

## 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.



# Don't Allow Hiking to Haunt You



Hiking is a great way to soak in the beauty of autumn. But underestimating a hike has consequences for your feet and ankles.

For instance, if a trail is uneven, rocky, or fallen leaves hide hazards, it's a lot easier to sprain an ankle. Wearing a heavy backpack can also raise your risk by throwing off your balance and making it tougher to recover from a misstep.

Achilles tendonitis may be an issue too. The repetitive stress placed on the Achilles tendon by hiking on uneven terrain and inclines (the steeper, the more pressure) can cause small tears in the tendon.

Repetitive stress can also produce a small crack or fracture in a bone in the ankle or foot, otherwise known as a stress fracture. Difficult terrain and hiking for too long, even on less challenging trails, raise the risk.

Take some hiking injury precautions:

- Research a prospective trail. Make sure it's appropriate for your level of fitness.
- Do some light stretching prior to and after your hike.
- Stay hydrated.
- Utilize a walking stick.
- If you feel foot or ankle discomfort during your hike, take a break.
- Traversing steep hillsides, slippery terrain, and wooded areas calls for good-quality hiking boots: strong, well-insulated, moisture-proof, with steel or graphite shanks to provide support, diminish stress and muscle fatigue, and better distribute impact energy to ease the arches' burden.
- For wet and chilly weather, layer up on the socks. Merino wool is moisture-wicking, comfortable, warm, and odor-resistant and helps keep blisters, fungal infections, and frostbite at bay.

If your autumn activity leads to persistent foot or ankle pain, hike on into our office for a thorough exam, accurate diagnosis, and effective treatment.



# What Lurks Behind Some Sprains

When the ankle is twisted or extended beyond its normal range of motion, the ligaments holding the joint's bones in place are stretched, partially torn, or completely torn — an ankle sprain. The consequences are pain, tenderness, swelling, bruising, stiffness, and difficulty supporting weight.

Sometimes, though, an ankle sprain may be masking a fracture. Both have overlapping symptoms. Automatically assuming an ankle injury is “just a sprain” is often a mistake. Yes, when a piece of bone is poking through the skin, obviously a fracture is in play, but many fractures aren't so apparent. Some are cracks or chips off a bone. The ability to walk or put some weight on the ankle does not preclude the possibility of a fracture either.

Many people with very mild sprains don't bother to call a podiatrist — we understand. The RICE method (Rest, Icing, Compression, and Elevation) may suffice to bring your ankle around. However, more significant sprains should receive podiatric care. Proper treatment can help ward off chronic ankle instability and future sprains. Torn ligaments may need to be surgically repaired.

If a podiatric exam reveals a fracture, treatment can range from conservative measures to reduction (manipulation of bones to align the ends) to surgical repair.

Don't allow an ankle fracture to hide in the shadows. Unattended ankle fractures may lead to infection, arthritis, and deformities that make normal walking an impossibility.

Call our office before heading to the ER or your personal physician (if insurance permits). ER doctors and general practitioners provide valuable services but lack expertise in foot and ankle matters. They frequently overlook subtleties a podiatrist will spot, which delays proper treatment, prolongs your healing time, may complicate your outcome, and costs you more.

## Mark Your Calendars

- Oct. 2** Rosh Hashanah (sundown): “Rosh Hashanah” literally means “head of the year” and is not mentioned in the Torah.
- Oct. 9** Emergency Nurses Day: Florence Nightingale introduced many lifesaving medical sanitation practices.
- Oct. 14** Columbus Day: Columbus's first voyage across the Atlantic took over two months. Dramamine, anyone?
- Oct. 16** Boss's Day: In 1958, Patricia Bays Haroski registered Boss's Day. Her boss happened to be her father, whose birthday was Oct. 16.
- Oct. 18** Meatloaf Appreciation Day: No one is quite sure if Meat Loaf the singer appreciated meatloaf the food.
- Oct. 25** World Opera Day: The minimum decibel level for a singer to break glass is 100 decibels, roughly equivalent to an active jackhammer one meter away.
- Oct. 31** Halloween: Why don't mummies have any friends? They're too wrapped up in themselves.





# Avoid a Vision Horror Story

Decorative contact lenses can modify one's eye color, sport a team logo, or display a creepy-looking image, seemingly perfect for football season or Halloween. In the right circumstances, they can be fun; done the wrong way, they can lead to tragedy.

Contact lenses are classified as medical devices by the FDA and require a prescription (corrective or noncorrective) from a licensed eyecare practitioner. Eye doctors will tailor your prescription to reflect your unique eye shape and size. If you purchase decorative contacts from someone other than an eye doctor, the seller is required to ask for your doctor's prescription, name, and phone number to verify the prescription. If they don't, they are breaking the law.

And there are lawbreakers galore. Decorative contacts are often sold over the counter by Halloween stores, beauty salons, flea markets, street vendors, and dubious online sites. Purchasing from these venues can be nightmarish for eyes:

- **Allergic reactions.** Nonprescription colored contacts may contain dyes and other materials that spur redness, itching, and discomfort.
- **Chemical toxicity.** Chemicals used in over-the-counter contacts sometimes contain chlorine and other harmful substances.
- **Corneal abrasions.** Ill-fitting contacts can scratch the cornea, which can lead to infection, severe pain, light sensitivity, and impaired vision.
- **Eye infections.** Lenses not customized for your eyes may trap bacteria on the eye's surface, resulting in infections and corneal ulcers. A severe bacterial infection called keratitis can cause blindness in 24–48 hours if not treated quickly. Studies show it's 16 times more likely to manifest with nonprescription contact usage compared to prescription usage. Ulcers may cause permanent scarring, possibly necessitating a corneal transplant to save vision.

If you're looking to jazz up your contacts, an eye doctor will happily, and safely, help you achieve your look.



## Black Bean 'n' Pumpkin Chili

Yield: 10 servings (2½ quarts); prep time: 20 min.; cook time: 4 hr.

*This slow-cooker chili uses ingredients you don't usually find in chili — for instance, pumpkin, which makes this dish so special. Cook up a big batch and freeze some for later; it tastes even better reheated.*

### Ingredients

- 2 tablespoons olive oil
- 1 medium onion, chopped
- 1 medium sweet yellow pepper, chopped
- 3 garlic cloves, minced
- 2 cans (15 ounces each) black beans, rinsed and drained
- 1 can (15 ounces) solid-pack pumpkin
- 1 can (14½ ounces) diced tomatoes, undrained
- 3 cups chicken broth
- 2½ cups cubed cooked turkey
- 2 teaspoons dried parsley flakes
- 2 teaspoons chili powder
- 1½ teaspoons ground cumin
- 1½ teaspoons dried oregano
- ½ teaspoon salt
- Cubed avocado and thinly sliced green onions, optional

### Directions

1. In a large skillet, heat oil over medium-high heat. Add onion and pepper; cook and stir until tender. Add garlic; cook 1 minute longer.
2. Transfer to a 5-qt. slow cooker; stir in the next 10 ingredients. Cook, covered, on low, 4–5 hours. If desired, top with avocado and green onions.

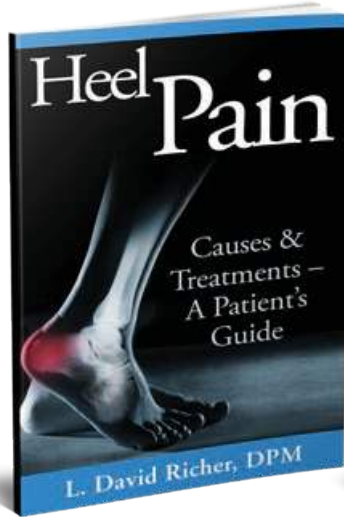
Recipe courtesy of [www.tasteofhome.com](http://www.tasteofhome.com).





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## Keep Ankles Firing on All Cylinders

A bursa is a fluid-filled sac that helps reduce friction between tendons and bones. There are over 150 of them located throughout the body, with the ankle being home to three prominent ones: the Achilles bursa, retrocalcaneal bursa, and medial malleolus bursa.

Bursae perform a great service, but sometimes they come upon hard times. A direct blow, falls, repetitive stress (overuse), infection, and other conditions such as rheumatoid arthritis, osteoarthritis, and gout can lead to bursitis, noted for its inflammation, pain, and stiffness. If the ankle joint develops a deformity, that's also an open invitation for bursitis.

When your Achilles bursa is acting up, you'll notice it at the back of the ankle, near the heel. Similar location for bursitis of the retrocalcaneal bursa. Bursitis of the medial malleolus will be felt along the outside of the ankle.

Don't ignore persistent pain in your feet or ankles. Pain is never normal. Give our office a call instead. We will do a thorough examination and ask about your history and activity level. An X-ray will likely be ordered to determine bone position or detect any abnormality that might have contributed to your bursitis. Sometimes a more specialized scan is required to evaluate tissue in the area and the extent of the bursitis.

In most situations, conservative treatments will bring healing, with rest being chief among them. But be forewarned that bursitis might flare up in the future. If bursitis becomes chronic, surgery may be necessary to remove the bursa or repair a bony deformity.

