

Our feet are something we take for granted – unless they are causing us grief – then they can be an overwhelming problem that takes over completely ruining our days.

Feet were our only method of transportation for thousands of years, and today we still rely on them to you might remember - as Brenda Lake used to say - “what is most important is how we get from point A to B”.

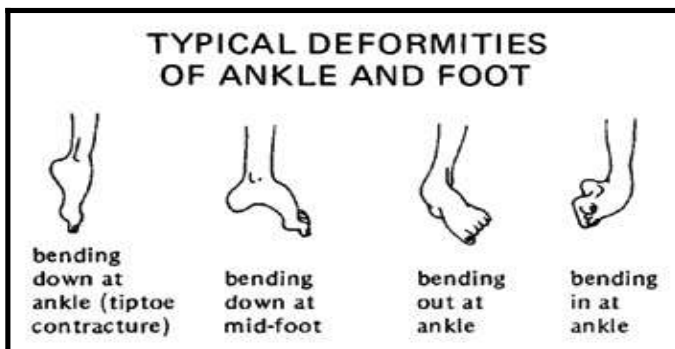
Polio survivors can have many different feet abnormalities due to changes in remaining muscles after polio. A few polios take different size shoes for each foot, because the polio foot didn't grow as big as the non-polio foot. This could up to a 4 to 5 shoe-size difference, necessitating buying 2 pairs to have a pair that fits you!



NB Heel raise should be on smaller!

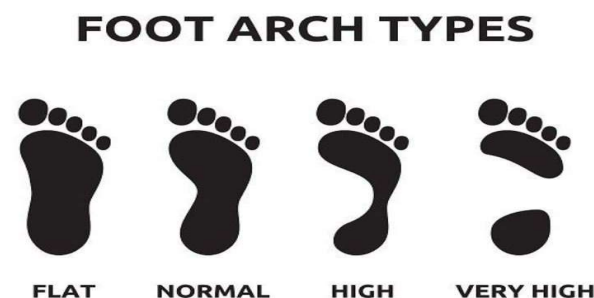
Through the **Orthotic Dept at Fiona Stanley**, polios have been entitled to 1 free pair a year if they have a 2 or more size difference and need to **buy 2 pairs to get a pair to fit**.

They are also entitled to free shoe modifications including build-ups if needed. Misshapen feet may also require **specially made footwear** and these can be assessed and **provided free** through the Orthotic Dept at FSH. Referral from your GP is required to access these clinical services.



These are typical deformities we have seen resulting from polio here in WA and these can become more exaggerated and worsen as we age, making walking even more difficult. We need specialised help for these problems.

“**UW Medicine**” notes that an unusually high arch (see 2nd picture above) is associated with nervous system disorders and that these can include, but aren't limited to, muscular dystrophy, **polio**, stroke, and spinal cord tumor.



FLAT FEET

As opposed to high arches, flat feet occur with polio when the muscles needed to move and lift the toes and feet are weakened or paralysed. We get floppy feet or poorly controlled movement that may require stabilising inserts, shoes, boots or calipers. There are new methods of stabilising being invented these days so it is worth getting checked out by professional footwear experts and orthotists.



STRESS FRACTURES

A number of polios have reported instantaneous stress fractures just walking, stepping up or down, or even at the beach or in the pool. Bones in polio affected areas are often osteoporotic and smaller than normal due to poor growth after polio illness, or reduced muscle pull with weakened muscles not stimulating bone density. Some polios have experienced fractures from the effect of drug treatments like Fosamax, Actonel and injectable drugs so be wary with those too. Trying to increase bone density of polio affected areas is unlikely to work. You are better off increasing your intake of minerals needed for bones that I have mentioned in previous articles.

COLD FEET and LEGS

Cold feet and limbs are very typical in polio survivors. Muscles are part of the insulation that protects against core heat loss. Muscles also stimulate blood flow, keeping warm blood pumping round the body. When body tissues become cool, the blood vessels constrict making blood flow harder in order to preserve body warmth. When the muscles become colder they also tighten up making muscle action more difficult. Other aging-related factors can make this worse and all of this increases falls risk.

Constantly cold feet may result from insufficient blood flow. Poor circulation is a complication of diseases from smoking, high blood pressure, heart disease and history of stroke. Your podiatrist can check your circulation by feeling for pulses in the feet. Coldness along with toes that turn colors - from white or blue to red - may also be due to Raynaud's disease, a common condition in which the blood vessels spasm and constrict in response to exterior cold temperatures, ie worse in winter.

CLAW and HAMMER TOES

Also known as claw foot, is when the first toe joint points up and the second toe joint points down. For some people it causes no discomfort, for others, it can be very painful. Special footwear can be made to accommodate the extra height needed, otherwise corns and ulceration can occur.



CORNS and BUNIONS

Corns can be caused by bunions, hammer toe, or ill-fitting shoes. Over time, they may become painful and should be treated. Corns are patches of thickened skin, often found on the soles of the feet or anywhere on toes. They are normally painless. These areas form to protect the skin and to stop the body from developing blisters.

Bunions are abnormalities of the feet that cause a bump to develop on the large toe joint. This can cause the big toe to turn slightly inward. Some conditions, including rheumatoid **arthritis** or **polio**, increase the likelihood of developing a bunion. The old fashioned lick of borax has fixed an aching bunion for me within an hour, when wearing-in **new tight shoes**. Also soaping your hands and wiping the **soapy suds** onto the friction areas of the foot helps to stretch the new shoe to fit your foot. Lessens friction and pain.

GOUT

Gout occurs when levels of uric acid in the blood rise until urate crystals start to build up around the joints, causing inflammation and severe pain. An old remedy that seems to work is again a lick of borax.

BALD TOES

Did you know that **losing hair** on your toes is something that you should worry about? According to the Mayo Clinic, loss of hair on legs and feet could be a sign of **poor circulation** or peripheral artery disease.



NUMBNESS and TINGLING

Peripheral artery disease is a narrowing of the arteries that reduces blood flow that can result in numbness and is usually accompanied by leg pain and cold lower legs.

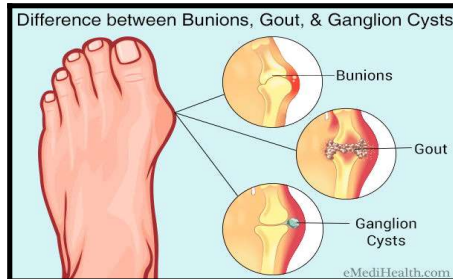
Diabetic neuropathy also includes numbness, tingling and pain in the feet. This can contribute to a greater risk of a person experiencing cuts or injuries to the feet due to lack of feeling. High blood sugar damages nerves.

ULCERS and WOUNDS that DON'T HEAL

If you have a cut or wound that doesn't heal, it could be a sign of diabetes. Poor circulation due to diabetes makes it difficult for ulcers or wounds to heal because it doesn't receive as many healing red blood cells. If caught early, painting with iodine tincture hastens healing and prevents infection. **Silver Chain** now uses **iodine** for these too.

DRY FLAKY FEET, CRACKED HEELS

Most of us have had dry or cracked heels before. Wearing closed-in shoes and socks helps skin to not dry out. Taking fish oil can help. Try rubbing with castor oil as going to bed at night. If moisturizing is not working it could be a symptom of a thyroid problem.



SPURS and PLANTAR FASCIITIS

A heel spur is a calcium deposit that forms a bony protrusion along the plantar fascia. Heel spurs are caused by long-term strain on muscles, tendons and ligaments. They can also be caused by arthritis, excess body weight, and by wearing badly fitted or worn-out shoes.

In contrast, plantar fasciitis is a condition where the plantar fascia gets irritated and swollen, which causes pain in the heel.

Morton's neuroma is when a nerve becomes swollen in the ball of the foot, commonly between the base of the second and third toes.



ITCHY FEET

Itchy, scaly feet may signal **athlete's foot - a fungal infection** Dr Andersen says, meaning on the sides and bottoms of the foot and in between toes. Look for a white, scaly or flaky rash, sometimes accompanied by cracks between the toes that itch and sting or burn. Athlete's foot mostly happens when sweaty feet are confined in tight shoes, but is contagious and can also be spread through contaminated surfaces like towels, floors, and other shoes, according to the Mayo Clinic. This can lead to fungal toenails, which can get worse and harder to treat as we age since the body can't fight infections as well. **Soaking feet** or toe in **Listerine** for 15 minutes for several days usually fixes these infections. Dusting feet or shoes with "**corn**" **cornflour** will stop itches and stops feet sticking to shoes.

SWOLLEN FEET

Swollen feet with pitting oedema is common in polios particularly when movement is restricted or feet are dependent. Try to elevate on a foot stool and move feet around to increase circulation. Can be a sign of heart disease or damage to blood vessels or lymph drainage system in legs, knee injuries etc. Walking and leg exercises can help. Support stockings may help or may just shift the oedema higher up the leg



SMELLY SHOES/FEET

Been to a house where smelly shoes are all kept outside? According to the National Institutes of Health, foot odour is a sign of zinc deficiency. Many people have reported to me their success with smelly feet from taking some extra zinc. If I stop taking zinc my feet and shoes also get smelly. This resolves when I take more zinc again. If foot infection is suspected try the soaking in Listerine trick again.
www.seattletimes.com/zinc-solved-a-stinky-feet-problem
www.medicalnewstoday.com William Morrison, MD 2018

