

Family Physical Therapy Services, Inc.

“Our Family Cares”



Cathy J Leer, PT, MBA, Owner/Director

603.644.8334

July/August 2015 Newsletter

Inside This Issue

Plantar Fasciitis: Not a G'day, Mate!

Notes from our extended “family”

FPTS Community Activities

Shoe Lingo – What it means, and what’s right for you

Therapeutic Work Solutions Info Corner: Back(pack) to School! Make Smart Backpack Decisions

Pre & Postnatal Info Corner: It’s Flip-flop Time!...Or is it?

The Right Shoe for You

Self Screening Tips for Proper Shoe Fit

Special Offer: Minimal Shoe-Maximal Body Screening

Like Us on Facebook



Plantar Fasciitis: Not a G'day, Mate!

By Tom Fontana, MSPT

After completing my physical therapy training at Boston University, I took a 6-week trip to Australia as a reward (and to completely blow whatever remaining funds I had left after graduate school). Though I should have known better--I was fully aware that I would be doing significant amounts of walking while traveling, I failed to increase my tolerance for prolonged walking in advance and brought the footwear that I had been wearing for many months. After only a couple of weeks of walking around, I started having pain in the bottom of my right foot—plantar fasciitis. But what was I going to do; I was there for another 4 weeks! So, I continued to walk around on it and made it worse.



It not only was not a “G'day” for me, it was not a G'eight months! I tried everything I could think of, and some or all of them may have helped or it may just simply have gone away. That's the one nice thing about plantar fasciitis; it does tend to go away over time—a condition we refer to as “self-limiting,” but that doesn't make it any less painful while you have it.

As physical therapists, we work to help your body heal through educating patients on ways to relieve stresses on the tissue (through rest or footwear recommendations), address biomechanical inefficiencies (e.g., tight, weak, or stiff tissues; scar tissue) and either calm acutely inflamed tissue (“fasci-itis”) or stimulate the healing response in chronically degenerated tissue (“fasciosis”) through modalities or soft-tissue mobilization.

Other conditions may seem like fasciitis but a cardinal sign of this particular “bugger” include pain 1st thing upon putting your feet on the floor each morning which improves within seconds or as the day goes on. The pain may then return by the end of the day after prolonged weight-bearing. To the touch, pain is felt at the middle to far end of the heel (toward the arch) and perhaps the arch itself but without any complaints of numbness or tingling.

(cont. on page 2)

Notes from our extended “family”:

“I was impressed with everyone at FPTS and **would recommend them to anyone.** Tom Fontana was my MSPT. He did an unbelievably detailed evaluation and **combined his extreme competence with encouragement** and lots of humor to quickly improve my condition and get me to a pain-free state.” ~ Carl 7/2/2015

“After my second rotator cuff repair, and a rushed experience at another PT place, Steve at Family Physical Therapy worked hard for a year and a half to get my shoulder back to where it needed to be. Steve was always willing to help and worked hard to improve my strength. **Everybody was always kind and smiling every day** I was here. Thank you all so much for your time and effort!” ~Derek Geddes 7/13/2015

(Plantar Fasciitis: Not a G'day, Mate! - Cont. from page 1) There are several things to try on your own: ice the foot for 10 minutes at the end of each day. Use non-steroidal anti-inflammatories (if these are safe for you to use) such as Advil or Aleve. Buy a new pair of shoes if the ones you have been using are very old. Buy shoes with slightly more cushion if you seem sensitive immediately to weight-bearing; buy ones with slightly more arch (or an over-the-counter arch support) if it seems you are mainly bothered with prolonged or frequent walking over the course of a day. Lastly, you can try these three simple things at home. Be patient; it may take 6-8 weeks to notice significant improvement. If all of these fail to resolve your problem, no worries mate, come see us for some professional help.

1. Stand facing up the stairs on the bottom stair of a staircase with the ball of your hurting foot supported at the edge of the stair. Allow the heel to drop toward the floor until a stretch is felt in the arch of your foot and/or in the Achilles tendon. Hold for 30 seconds and repeat 3 times.
2. Get a golf ball or tennis ball and gently roll the arch of your foot on the ball (forwards and backwards and side-to-side) for 5 minutes.
3. While sitting in a chair, place a hand towel or pillow case on a wood, tile, or linoleum floor and put your foot down at one end. Use your toes to "bunch up" the towel. Once you have curled the entire towel, repeat two or three times (don't worry if your toes aren't coordinated enough to actually bunch up the towel—the important thing is that your foot muscles are working while trying to bunch it up).

FPTS Community Activities:

Dan Baram, PTA, CSCS, will present "*Running from the Bottom Up: Maximizing Gluteus Maximus and Hip Function for Injury Prevention and Performance*" at [Runner's Alley at 36 Hanover Street in Manchester](#) on August 6th, 2015 at 5:30 p.m. We hope to see you there!

Steve Lisowe, MSPT, completed an **ON-SITE ergonomic assessment for the entire staff** at a local attorney's office recently. If you would like information on how this service can be arranged for your office, give us a call at **644-8334**.

Shoe Lingo – What it means, and what's right for you

By Daniel Baram, PTA, CSCS

Drop, minimal, maximal, support, stability... Shoe lingo is endless, is often overlapping, and can be confusing. This time of year, many of you will be running a 5K, taking on a mud run, or buying your child new shoes for the upcoming athletic season. Let's explore some of the confusing terminology the shoe industry uses with running shoes so you'll be better informed to make a good selection for you.

1. **Numbers Associated with Shoes** – If you look at a shoe review in a magazine or online, you will notice there is a bunch of numbers associated with each shoe.
 - a. **Offset/Drop** – the difference in height from the heel to the toe in millimeters. This will range from 0-12. The more drop a shoe has, the more work it does helping you roll from your heel to toe during each step.
 - b. **Heel/forefoot** – the height of both the heel and forefoot from the ground (the difference between the forefoot and the heel is the drop). Essentially, these numbers indicate how much cushioning is under foot.
 - c. **Weight** – how much the shoe weighs in ounces. A lighter shoe may be a little less fatiguing or may allow you to run a little faster, but may also mean that there is less cushioning.
2. **Minimal vs. Maximal** – This debate can get a little ugly like Republicans vs. Democrats or Yankees vs. Red Sox. There are devotees to each of these and their opinions run strong as to which is best. Here we are talking mostly about cushioning.
 - a. **Minimal** - The job of a minimal shoe is to simply protect your feet from debris on the road or trail. It has very little cushioning. Remember less shoe means more work for you.
 - b. **Maximal** – Maximal shoes have tons of cushioning; it's like running with pillows under you feet. Maximal shoes claim to absorb shock that would otherwise be absorbed by your joints and thus help prevent injury.
3. **Support/Stability** – For simplicity's sake, the support or the stability of a shoe refers to the support for the arch of your foot. If you have a collapsed arch, you may want to opt for a little more support. As with any other part of your body, we'd rather have you use less external support and provide it on your own, so we'd encourage you to begin some foot strengthening exercises to reinforce your arches.

For a guide to get the most out of your shoes/your running, please refer to the insert in this issue.

Back(pack) to School! Make Smart Backpack Decisions

By Steve Lisowe, MSPT



Are you in the market for a backpack for yourself or a child for school? Backpack awareness day is approaching on September 16th, and there are a few important ergonomic tips to consider before buying one.

The weight of the backpack is an important issue. One study at the University of California reported that 64% of students 11 to 15 years old report back pain due to a backpack that is too heavy. It is recommended that the weight of the pack (including the contents) be no more than 10% of bodyweight; however, in a graduate study at Simmons College, researchers found that 55% of students have packs that are heavier than the guideline.

To minimize the weight, choose synthetic fabrics, which are lighter in weight. When loading the pack, place the heaviest items in the back (which will rest closest to the body) and place lighter objects in the forward compartments.

As far as fit is concerned, straps should be adjustable, wide, and padded. I recommend using both straps to spread the load evenly over the spine. Using only one strap over the shoulder may encourage rotations or asymmetries of the spine, overuse of the upper trapezius muscle or depress the collar bone and lead to nerve injury.

Some backpacks have a chest strap and waist belt to help offload some of the weight on the upper body and redistribute it through the lower body. When used correctly, these straps can make a huge difference in decreasing strain through the body. Better yet, some backpacks have wheels and a handle to roll the backpack rather than wearing it; however, be sure to check with the school to make sure rolling packs are allowed and more importantly whether this would be socially acceptable to your child!

In 2007, there were 2,000 backpack-related injuries treated in ERs, clinics, and doctors' offices. Making a great choice and using the pack as intended could help you or your child be one less injury statistic this year.

Pre & Postnatal Info Corner

It's Flip-flop Time!...Or is it?

By Effie Koustas, MPT



I was so excited for summer to arrive, not only for the warmer weather, but also to finally wear my sandals. It's so easy to slip on a pair of sandals and get out the door. My patients that are pregnant seem to agree; they often come to their appointment wearing flip-flops to relieve their swollen feet. The problem with most flip-flops is that they don't have sufficient support to run numerous errands or for prolonged standing.

As a physical therapist, I am always suggesting supportive shoes for my patients, especially during pregnancy. With sandals, it can be difficult to find one that is both fashionable and functional. Throughout pregnancy, our center of gravity is constantly changing as the baby is growing. Therefore, our balance is thrown off. To minimize risk of falls, being in a supportive sandal is crucial not only for comfort, but also safety.

Here at FPTs, we are lucky enough to be retailers of [Vionic](#), a company which makes sandals, shoes and sneakers with orthotics built in. Vionic was developed by Philip Vasyli, an Australian podiatrist. The shoes incorporate podiatrist-designed biomechanical orthotics which help to redistribute weight and realign the foot and leg to its natural position. Research supports the Vionic with [Orthaheel technology](#) in reducing over-pronation, which can help relieve associated conditions such as heel, ankle and knee pain.

You may be due for a new pair of sandals and/or just looking for the right pair if your feet are swollen. Stop in to see our selection and try on some samples. You will be surprised at the comfort level and relief you experience with finding one that fits correctly.



Visit Vionic at: www.vionicshoes.com. If you see something you like, let us know. We can order it for you and you save on shipping! Not sure of what size...we have a variety of sizes for you to try on at both of our locations.

Family Physical Therapy Services, Inc.

Bedford, NH 03110 Chichester, NH 03258
644.8334 961.0039
www.familyptservices.com



Presorted Standard
US Postage
PAID
Permit # 632
Manchester, NH 03103

See Inside
for Self-Help
Techniques

Specializing In:

Industrial Rehab and work-related injuries, pre & postnatal services, lower back pain, stenosis, sciatica and herniated discs, neck pain & headaches, tendonitis & bursitis, pre & post surgical, arthritis, plantar fasciitis, sports injuries, exercise prescription, and more...

50% off!

Minimal Shoe = Maximal Body—Running Screen

Save ~~\$50~~ on a 1 hour running mobility / stability evaluation—Regularly \$200
\$100

Family Physical Therapy Services
165 S. River Rd, Bedford, NH
126 Dover Rd, Chichester, NH

644.8334

Limited to first 20 callers!

*Screenings take place at Bedford location only

This coupon may be given to
friends and family

Attention Parents!

Prepare your children for fall sports.

Save 25% when you pre-order
your athlete's innersoles for
guaranteed availability



**Vasyli®+Prior Sports
Orthotic**

Call today - **644.8334**

August 13th is the 23rd annual Cigna/Elliot Corporate 5K Road Race!

Are you prepared??

Look inside for special offers and self-help tips to
help you train smarter and stay injury free

The Right Shoe for You

By Daniel Baram, PTA, CSCS

So, now that you know a little shoe lingo, let's talk about what's right for you.



1. Google the make and model of the shoe you currently wear to find out some of the statistics listed in the previous article. If the shoe has worked great for you, then order it again or get something along the same lines. If not, and you are constantly dealing with nagging pain, it's time to change it up. You may benefit from slightly more cushioning, more support, or more drop, but this is not always the case (some benefit from changes in the opposite direction) and may make you more reliant on these things in the future.

Drastic change is not a good idea so if you would like to see if you are suited for a different kind of shoe, make a small change (1-2 mm of drop, 1 level of support change, slight cushion change) and spend 10-12 weeks accommodating to it by increasing the amount of time you spend in it by 10% each week.

Many online retailers will allow you to order a number of shoes/sizes to try on and send back those you don't want (check in advance about their policies). Otherwise, you can go to a department store (e.g., Bobs, Kohl's, etc.) to try on a number of shoes, but you are not likely to find as much in the way of statistics about the shoes, or knowledgeable salespeople, at such stores. A hybrid approach would be to go to a specialty store such as [Runner's Alley](#) (locations in Manchester and Concord) where they are more knowledgeable about the specifications of your current shoes and those you might want to try, and have a wide selection. Despite what you know, or think you know, there is no substitute for trying on numerous pairs and seeing how they fit and feel.



The reality is that the shoe is only as good as the foot (and rest of the body) that is wearing it. If you have good strength and good mobility, you should be able to wear anything. I definitely believe that too much shoe is not a good thing; remember less shoe = more you. It is important to have good strength and mobility in your feet and hips.

2. Work on the mobility and strength of your feet and hips. You can check out the [March/April, 2015 issue of "Our Family Cares"](#) to get some idea where to start (its archived at [familyptservices.com](#))
3. If you are not comfortable with either, or both, of the above, get evaluated by a professional. Come in to FPTS and go through our **Minimal Shoe = Maximal Body screening**. Not only can we give you some advice on the features of a shoe you might want to try, but we can also assess your body and how you can improve it so you don't have to ask so much of your shoes.



Finally, I would like to throw in a quick word on cleats. If you or your child is purchasing a new pair of cleats for the upcoming season, be aware that the options are limited and they likely will have 0 drop and are notorious for limited cushion and arch support. Quite a difference if you usually wear high drop, cushy, supportive sneakers! Find the pair that fits the best and is the most comfortable but, if you are having discomfort, remember that at FPTS we stock [Vasyli Medical Grade Orthotics](#) and they make one specific to athletic footwear. It may be that you or your child just needs a

little more support than the cleats offer. This is a great option that can save you hundreds of dollars on custom orthotics and can save the person wearing the cleats a lot of pain.



[Vasyli®+Prior Sports Orthotic](#)

The Vasyli + Prior incorporates a subtle 4mm heel raise—perfect for helping with tight posterior muscles and associated conditions that are often exacerbated in flat lasted sports footwear. The rear foot post of 3° + the 4mm raise forms a smart medial wedge for control without the "bulk." Low profile, medial arch contour ensures comfort; the high density, heat moldable shell provides further customization, enhancing fit and performance. Sold as pairs. Latex free.

Your arch type and support needs

STEP 1 FIND YOUR ARCH TYPE.

Not sure? Lightly wet the bottom of your foot and step on a brown paper bag. Match your wet footprint to one of these three examples:



STEP 2 IDENTIFY YOUR SHOE CATEGORY.

STEP 3 FINE TUNE YOUR PERFECT FIT™.

you're in the:
NEUTRAL
shoe category

you're in the:
STABILITY
shoe category

you're in the:
MOTION CONTROL
shoe category

you're: **over 180 lbs men**
over 150 lbs women
or
you run: **over 25 miles/week**

look for a:
NEUTRAL plus
shoe
N+

look for a:
STABILITY plus
shoe
S+

look for a:
MOTION CONTROL plus
shoe
MC+

you're: **under 180 lbs men**
under 150 lbs women
or
you run: **under 25 miles/week**

NEUTRAL
shoe
N

STABILITY
shoe
S

MOTION CONTROL
shoe
MC

you're: **under 180 lbs men**
under 150 lbs women
or
you run: **aces or enjoy fast running**

performance
NEUTRAL
shoe
pN

performance
STABILITY
shoe
pS