



About L. David Richer, DPM



A native of the Bay Area, California, Dr. Richer pursued his medical education and training on the East Coast, attending Temple University School of Podiatric Medicine in Philadelphia followed by a 3-year residency in foot and ankle surgery in New York City and Washington, D.C.

Dr. Richer relocated to Arizona in 2001 after his training and joined group practice. In 2006 he left the group and founded the Foot, Ankle & Leg Center in Scottsdale where he offers the latest medical and surgical care to patients of all ages.

At the Foot, Ankle & Leg Center our mission is to provide high quality, effective medical and surgical care. We do so in a comfortable, relaxed setting where we treat patients like family. We strive to eliminate your pain and get you back on your feet as quickly as possible so you can enjoy your favorite activities and sports. We empower our patients with the most up to date information needed to make the right decision for their own care. We utilize the least invasive methods, when possible, to fix the problem. If you have been suffering with Foot, Ankle or Leg pain, we can help!

We welcome you to the Foot, Ankle & Leg Center family.

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Heal Your Heel Pain

Heel pain can interfere with walking comfortably and prevent you from enjoying your favorite activities. It can also affect your mood and overall well-being. The most common type of heel pain is plantar fasciitis. This heel pain normally begins when there is repetitive stress placed on the plantar fascia, a thick ligament of connective tissue attaching the heel to the ball of the foot. This initially causes inflammation which is your body's way of trying to heal the injury.



If you have been suffering from chronic heel pain, with has lasted for 3 or more months, plantar fasciitis (-itis refers to inflammation), usually progresses to plantar fasciosis. Plantar fasciosis is degeneration of the collagen fibers which make up your plantar fascia. This tendon degeneration causes continued pain and may cause tears, or a complete rupture, of your plantar fascia.

Treatments like cortisone injections, ice, arch supports, prescription orthotics, and anti-inflammatory medications are helpful for acute plantar fasciitis. When you have chronic plantar fasciosis these treatments are rarely effective.



Radial Shockwave Therapy (RSWT) is an advanced, FDA-cleared technology that has been proven to be particularly effective for chronic heel pain. The RSWT uses ballistic sound waves transmitted through the skin, deep into the area of injury,

to stimulate increased blood flow to the area and accelerate healing of the collagen fibers. It is a quick, less than 10-minute procedure, done in the office weekly for 5 treatments. It has a success rate of 80%. There is minimal discomfort, and no anesthesia is required. If you have been suffering with chronic heel pain, give our office a call to see if RSWT could benefit you. The RSWT device is also highly effective for chronic Achilles tendon problems.

To read more about RSWT, please visit our website.





Heel Bursitis — Common but Avoidable

Bursa are fluid-filled sacs that provide cushioning and lubrication at areas where muscles and tendons move over bone, reducing friction. The foot and ankle region combined have only one naturally occurring bursa, located between the Achilles tendon and the heel bone (calcaneus). However, others may form at different areas of the foot (e.g., ball of the foot, big toe region) as a protective response to excessive stress or trauma.

When a bursa sac becomes irritated (bursitis), pain, inflammation, swelling, and redness are typically part of the deal. The area may be painful to the touch and warmer than surrounding skin. You'll definitely notice it when walking or running, and there may be increased pain in the morning or when getting up after sitting for a while.

Many times, heel bursitis is mistaken for Achilles tendonitis by amateur foot sleuths. Tendonitis symptoms generally are felt above the heel; bursitis, directly on the heel. However, it's possible to have both at the same time — something a podiatric exam will sort out.

Causes of heel bursitis include overuse; tight shoes and/or a heel counter that is constantly rubbing against the heel; abnormal foot mechanics; and poor flexibility. Heel bursitis can also occur secondarily to a preexisting condition such as gout or rheumatoid arthritis.

Heel bursitis can almost always be treated successfully with conservative measures. Better yet, prevent heel bursitis by wearing properly fitted shoes with good cushioning and arch support; stretching before athletic activity; varying the incline on a treadmill to reduce stress on your heels; maintaining a healthy weight; and avoiding walking barefoot on hard or uneven ground.

If you experience heel discomfort, call us for a thorough evaluation, accurate diagnosis, and effective treatment.

Mark Your Calendars

- Aug 1** Mountain Climbing Day: Deadliest climb? Mt. Annapurna (Nepal): 33% death rate.
- Aug. 6** Root Beer Float Day: Root beer was originally called "root tea" in the late 1800s.
- Aug. 8** Dollar Day: The first dollar bill (1862) featured Salmon P. Chase, Lincoln's Treasury Secretary.
- Aug. 13** Filet Mignon Day: In France, filet mignon generally refers to pork, not beef.
- Aug. 19** Soft Ice Cream Day: 1934 ... hot day ... ice cream truck ... flat tire ... soft-serve idea born ... (allegedly).
- Aug. 24** Peach Pie Day: Ancient Romans called peaches "Persian apples."
- Aug. 29** More Herbs, Less Salt Day: Herbs come from green leaves; spices from seeds, bark, berries, or fruit.



Elite Painter, Tortured Soul



One historical figure who has long piqued the interest of mental-health practitioners is Vincent van Gogh, the renowned painter who took his own life at age 37 in 1890.

Van Gogh was a prolific letter writer during his abbreviated adult life ... no simple task in the 19th century. The let-

ters, sent primarily to his younger brother and other family members, documented his mental and physical struggles in great detail.

Van Gogh produced artwork and letters at a feverish pace — over a 10-year span, nearly 900 paintings, 1,100+ drawings, and 800+ letters. Then he'd crash and burn, exhausted and depressed, before returning to work with hyperenthusiasm — cyclical behavior and evidence of bipolar disorder, according to many medical experts.

In addition, van Gogh had suffered epileptic seizures since childhood. In hopes of countering his seizures, anxiety, and depression, he drank absinthe, a potent alcoholic beverage popular among Parisian artists at the time (van Gogh spent his last four years in France). Absinthe contained the toxin thujone, which likely exacerbated his conditions.

Following the self-removal of his earlobe (not his whole ear) as a result of a falling-out with a friend, it is hypothesized that van Gogh experienced brief psychosis and abruptly stopped drinking. Alcohol withdrawal may have spurred a bout of delirium.

Epilepsy and mental health issues might not have been the source of van Gogh's creative genius, but they surely influenced his work. The sheer volume of his paintings and writings in a condensed time frame is an outlier, not to mention that treatment medications could conceivably have altered his vision. Tragically, these conditions played featured roles in his demise.



Chill-Out Honeydew Cucumber Slushy

6 servings

The dog days of August call for a delightfully tasty, refreshing, and healthy remedy. This slushy, high in B vitamins, will both cool and calm you. Enjoy!

Ingredients

- 4 cups honeydew (from about 1 small melon), rind removed, flesh cut into 1" pieces, frozen
- 2½ cups coconut water
- 1/3 cup mint leaves
- 2 tbsp. fresh lime juice
- 1/2 tsp. kosher salt
- 6 oz. English hothouse cucumber (about half a cucumber), peeled, cut into 1" pieces, plus more sliced for garnish

Directions

1. Blend honeydew, coconut water, mint, lime juice, salt, 6 oz. cucumber, and 2 cups ice in a blender until smooth. Divide among glasses, then garnish with cucumber slices.
2. **Do ahead:** Slushy can be made 1 hour ahead. Store in blender jar in freezer, then reblend on high speed to reincorporate.

Recipe courtesy of
www.bonappetit.com.



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BACK TO SCHOOL: Feet and Ankles Matter, Too!

For some kids, a summer free of school means more concentrated physical activity and time spent on their feet — running around outdoors with friends, biking, sports, summer camp, and pool and beach activity. Outdoor barefoot time may be way up, too.

All this activity might spur foot or ankle problems prior to a new school year. But don't trust that your child will tell you if they're experiencing discomfort. Be on the lookout for limping, sudden clumsiness, seeming lethargy, and diminished interest in favorite activities. Also, perform a foot check for ingrown nails, plantar warts, corns, and fungal nails, among other conditions.

Back-to-school dental exams and eye-health checkups are rightful priorities for many parents, but foot and ankle checkups deserve a seat at the table, too. Children's feet are not just small adult feet; they are a work in progress ... still growing, still developing.

Addressing issues now can spare your child problems later in life. We can also keep close tabs on chronic conditions (e.g., flat feet) or recent injuries to make sure they've healed properly. Some conditions might be uncovered during an exam that caused only minor discomfort but turned out to be something more serious, such as a hairline fracture.

Keep in mind that undiagnosed and untreated foot and ankle problems can impact your child's sports performance, social interactions, concentration in the classroom, and other areas of the body (e.g., knees, back).

School can be exciting yet challenging for students. Make sure your child is up to the challenge by scheduling a back-to-school foot and ankle exam at our office today.