Primary Foot Care
Common Nail Problems
When to Refer?
Fungal Nails
Fungal Nails - Treatment

- Routine Debridement
- Topical Agents
- Oral Agents
**Fungal Nails - Treatment**

**Oral Agents**

- Fluconazole (Diflucan)
- Itraconazole (Sporanox)
- Ketoconazole (Nizoral)
- Griseofulvin (Gris-peg)
- Terbinafine (Lamisil)
When to Refer?
Pedal Skin Problems

- Tinea Pedis
- Verrucae
- Corns & Callouses
Tinea Pedis - Etiology

- Dermatophytes
  - Trichophyton
  - Epidermophyton
  - Microsporum
- Saprophytes and Yeast
- Bacteria
Tinea Pedis - Treatment

• Topical Agents
  – Imidazoles: miconazole, clotrimazole, sulconazole, etc.
  – Others: undecylenic acid, tolnaftate

• Oral Agents
  – Used in severe/resistant cases
  – Griseofulvin, ketoconazole
  – Fluconazole, itraconazole, terbinafine

• Local Care
When to Refer?
Verrucae
When to Refer?
Corns - When to Refer?

- Multiple Lesions
- Multiple Digital Deformities as Cause
- Rigid Digital Contractures
- Ulcerative Lesion
  - Immediate
  - Definitive
- Diabetics, PVD, Neuropathic
Morton’s Neuroma - Etiology

- Narrow Shoes (Primary Cause)
- High Heels
- Biomechanical (Functional) Abnormalities
  - Excessive pronation
  - Flatfoot
  - Hammertoes
- Traumatic
- Anatomic
Morton's Neuroma
Morton’s Neuroma - Symptoms

- Burning
- Tingling
- Numbness (Usually only Subjective)
- Radiating Pain into the Involved Toes
- Feeling as Though “Walking on a Pea” or “Sock is Bunched Up”
- Strong Desire to Stop, Remove Shoe, and Massage Forefoot
When to Refer?
Hammertoes - Conservative Treatment

- Treat Only the Symptoms
- Aperature Pads
- Splints
- Extra-depth Shoes
- **Caution** When Using Acid Plasters In:
  - Diabetics
  - PVD
  - Neuropathic
Hammertoes - When to Refer?

- Rigid Deformities
- Recurrent Ulceration
- Chronic Pain in All Types of Shoes
- Other Associated/Contributing Deformities
- Patient No Longer Satisfied with Conservative Therapy
Heel Pain
Heel Pain - Etiology

- Plantar Fasciitis/Heel Spur Syndrome
- Heel Bursitis
- Nerve Entrapment
- Stress Fracture
- Systemic Arthritides
- Biomechanical
- Obesity
Heel Spur Syndrome/Plantar Fasciitis

Conservative Treatment

- Rest Strap
- OTC Arch Support
- Custom Orthotic
- NSAIDs
- Injections - Cortisone
- Stretching Exercises
- Physical Therapy
Flatfoot
When to Refer?
Flatfoot - Why Treat?

Conditions Associated with Untreated Flatfoot:

- Bunion Deformity
- Hammer Digit Syndrome
- Metatarsalgia
- Chronic Plantar Fasciitis/HSS
- Postural Pains in Legs, Knees, Back
- Arthritis of Involved Joints (AJ, STJ, MTJ)
When to Refer?
Conclusion