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Presentation to



Padding and Taping is really - Practical Off-Loading & Wound Stress Force Countering Methods (friction, compression, torsion)

- Short-term solution, but Immediate;
- Requires a good understanding of foot anatomy and function; and,
- skill and training to properly effect a remedy for the problem.



Considerations

The importance of obtaining a thorough medical history cannot be overstated

Medical – General versus Local

General Medical Considerations

Include awareness and understanding of the patient's overall medical health status and how this impacts the treatment you will be providing.

Local Medical Considerations

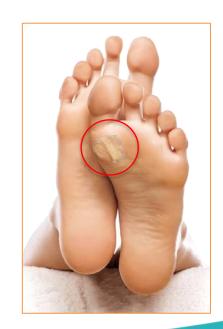
Include awareness and understanding of the physical factors directed at the foot causing or contributing to the presence of the specific lesion that you find present.



Medical – General versus Local | EXAMPLES

Callus under the first metatarsal

- Is the deep callus under the first metatarsal present because of poor quality shoes (insufficiently cushioned)?
- or is it due to an underlying osseous deformity such as an enlarged sesamoid bone in an atrophic Pes Cavus foot?
- Is this likely to go on to ulcerate?





Medical – General versus Local | EXAMPLES

Corn on the apex (tip) of a Hammer Toe

- Is the HT flexible or Rigid? Treatment will likely be different for each.
- Is it infected? Is there an underlying abscess?
 Foreign Body?
- Is the lesion non-healing? Malignancy? (Biopsy is best).





Medical – General versus Local | EXAMPLES

Interdigital Corns?

 Are the recently dispensed compression stockings causing crowding of the lesser toes causing this?



Image Source: Corns and Calluses Resulting from Mechanical Hyperkeratosis by DENISE B. FREEMAN, D.P.M., College of Podiatric Medicine and Surgery, Des Moines University—Osteopathic Medical Center, Des Moines, Iowa. Available in: https://www.aafp.org/afp/2002/0601/p2277.html



Medical – General versus Local | What to look for?

Examine the footwear:

- Does the patient have appropriate footwear for their needs?
- Velcro versus lace
- Too heavy and clumsy for the patient.
- Are the shoes too old and no longer supportive or protective?

Construction of the shoe:

- Stable, supportive versus flimsy and too flexible.
- Adequate width to the toe box and adequate depth.
- Outer sole fall prevention what is suitable for indoor versus outdoor.
- Adequately insulated and waterproof for winter, outdoor use (pernio, frostbite)

Will footwear modifications address the patients problems?



The NLDOCAT Evaluation

Treatments: What have Nature of problem e.g. you tried at home? Have Heel Pain you been treated for a similar problem before? **Location:** Have Onset: Did the **Duration:** How **Characteristics:** Aggravating or patient point to the **Alleviating** long have you pain come on Describe the pain area of pain and been experiencing suddenly (possibly (aching, stabbing, Factors: What show if it radiates the problem? due to an injury) throbbing, sharp, makes the pain in any direction. better or worse? or gradually? dull, etc.)



Start of Hands-On Workshop

Specific Padding and Taping Applications by Anatomic Site:

Toes:

- Dorsal e.g. Trigger Hallux or hammer toe corn/ulcer
- Demonstrate various padding options including using Tubigauze, Gazofix, etc.
- Apical Lesion
 – demonstrate apical pad;
 Crest pads; Policoff
- Interdigital HAV, lesser toes (prefab versus made pads); Silicone Orthodigital (next workshop)
- Plantar usually the Hallux (IP joint sesamoid?)

Metatarsals:

- Plantar off-load felt padding
- (demonstrate shoe insole modifications)
- Bunion bunion shield
- Tailor's bunion Tailor's bunion shield
- Achille's Tendon:
 - Special Cases Post amputation Stumps



Thank You

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