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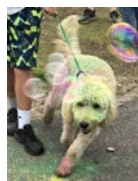
Community Activities

Tom Fontana presented "Defend Your Back: Body Mechanics to Avoid Low Back Pain" to Jewell Instruments in Manchester on May 21st.

On May 30th, FPTS was onsite at the Bedford Old Town Hall for **The National Senior Health & Fitness Day** hosted by [Bedford Parks & Rec](#) Depts.



Sunday June 2nd, the FPTS team was on hand at [Bedford PTG's Color Blast Fun Run/Walk](#) and had a great time challenging parents and children to see who had better control of the movement and balance. Congrats to all who scored higher than 2.0!



From The Desk of Our Director

By [Cathy J Leer, PT, MBA](#)

The sun is finally breaking through the clouds a little more lately. Unfortunately we are still on a roller coaster of temperatures and weather that is certainly living up to the New England reputation! Regardless, I have opted to don whatever clothes I need to keep warm and dry and get outside and enjoy myself. I hope that you are doing the same!

No matter what your interests are, it's important to note that recent studies have debunked the long accepted 10,000 steps a day, to include "at least 4,400 a day" NOT 10,000! In fact, "the federal exercise guidelines call for 150 minutes per week of moderate physical activity, which includes all kinds of daily movement, not just steps." So **go out and find something you love to do, enjoy life, and stay healthy!**

Featured Author of the Month



From The Desk of Our Clinical Staff Manager

By [Tom Fontana, MSPT](#)

Meet Tom Fontana, our Clinical Staff Manager. Tom is a 1989 graduate of Oberlin College (OH) with a BA degree in Psychology and a 1999 graduate of Boston University with a MS degree in Physical Therapy.

He has experience as a staff PT as well as a Clinic Manager. For the last 20 years, Tom has been treating patients of all ages with a variety of orthopedic and neurological conditions and sports injuries. His areas of interest include the shoulder and knee as well as post-surgical rehabilitation. He has attended numerous conferences and holds advanced training in the McKenzie method and Mulligan concept as well as a variety of other manual therapy techniques.

Tom enjoys geocaching with his daughter, landscaping, gardening, and playing tennis through the North Shore Tennis League and United States Tennis Association where he is a 4.5 rated player. He lives in southern NH with his wife, Tyrrell, daughter Kira, cats Dragon and Damsel and a seemingly immortal fish.

Tom is licensed to practice Physical Therapy in New Hampshire and Massachusetts.

If you have a question for Tom, he can be contacted at: tfontana@familyptservices.com. If you'd like to schedule an appointment with Tom, call **603.644.8334**



Heel Thyself!

Plantar fasciitis is one of those annoying things in life that you've probably never heard of until you get it and then you find out just about everyone you know has either had it or knows someone who has. For those who have had it, it is hard to forget not only because it is painful but because it hangs around much longer than you'd like, sort of like in-laws (except mine, of course—Bill and Nancy, you know I love ya'!). While not the scourge that is back pain or rotator cuff problems, plantar fasciitis is still a significant problem—it's estimated to affect 1 million Americans each year and up to 10% will experience it at some point during their lifetimes! It is a pain felt in the middle of the bottom of your heel or into the arch of your foot. While it is a significant source of heel pain, it is not the only source of heel pain. Keep reading to learn some of the steps we use to diagnose and treat plantar fasciitis. If you test negative, the source of your heel pain is most likely not plantar fasciitis and you should make an appointment for an evaluation so we can diagnose a less-common condition.

I Don't Even Understand What The Words Plantar Fasciitis Mean: What Is It?

The plantar fascia is a thick band of tissue (fascia) that is located on the bottom of your foot (plantar) and plays a key role in maintaining the arch of your foot, attenuating the strain and shock from weight-bearing activities, and providing some elastic return when you spring off to take a step. Plantar fasciitis is when that tissue is inflamed (-itis).



Am I At Risk?

The first clues to whether it is plantar fasciitis or not is to look whether you are at high risk for developing it. You're at higher risk if you:

- Have a high Body Mass Index (BMI) – Overweight ≥ 25 , Obese ≥ 30 (there are many online calculators to determine your BMI)
- Have a history of a recent increase of weight-bearing activity
- Have a decreased amount of ankle bend (dorsiflexion) motion (self-test explained later)
- Run for exercise
- Stand for prolong periods of time, particularly with work-related activities on surfaces with poor shock absorption

While any one of these could lead to plantar fasciitis, having multiple risk factors amps up the likelihood that this is the

source of your pain.

What Is The Textbook Presentation?

There are several classic symptoms that give plantar fasciitis away: 1) Pain with the first step (or few steps) in the morning that then seems to “work itself out” only to return later or recur the next morning, 2) Pain that is worse after prolonged weight-bearing activity, or 3) Pain occurred after a recent increase in weight-bearing activity.

Signs You May Have It

There are several self-tests you can perform to see if you are at risk for developing it or if you already have it.

As mentioned earlier, do you have a limited amount of ankle bend motion? To determine this, perform the Knee-To-Wall test. Stand with your toes 4 inches from a wall (you could also perform in $\frac{1}{2}$ kneeling with the front foot 4 inches from the wall). Bend your knees, trying to bring them all the way to the wall WITHOUT allowing your heels to come off the floor. If your knees make it to the wall, you have good calf flexibility/ankle motion and are at lower risk for plantar fasciitis. If your knees don't make it, you lack adequate calf flexibility/ankle motion and are at increased risk.



The classic test to see if you already have plantar fasciitis is the Windlass Test.

Perform this test in two positions, one with your foot on the ground and the other with the side of the foot resting on a surface or free to move in the air (such as if you're resting your leg across your other knee).

Pull up on the big toe just beyond the toe knuckle and pull it up toward your knee. If this produces pain in the arch or heel of your foot, particularly if it is tender to the touch in these areas while performing the test, then you likely have plantar fasciitis.



Aaaaaach! I Have It, Now What?!

First, keep calm and second, be patient. The good news is that this is what is known as a “self-limiting” condition, meaning it tends to go away on its own, and for the majority of patients the symptoms resolve in 12-15 months. Wait! That's the good news? Try telling that to a (Cont. next page)

(Heel Thyself Cont.) patient who's already had it for two months and is already more than sick of it. It's only "good" relative to a condition that doesn't tend to go away without a lot of help or would take longer to go away (or might never go away, 😞).

While there are manual techniques we utilize that are beyond the scope of this article and treatment modalities (e.g., gadgets, taping) we use that the general public doesn't have access to, there are things you can do, both outside of PT and within PT, to help it go away.

STRETCH!

Each stretch should be performed 3 times and held for 20-30 seconds.

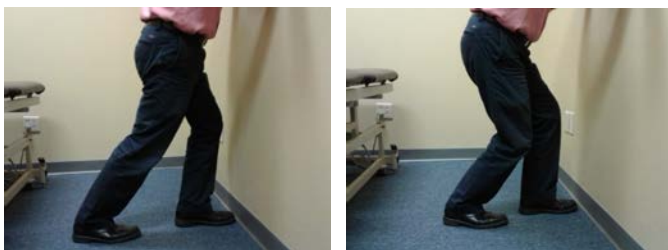
Plantar Fascia

Grab the underside of each toe (just like in the Windlass test above) and pull up on them toward your knee, stretching the arch of your foot.



Gastrocnemius and Soleus

Stand facing a wall with one leg behind the other with the knee straight. Position your foot far enough backwards or shift your weight onto the front leg sufficiently that you feel a stretch in your calf (Gastrocnemius). Move your back foot slightly forward so its toe is just behind the heel of the front foot. Crouch down (like you were going to sit on a stool) until you feel a stretch in your calf (Soleus).



What If My Foot Already Hurts And I Hate Stretching And I Just Want A Massage?

Roll the bottom of your foot on a frozen water bottle (otherwise known as ice) for 5-10 minutes. The object is not to "grind" the bottom of your foot into submission but have the cold decrease the pain and the rolling motion lightly massage the area and influence the underlying tissue.



Cont. Next Page



STAY IN THE GAME WITH JAMES!

By [James Goodwin, PTA, CSCS](#)

So, I have some **fun trivia** for you all!

What do I have in common with the following people: David Beckham,

Kobe Bryant, **Brad Pitt**, Dwayne "The Rock" Johnson, Master Chef Gordon Ramsay, **George Clooney**, and WNBA MVP Breanna Stewart? If you think it's our good looks or bank accounts, then guess again 😊! That's



right, we have all ruptured our Achilles tendon...ouch! In fact, Brad Pitt ironically ruptured his Achilles while portraying "Achilles" in the movie "Troy." David Beckham (famous soccer player) ruptured his in virtually the same way that I did mine—playing soccer. And, last but not least, George Clooney, world's sexiest man (1997 & 2006) ruptured his Achilles playing basketball.

References for Graphics: www.gqindia.com, www.pinterest.com, www.menshairstylesnow.com



Pre & Postnatal Info Corner

By [Effie Koustas, MPT](#)

Avoid A Rotten (Inner) Core

Do you know what exercises are appropriate to train your **inner core** muscles? Your core consists of your transverse abdominal muscles, diaphragm, multifidus muscles and pelvic floor muscles. If you are not isolating these inner core muscles, you are NOT effectively strengthening your core. This is something that you will learn by attending PT. In addition, we will build up your home program with proper exercises to effectively strengthen your core.



Vestibular Disorders

By [Lauren Fournier, PT, DPT](#)

To CBD Or Not To CBD?, That Is The Question

Several of our patients have inquired about the use and effectiveness of the relatively new product called CBD oil, or cannabidiol, to help with pain and other ailments, so we took it upon ourselves to get the latest information out there.



What are the benefits? CBD's most discussed health benefit may be its **anti-inflammatory properties** throughout the body, including the central nervous system and the brain. Joseph Maroon, M.D., a clinical professor of neurological surgery at the University of Pittsburgh Medical Center and his colleagues conducted a review in 2018 which concluded such effects could possibly reduce anxiety, depression, seizures, and post-traumatic stress disorder (PTSD), and even benefit people who have had a concussion. (Want to learn more? [Read the full article](#))

(Heel Thysel Cont.)

Is That It? What Else Can I Try?

While increasing the flexibility of your tissues or relieving the pain are good things to do to improve your body or decrease your symptoms, addressing some of the underlying CAUSES should also help the condition. Like many conditions we see, that means STOP DOING THE THINGS THAT CAUSED IT IN THE FIRST PLACE!!! This may mean ceasing the activities that led to it (e.g., stop going for long walks or hikes, stop running—yeah, I know you runners are never going to actually do that, etc.) or losing weight.

While some of these causes may be easily modifiable (meaning they are under your control, not that they are easy to do, as anyone who has tried to lose a lot of weight will attest!), others may not entirely be in your control (yes, if you work on your feet all day, quitting your job is technically in your control but is awfully extreme). In those instances, changing HOW you perform the activity may be helpful.

Pressure Relief

Pressure-relieving mats help decrease the force on your feet if you have to stand on your feet for long periods and progressive employers may provide these if they are also otherwise safe in the work environment (i.e., not a trip hazard).

If you can't stand on a pressure-relieving mat, put a pressure-relieving mat inside your shoes—inserts! These can be made out of foam or gel and may be full-length inserts or can take the form of a heel cup and are available in most drug stores. Depending on your foot type, you may benefit from an "orthotic" (a more souped up insert) in your shoe that will provide extra support to your foot. Some drug stores have foot scanners that you place your bare foot on and may help steer you to the right orthotic for you. We can also advise you on the right orthotic if that is something that interests you.

Change Footwear

In combination with the above, or as a stand-alone (pun intended) intervention, wear new and/or varied footwear. Worn footwear will not provide the shock absorption and support it did when it was new, so simply buying a new pair of your favorite shoes may help. In addition, it may be helpful to VARY the shoes you wear as different shoes (particularly different makes and models) will fit your feet differently to provide slightly different support and have different pressure points. By not wearing the same shoes day after day, you'll vary the areas that get taxed, so no single tissue gets over-worked. You also may benefit from wearing DIFFERENT shoes, meaning ones that are more appropriate for your foot type. Attached is a guide, taken from Road Runner Sports, that gives a general idea as to the type of shoe that is ideal for you and there is some evidence that shoes with a "rocker bottom" (i.e., rounded, rather than flat) may provide some relief.

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™.

	high arch	average arch	low arch
you're in the:	NEUTRAL shoe category	STABILITY shoe category	MOTION CONTROL shoe category
look for a:	NEUTRAL plus shoe N+	STABILITY plus shoe S+	MOTION CONTROL plus shoe MC+
you're: over 180 lbs men over 150 lbs women or you run: over 25 miles/week	NEUTRAL plus shoe N+	STABILITY plus shoe S+	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: races or enjoy fast running	performance NEUTRAL shoe pN	performance STABILITY shoe pS	

With all of the footwear suggestions, it can be confusing (and quite costly!) trying to find the right product for you. Sadly, there is no one product that is right for everyone since there are many different foot types. If you do not feel up to the challenge, or feel you would benefit from some professional guidance, that would be part of your treatment in PT.

Unfortunately, there is not just one single thing that is likely to make plantar fasciitis go away, or else we would just have patients do that. And, that is part of the reason it tends to stick around for so long. Also, recall that this is only one source of heel pain. Other sources can include pain referred from pinched nerves in your back (even if you don't have back pain), irritation of peripheral nerves travelling to the bottom of your foot, or changes to the fat pad covering the bottom of your heel. If the self-help included here does not take care of your heel pain or you test negative for the risk factors or provocation testing outlined above, make sure to make an appointment so we can diagnose one of these less common causes of heel pain or provide additional forms of treatment.





Injury Prevention & Sports Performance

James Goodwin, PTA, CSCS

Stay in the game. *I'd rather you be 100% at 80% of showcases than 80% at 100% of showcases.* -Mike Reinold



Parents often ask me, "Should I have my child go to as many showcases as possible this year?" and my answer continues to refer back to the above quote by Mike Reinold, world-renowned physical therapist and baseball strength coach. Whether it is baseball, softball, soccer or any sport for that matter, it is important to not feed into this false ideology in sports that more is better. Now, I'm not saying don't give your child opportunities to get seen by top scouts or colleges, but please understand what this quote really represents – **quality over quantity and avoiding overuse injuries.** If you are interested in learning more about how to recover better and "stay in the game," then give us a call! **603.644.8334**

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Ross A. Lurgio Info Corner

GO LIONS!!

Lurgio Athletes-Learn How to Stay Strong and Healthy During Summer Vacation!!

Summer vacation is just around the corner and, if you're looking for a program geared around injury prevention and best strategies for recovery & regeneration for your child, look no further. Here at FPTS we offer an **Athletic Performance Program that focuses on soft tissue recovery, mobility/stability training as well as educating young athletes how to avoid overuse injuries.** We offer 4-week and 10-week packages for our group programs and private (one-on-one) programs for those looking for a more individualized training experience.

If your young athlete is **passionate about their sporting activities**, and wants to **"PERFORM LIKE A PRO"**, check out our [Athletic Performance Program](#) or call: 644.8334 - ask for James. **DON'T DELAY!** Reserve your spot for the summer sessions now, before the classes fill up!



Health And Wellness Guest Article

By Victoria Kirby, APRN

Just Lose Weight! What's the Best Way?

Who has ever been told by a well-meaning provider to "just lose weight" as a blanket answer on how to improve your labs, blood pressure or alleviate your joint pain? As a Nurse Practitioner for over 20 years, I have wiped away many tears from my clients who have been told this repeatedly. Will losing weight help with these things?

While the answer may be yes, that is **often much harder than it sounds.** In the United States, we spend \$60+ Billion annually to lose weight. Why aren't we all fit and satisfied?

We have the will; we just don't have the way. **There are many factors that contribute to our confusion and frustration.**

First, we have so much misinformation and too many sources of "knowledge." Should I fast? Eat keto or paleo or according to my blood type? Most providers have very little formal training in nutrition, so we turn to the **"Food Pyramid"** to guide us. The Food Pyramid has a heavy focus on grains and carbohydrates, but unfortunately, most of our heavily processed foods "fit" the category but provide little nutritional value and can contribute to insulin resistance and food intolerances.

Second, **weight loss is NOT 'one size fits all.'** All of us know those people who eat EVERYthing and never gain weight (these people aren't necessarily healthy) while the rest of us gain 10lbs looking at a donut. There are so many factors that contribute to weight loss resistance. It is extremely important to have a team of licensed providers on your side to help figure YOU out. Thyroid problems, hormonal imbalances, stress, inflammation, and undiagnosed food intolerances can wreak havoc on your metabolism and make losing weight seem impossible. When you add on chronic pain conditions limiting exercise, it adds other barriers to success.

Third, there are so many psycho-social reasons for difficulty losing weight. You may be stuck in old patterns from childhood from the "clean plate club" to the "all or nothing" thinking. **Most of us need help and support to recognize and change those self-limiting beliefs.**

I tell all of my clients "You are not lazy. You are not choosing this. You are worth the support". Find a good team, people who will listen and investigate. I work with and refer to amazing Registered Dietitians, Physical Therapists and Licensed Mental Health therapists. I believe when it **comes to your health and weight, it takes a team working with you.** All of us need support.

[Victoria Kirby APRN,](#)

[Victoria Kirby Wellness,](#) Nutrition in Motion



Share me with a friend!



Patients have the right to choose!