most susceptible to what is known as a **stress fracture**. This type of fracture happens without an injury. Abnormal stress occurs to one of these bones for different reasons, which can cause weakness. In an instant, the bone can crack and pain and swelling ensue. In military personnel, this is known as a march fracture.

Fortunately, the other bones in the foot, called the tarsal bones, are thicker and stronger than the phalanges (toes) and metatarsals. It takes a much stronger force to fracture one of these bones.

Fractures are either opened or closed. An open fracture occurs when a broken end of bone protrudes through the skin. Not only is this a gruesome site, but it is a medical emergency. These fractures require immediate surgery to clean the wound and the bone and to reattach the broken ends of bone. Antibiotics are generally prescribed to prevent or treat an infection as this can be devastating to the bone and increase the risk of limb loss.

The most important factor in healing a fracture faster is eliminating or minimizing the movement of the fracture site. Sometimes it means a fracture shoe, sometimes it means a walking boot and sometimes it means a cast. When a fracture is stabilized appropriately, it typically takes about six to eight weeks to heal. If the fracture fragments are displaced and are too far apart to heal, then surgery is necessary to bring the broken ends of bone together. The fractured bone may be held together by screws, pins, plates, staples or wires. Stabilizing a fracture provides the best chance of proper healing of the bone.

Another important concept pertaining to a fracture is whether the joint is involved. **Any fracture that involves a joint requires even more attention to stabilization.** Preventing movement of this type of fracture reduces the chance of long-term joint damage and arthritis.

Factors that can slow or prohibit proper bone healing include the severity of the injury of the bone and surrounding soft tissue, poor circulation, uncontrolled diabetes, smoking, infection, many autoimmune diseases, particularly those affecting connective tissue, abnormal hormonal conditions, chronic steroid use, poor nutrition, low levels of calcium and Vitamin D, and age.

To help promote healing, one should control blood sugars and quit smoking. Taking calcium supplements with Vitamin D can be helpful as well, and some people require longer periods of immobilization. In some cases, the fractures may not heal after 3 months. We will often prescribe a bone stimulator that uses specific, mild, painless electrical currents to stimulate bone healing.

A broken bone in the foot can either be an uncomplicated situation or a lengthy frustrating problem. The most important first step is to accurately diagnose the situation. **Without an x-ray of an injury you do not know whether a fracture is involved.** It is a myth that you would not be able to walk on a fracture. People walk on a fractured bone sometimes for months not realizing that a bone was broken.

No one enjoys being slowed down for six to eight weeks, but having pain for months or years isn't an attractive proposition either. Swelling in the foot or ankle with or without an injury should be investigated for a possible fracture.

PERSONALLY SPEAKING

One of our parttime receptionists in the West Chester Office is Nickey. As you may already know, she is Dr. Siegerman's daughter. Nickey has been attending the Graduate Studies Program at West Chester University and will graduate with a Master's Degree in English, Creative Writing on May 14th. She has been interviewing for jobs and intends to move to New Jersey in June to pursue a writing career. Good luck, Nickey!

MYTH BUSTERS

A fractured bone is not as bad as a broken bone. Not true, because any break in a bone is a fracture. Many people are under the impression that a fracture is a partial break in the bone, but any break or crack in a bone of any severity is called a fracture.

FUN FACTS

Approximately 6 million Americans suffer at least one fractured bone each year, and the clavicle (collar bone) is the most common bone to be fractured.

WHAT'S NEW

Minimal Incision Surgery, or MIS, can be performed on bunions, bunionettes, hammertoes and arthritic joints in the foot. Done in as an out-patient procedure in a hospital or surgery center, MIS can correct various bony deformities of the

feet and toes with a much faster recovery time, less swelling and stiffness and potentially fewer complications. Ask our doctors if MIS may be an option for you!

QUOTES

“Surround yourself with people who are only going to lift you higher.” – Unknown

PUNNY STUFF

I was wondering why the ball kept getting bigger. Then it hit me.

PUZZLE:

Call today for your foot health evaluation!

In Drexel Hill, call 484-459-5954

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In West Chester, call 610-436-5883

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Or visit us at www.drsiegerman.com

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