The Orthopaedic Center is Home for ESPN Radio Show

The message is out: UT’s Orthopaedic Center is the premier Orthopaedic Center in the area, providing exceptional access, service and convenience for patients. As an educational institution, we are constantly trying to discover ways to inform our community about Orthopaedic conditions and injuries. So when Mike Miller from WLQR 1470 Sports Radio called the Center and asked if we’d be interested in being home to his ESPN radio show, we gladly accepted.

Drive Time with Mike Miller, which airs from 5-7pm on Friday nights, integrates the University’s Orthopaedic specialists with the professional and local sports scene. The series, which kicked off with the president of the university Lloyd Jacobs, has a member of the Orthopaedic team on for an interview each week at 5:30 pm. Here, Mike discusses common Orthopaedic injuries with a Team Ortho representative. According to Mike, it was a way to educate the public to prevent sports related injuries.

“I thought a Friday night show was a perfect time for the weekend warrior or the recreational athlete to learn about Orthopaedic conditions,” Miller said. “Unfortunately, injuries happen and I thought this program would be great for folks that participate in athletic activities.”

Mike is a veteran in the broadcast world working with local teams including the Toledo Goaldiggers and the Kalamazoo Wings. In addition, Mike spent 10 years as the voice of the New Jersey Devils during their Stanley Cup runs. According to Mike, the timing couldn’t be better to start a broadcast with UT’s Orthopaedic Center.

“I have been following the progress of the partnership between UT and the medical college since it started,” Miller said. “I thought the Center was an intriguing boost for the community. I actually look forward to interviewing the doctors because it truly is a learning experience for me and our listeners.”

Mike will be having members of Team Ortho on his broadcast for next several months. It has been an exciting and great achievement for the University to have Mike on campus so tune in!

Dr. Nabil Ebraheim
Chairman and Professor
Department of Orthopaedic Surgery

Patient with Horse Injury has Great Outcome

Ankle and Forearm Fracture Patient Kick-boxes and Completes 5K Run

It was a day in early April and the weather was pleasant. Monica Drake thought she would take advantage of the April day and go for a horseback ride. Unfortunately, Monica’s pleasant ride quickly turned into a nightmare. Monica bailed off her horse and hit a fence post, shattering her ankle and fracturing her forearm.

When Monica reached the University of Toledo Medical Center she was diagnosed with a left forearm fracture and a right, grade 2, open ankle fracture dislocation with syndesmotic disruption. The fracture, according to Monica, was one of the ten worst ankle fractures the doctors had ever treated. As Monica sat in the new Orthopaedic Center in mid January, nearly three years since her injury, she recalled the accident which resulted in several complex procedures.

“It was really a fluke accident,” Drake said. “I was lucky that everything was able to be repaired and I’m glad I was brought to the University of Toledo Medical Center. I’ve made friends with many patients in the hospital, who I spent time with because of the complex treatment I received.”

continued on page 4
Stress Fractures: Common for Athletes and Those with Active Lifestyles

Fractures are typically caused by a single traumatic event such as a car accident or fall. Here, bones are exposed to forces so extreme they are unable to support energy that is placed upon them. In contrast, there are fractures caused by a repetitive application of force. These fractures, called stress fractures, occur when muscles become so fatigued they lose their ability to absorb additional shock. These fractures are categorized as overuse injuries and are characterized by tiny cracks in the bone.

Bone is incredibly resilient. Each day, bone broken down by daily living is replaced by the body in a necessary balancing act. However, this balance is disturbed with excessive physical training.

Stress fractures often present in athletes such as tennis players, basketball players, gymnasts and track and field participants. Typical stress fracture causes include improper equipment, increased physical stress, increasing the amount or intensity of an activity too rapidly and the impact of unfamiliar surface.

Stress fractures are usually categorized one of two ways: a fatigue fracture or an insufficiency fracture. Fatigue fractures are the result of bone being overused or being exposed to repetitive stress beyond its ability to repair itself. In contrast, insufficiency fractures are the result of bone being deficient in minerals or vitamins. A typical cause of an insufficiency fracture is if a bone has been weakened by osteoporosis.

While stress fractures can occur anywhere on the body, more than 50 percent occur in the lower leg. Stress fractures rarely occur in the upper extremities because they are not weight bearing bones, like the tibia and bones that run from the mid-foot to the toes.

There are certain red flags that may signal stress fractures. These red flags include: pain that increases over time, pain that increases with activity and decreases with rest, pain that persists even at rest, pain that occurs earlier in each successive workout and swelling. A runner with groin pain and a negative x-ray must have a back scan or an MRI to rule out hip stress fractures. Early diagnosis of hip fractures is necessary to avoid displacement of the fracture.

The best treatment for stress fractures is rest. After about 6 to 8 weeks, patients should be able to return to their regular activities. It’s important to do your best to safeguard against stress fractures. This includes implementing a prevention plan that includes the following: alternating activities that accomplish the same fitness goals (cross-training); setting incremental goals when participating in a new sports activity; and maintaining a healthy diet with bone strengthening vitamins and minerals such as calcium and vitamin D. In some situations, however, surgery is needed to treat stress fractures.
Why Do My Feet Hurt?

Every one wants to stay in fashion, but sometimes that comes with a price: comfort. There is no better example of substituting comfort for style than footwear. Every day men and women cram their feet in shoes that don’t fit correctly. This ultimately leads to the question, why do my feet hurt?

There are many reasons why your feet may hurt including: bunions, corns and calluses, heel pain, Morton’s neuroma, hammertoe, ingrown nails and plantar warts.

Bunions are bony bumps that form on the joint at the base of the big toe. Pressure on the big toe joint causes the toe to push outwards and turn toward the second toe. This creates pressure on the tissue surrounding the joint, causing it to become swollen and tender. Although they can develop without a recognizable cause, bunions are typically the result of poorly fitting shoes.

Like bunions, corns and calluses are also caused by pressure on the skin of the foot. Calluses refer to an accumulation of dead skin cells that harden over an area of the foot. Usually presenting on the big or fifth toe, calluses form to protect the foot against excessive pressure and friction. Calluses are usually caused by shoes that are too small or heels that are too high. Other factors include obesity and abnormalities in gait cycle.

Another common foot problem is heel pain. This type of foot pain can be felt when standing still or walking. The most common type of heel pain is an inflammation of the connective tissue on the sole of the foot where it attaches to the heel bone. Often, the best way to alleviate heel pain is to stretch and utilize medication to reduce swelling.

Morton’s neuroma is another common problem for patients that experience foot pain. This type of foot ailment is caused by a pinched nerve. When toes are squeezed too tightly, the nerve responds by building extra tissue in the nerve. In other words, the tissue around the nerves that lead to the toes thickens. This creates burning pain in the foot.

One of several toe deformities is a condition called hammertoe. This type of deformity describes a permanent sideways bend in the middle toe joint which is usually caused by heels that are too high or shoes that are too short. When your toe is forced against the front of the shoe, an unnatural bend is created. Unlike a bunion, this type of deformity can affect any toe. Pain usually affects the prominent bony area on the top of the toe.

Finally, a painful foot ailment that plagues many people is ingrown nails. These refer to toenails whose corners dig into the skin. Ingrown nails are typically the result of shoe pressure or improper nail trimming.

As you can see, most of these problems are the result of shoes that don’t fit properly. So next time you are shopping for shoes, consider your feet. Ultimately, walking without pain is pretty fashionable as well!

The American Orthopaedic Foot and Ankle Society outlined the following 10 suggestions for choosing proper footwear:

- Sizes vary among shoe brands and styles. Don’t select shoes by the size marked inside the shoe. Judge the shoe by how it fits on your foot.
- Select a shoe that conforms as nearly as possible to the shape of your foot.
- Have your feet measured regularly. The size of your feet changes as you grow older.
- Have BOTH feet measured. Most people have one foot larger than the other. Fit to the largest foot.
- Fit at the end of the day when your feet are largest.
- Stand during the fitting process and check that there is adequate space (3/8” to 1/2”) for your longest toe at the end of each shoe.
- Make sure the ball of your foot fits comfortably into the widest part (ball pocket) of the shoe.
- Don’t purchase shoes that feel too tight, expecting them to “stretch” to fit.
- Your heel should fit comfortably in the shoe with a minimum amount of slippage.
- Walk in the shoe to make sure it fits and feels right! (Fashionable shoes CAN be comfortable!)

Dr. Padanilam, assistant professor and head of the Foot and Ankle Division in Orthopaedics, agrees with these recommendations.

The Orthopaedic Center Strike Again!

After four months of waiting the results are in: the orthopaedic residency program has been given the rare distinction of being accredited for 5 years. The results come one month after the residents received 97th percentile on the American Academy of Orthopaedic Surgeons In-training Examination.

In September, the residency program was given a site review by Dr. James Herndon of Harvard University. His review of the program, in addition to the residency review committees review, resulted in the residency program being accredited for the next five years. The accreditation went into effect 1/11/2008 and runs until 1/1/2013 where the program will undergo another site review.

This is a great accomplishment for the program and The University of Toledo. Congratulations!
It’s been two years since Monica’s injury and she reports she is doing extremely well. So well in fact, that Monica has taken up some pretty extreme sports since her injury.

“I’ve taken up kickboxing,” Drake said. “My leg feels very strong and kickboxing has helped me improve my balance.”

Monica recently had another breakthrough. Approximately a year following her injury, Monica started running as part of her regular routine. Two years after the accident, Monica was participating in her first 5K run since her injury, averaging 11 minute miles. According to Monica, the new Orthopaedic Center is excellent for patient access and convenience.

“This is actually my first time in the new Orthopaedic Center,” Drake said. “It’s a pretty impressive building.”

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**Great Outcome continued from page 1**

The beauty of “A dream come true”
An Orthopaedic Center for me and for you
The convenience of location is what it’s all about
For everyone who is hurting, there’s not a single doubt
We have courtesy parking to the parking lot
To healing your body from whatever you’ve got
With access to equipment to cure all your ills
To radiology treatment or the simple pills
Service is our objective—to take care of you
Not just to make you feel better, but to feel brand new
No more waiting or an apology
Because we have state-of-the-art technology
We expect our size to double in a year or so
With one-stop service, just watch us grow
So, if you have aches and pains, don’t hesitate
Come in to see us. We’ll make you feel great

Robert Grames, D.P.