



WE KEEP YOU WALKING (239) 430-FOOT

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### In This Issue...

- ✓ FFLC Total Ankle Replacement
- ✓ Children’s Foot Deformities: When To Be Concerned
- ✓ Back to School with Backpack Smarts
- ✓ September Is Fruit & Veggies – More Matters Month
- ✓ Recipe of the Month: Skillet Chicken with Brussels Sprouts and Apples

## FFLC TOTAL ANKLE REPLACEMENT

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### Scandinavian Total Ankle Replacement (STAR)

The STAR implant is the only FDA approved mobile-bearing TAR and is approved to be used without bone cement. These features have allowed for shorter operating times, quicker recovery, and 10-year survival rates greater than 90%. New soft tissue dissection technology has reduced soft tissue complications



All treatment options will be discussed with the patient, so the appropriate procedure, or non-surgical approach, is chosen.

The evolution of the Total Ankle Replacement (TAR) began in the mid-1970's and progressed until the early 1990's with the introduction of the Agility Ankle. Although it is no longer available, this implant paved the way for the new 2nd and 3rd generation implants used by lower extremity surgeons today.

The new 2nd and 3rd generation TAR devices are anatomic and stable, and duplicate normal ankle joint motion. In 2000, the Scandinavian Total Ankle Replacement (STAR) was approved by the FDA. The STAR is the only TAR that is mobile bearing and approved for use without bone cement.

These features have shown to provide a more natural ankle joint motion, including rotation of the leg, and a longer survival rate consistent with other joint replacement procedures.

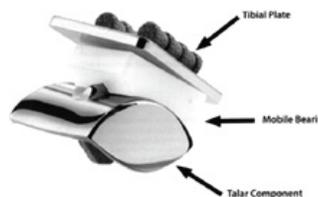
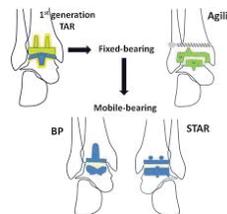
More recently, the use of Plasma blade technology (when available) in conjunction with the STAR, has resulted in shorter operating times and less soft tissue complications.

All procedures are performed in either Collier or Lee county at hospitals that FFLC surgeons hold staff privileges. If you have any questions, or would like to schedule a patient consultation, please do not hesitate to contact us directly.

### Who Are Candidates?

Although the indications continue to evolve, the ideal candidate is age 55 or older, 250 lbs. or less, and participates in low impact or sedentary activities. Low impact activities such as walking, hiking, and golfing are safe and permitted. Each patients circumstances are unique and reviewed during consultation.

....continued on page 2



### OUR OFFICES:

**Central Scheduling**  
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### OFFICE HOURS:

Mon: 9:00am – 5:00pm  
Tue: 9:00am – 5:00pm  
Wed: 9:00am – 5:00pm  
Thu: 9:00am – 5:00pm  
Fri: 9:00am – 5:00pm  
Sat: 9:00am – 12:00pm

(The Saturday hours only for the Main location & the Ft. Myers location)

### Follow us...



....continued from page 1 **FFLC TOTAL ANKLE....**

**What Is The Success Rate?**

The current 3rd generation Total Ankle Replacements have demonstrated a 10 year survival rate of 94%.

**How Difficult Is The Recovery?**

The procedure is performed under general or spinal anesthesia. The patient is admitted the same day and can expect a 23 hour stay. Although each patient is different, recovery usually takes 6-8 weeks. The patient will begin protected partial weight bearing after 2 weeks and progress to full weight bearing at the beginning of the 5th week. A short course of Physical Therapy is necessary to accelerate recovery.



The procedure is covered by most insurance companies.

**Family Foot & Leg Center, P.A.**  
Locations in Collier and Lee Counties

[www.NaplesPodiatrist.com](http://www.NaplesPodiatrist.com)  
Phone: 239-430-3668 (FOOT)  
Self-Service # 844-889-1725

**Children’s Foot Deformities: When To Be Concerned**

Parents are worriers – it comes with the job! We worry about our children’s eating habits, speech development, eyes, ears ... just about everything.

We worry about our children’s feet too, especially if they display any signs that are out of the ordinary. Those feet that are still developing have to carry the body’s entire weight for a lifetime.

Also, many adult foot problems have their origins in childhood and are present at birth. Taking good care of your child’s feet with good foot care and regular professional attention can help minimize these issues.

**Watch for These Baby Foot Deformities**

**Congenital clubfoot.** With this condition, the newborn’s foot is twisted and can resemble the top of a golf club. Left untreated, a clubfoot will cause arthritis and an inability to walk normally.

Treatment begins immediately and includes progressive stretching and casting as well as surgery.

**Metatarsus adductus.** Here the front half of the foot will turn inward. This deformity often corrects itself as the child ages, but starting treatment soon after birth improves the child’s prognosis. Children with this condition are at an increased risk for developmental dysplasia of the hip.

**Pediatric flatfoot.** Infant feet normally look flat because of a pad of fat in the arch area, and because their foot and leg muscles can’t yet support the arch. If the child’s foot still appears flat by age 5, consult with a podiatrist. Flexible flatfoot, where the arch disappears when standing but reappears when sitting, is usually outgrown as the arch shapes itself. However, rigid flatfoot can present with pain and cramping, heels that tilt outward and pain when walking.



**Symptoms of Potential Foot Problems in Older Children**

Watch your child for these signs that could indicate a foot problem:

- Complaining of foot pain. Pain is not normal, especially if there is swelling present and the pain persists beyond a brief time.
- Cannot keep up while playing or participating in sports. Fatigue is common in those who have flat feet because the feet and leg muscles aren’t properly functioning.
- Withdrawing from activities. Heel pain can cause children to sit out activities that they usually enjoy. Repetitive stress can strain muscles and lead to inflammation of the growth plate.

....continued on page 3

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## ....continued from page 2 **Children's Foot Deformities....**

- Hiding their feet. Children may fear a trip to the doctor's office if they feel pain or see changes in their feet or toenails.
- Tripping and falling. Frequent clumsiness may be a sign of balance or neuromuscular conditions or in-toeing.

Stay alert to the health of your child's feet. Check feet regularly for anything unusual including calluses, redness, growths as well as swelling around the toenails.

## **Back to School with Backpack Smarts**

Are your children begging for the latest and greatest backpacks?

Unfortunately, often we focus on finding the latest superhero design rather than a backpack that will maintain your child's back health. The right backpack will have its weight evenly distributed across the body.

Some students have back pain from carrying too much in their backpacks. Doctors recommend that kids carry no more than 10% to 15% of their body weight in their packs.

A too-heavy pack that is placed incorrectly on the shoulders can force a child to arch the back or bend forward at the hips to compensate. This can lead to neck, shoulder and back problems as the spine compresses unnaturally. Improper backpack use can also lead to bad posture.

### **Tips To Find the Right Backpack**

- Keep it lightweight – canvas is lighter than leather.
- Wide, padded shoulder straps.
- A padded back for comfort and for protection from sharp objects.
- A waist belt helps distribute the weight more evenly.
- Multiple compartments distribute the weight over the whole pack.
- Wheeled models – where allowed – can relieve excess weight, but may be hard to get up stairs.

Whatever backpack you choose, help your child lighten the load. Encourage them to use their locker instead of carrying everything around and to bring home only what is needed for homework at the end of the day.

Learn more about choosing and using the right backpack at [KidsHealth.org](http://KidsHealth.org).

## **September Is Fruit & Veggies – More Matters Month**

Are you and your family getting plenty of fruits and vegetables every day? These powerhouse foods pack an amazing array of nutrients like iron, calcium, magnesium and fiber that help build bone and muscle and even fight health issues like coronary heart disease.

Instead of counting daily servings of fruits and veggies, fill half your plate with these foods at every meal and snack. And remember that all types count toward your daily intake including fresh, canned, frozen, dried and 100% juice.



### **6 Ways To Add More Fruits and Vegetables to Your Diet – Painlessly!**

- Start the day right by adding fruit to your breakfast. Make a banana berry smoothie, toss dried fruit into oatmeal or enjoy a vegetable omelet
- Double the amount of vegetables called for in soup, stew, pasta, salad and casserole recipes. You'll still get great results with lots of extra nutrition.
- Sneak grated or pureed vegetables and fruit into meatloaf, pasta sauces and baked goods.
- Experiment with new produce. How many of these have you tried? Kumquat, broccoli rabe, dragon fruit, jicama, garlic scapes, ugli fruit, lychee, yucca, tomatillo, sea beans, star fruit.
- Smarten up your snacks. Keep fresh and dried fruit handy and pack some pre-cut fresh vegetables into the refrigerator.
- Indulge your sweet tooth with fruit-based desserts. Add fresh fruit to ice cream or yogurt or enjoy frozen grapes and banana slices.

The [FruitsAndVeggiesMoreMatters.org](http://FruitsAndVeggiesMoreMatters.org) website has loads more helpful information including menu planning and storage tips.

### **History FootNote**

Hippocrates, the father of medicine, described clubfoot as early as 400 BC and recommended non-surgical treatment of manipulation and bandaging, which is remarkably similar to today's techniques.

### **Celebrity Foot Focus**

Many successful athletes were born with clubfoot including Olympic skater Kristi Yamaguchi, professional soccer player Mia Hamm, and football stars Troy Aikman and Charles Woodson.

### **Foot Funnies**



What does a foot doctor call when the car breaks down? A toe-truck!

### **Trivia**

**Babies need to wear shoes to protect their feet.**

- A. True  
B. False

**Answer: False**

If you've ever tried to keep shoes on a baby, you may be glad to know they don't really need them. Let your little one yank them off. Same goes for super-snug socks, too. Babies feet are growing so quickly that they don't need anything closing them in. Save the shoes for when they are walking on their own.

## Recipe of the Month

# Skillet Chicken with Brussels Sprouts and Apples

Brown sugar and apples bring sweetness to this chicken and Brussels sprouts dish that is perfect for those crisp fall evenings.

## Ingredients

- 1 1/2 lb. boneless, skinless chicken thighs
- 2 tsp. chopped fresh thyme
- Kosher salt and black pepper
- 1 tbsp. canola oil
- 1 (12-oz.) package shredded Brussels sprouts
- 1 sliced apple
- 1/2 sliced red onion
- 1 Chopped Garlic Clove
- 2 tbsp. white balsamic vinegar
- 2 tsp. brown sugar
- 1/3 c. chopped toasted pecans

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## Directions

1. Season chicken thighs with fresh thyme, and kosher salt and black pepper. Cook in canola oil in a large skillet over medium-high heat until cooked through, 4 to 5 minutes per side; transfer to a plate.
2. Add shredded Brussels sprouts, apple, red onion, and garlic clove to skillet. Cook, tossing, until Brussels sprouts are wilted and onion has softened, 5 to 6 minutes. Stir in white balsamic vinegar and brown sugar. Season with kosher salt and black pepper.
3. Return chicken to pan and top with toasted pecans.

Recipe courtesy of CountryLiving.com



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