



Toe Discoloration and COVID-19

As many are well aware, the most common symptoms of COVID-19 are fever, dry cough, sore throat, shortness of breath, muscle aches, fatigue, and loss of taste or smell. Digestive issues and conjunctivitis (pinkeye) have appeared on the radar, too. Another one, researchers are examining is toe discoloration.

"COVID toes" usually begins with purplish-red discoloration that sometimes graduates to bumps on the toes and small ulcerations. For some people, the discolored areas may be itchy or feel like they're burning. COVID toes may appear as a lone symptom, or the first of several to manifest.

Some researchers believe the coronavirus stimulates local inflammation, typically centered on the toes (and fingers). In addition, the coronavirus may cause clotting in small blood vessels in the toes, resulting in discoloration.

Others postulate that the body's immune system response to inflammation caused by COVID-19 might play a role. COVID toes predominantly affects kids and adolescents. Those two age groups may have a more vigorous immune response to the coronavirus, which can cause a clampdown of small blood vessels, inducing toe discoloration.

However, many who have been tested for COVID-19 did not test positive, did not have antibodies for COVID-19, yet still displayed COVID toes. One theory is that during the coronavirus lockdowns, kids and adults were far less physically active, spent much more time in sedentary positions, and were barefoot or in socks for nearly the entire day, triggering toe discoloration.

Definitive answers to the correlation between toe discoloration and COVID-19 won't be found until large, well-designed studies with control groups are conducted. If you notice any concerning changes to your feet, contact us for a thorough examination.

From the Doctor

Dr. Gregg Neibauer, DPM



Hope everyone is well and enjoyed their summer, it's hard to believe hunting season is upon us. If any foot issues arise from hiking while trying to find those allusive deer or elk, give us a call. We are here to help fill the freezer for the winter. Happy hunting and be safe,
Dr. Neibauer

Get Social w/Us





Falls Prevention Awareness Day

September 22, 2020

According to the Centers for Disease Control and Prevention, falls are the number-one cause of injuries, and deaths from injury, among older Americans. One in five falls will result in a serious injury, such as a fracture or traumatic brain injury. One in four older Americans who fracture a hip die within six months.

Falls can rob an older person of their independence and cause quality of life to plummet. A prior fall may strike fear in a person, so they reduce their activity level and become physically weaker and less flexible — elevating their risk of falling.

Vision problems, medications, and home hazards are a few causes of falls in those age 65+, but another major one is pain or dysfunction in the feet and ankles. Examples include heel, ankle, and arch pain; deformities such as hammertoes and bunions; systemic diseases such as diabetes and osteoporosis; and seemingly minor conditions like corns and calluses.

A person who feels pain or discomfort tends to compensate by shifting their weight or altering their gait (walking pattern). This can affect their balance and place too much stress on other body parts, reducing stability. In addition, inappropriate or improperly fitted footwear may decrease traction or contribute to pain, foot deformity, or clumsiness — resulting in falls.

But there is good news. **Podiatric treatment for foot and ankle pain or dysfunction can prevent many falls.**

If you or a loved one is experiencing foot or ankle pain, contact us for an evaluation, diagnosis, and treatment. Better yet, make regular podiatric exams part of your healthcare regimen. Remember, foot and ankle pain is not a normal part of aging!

Mark Your Calendars

- September 6** Fight Procrastination Day: Should have been celebrated on September 5.
- September 14** Eat a Hoagie Day: Hoagie, sub, hero, grinder, torpedo ... all delicious.
- September 19** Talk Like a Pirate Day: Aaaaarrguably the best day of the month, matey!
- October 5** National Do Something Nice Day: what will you do for someone?
- October 13** National M&M Day: Regular or Peanut?
- October 21** National Apple Day: An apple a day keeps the doctor away....



Suspended Between Alert and Snoozeville

Sleepwalking is a mystery that has intrigued humankind for centuries. Until the 1950s, the belief was that sleepwalkers were acting out their dreams. That theory was debunked with the discovery of rapid eye movement (REM) sleep. The brain is most active, and dreams are most intense during REM sleep, but sleepwalking occurs prior to that sleep phase.

Though the understanding of sleepwalking (somnambulism) is still sketchy, scientists are making some headway. Electroencephalograms indicate that the brain is out of sync during sleepwalking; some areas of the brain (e.g., the part responsible for motor control) are active, while others are dozing.

That's why sleepwalkers can perform certain (frequently odd) tasks but remain oblivious to those around them — and remember nothing of their sleepwalking adventures upon awaking. Some attorneys have utilized a sleepwalking defense for clients accused of murder and other crimes ... with some success.

Children experience sleepwalking on a grander scale than adults but generally grow out of it by their teen years. Recurrent sleepwalking in adults may suggest an underlying sleep disorder that should be addressed.

If one or both parents are sleepwalkers, their child is three to seven times more likely to follow suit. Pain seems to be blunted by sleepwalking as well. In one French study of 100 subjects, 47 had experienced injuries while sleepwalking — some serious — but only 10 were immediately awakened by the pain. Headaches, including migraines, are also more prevalent among sleepwalkers.

Contrary to urban legend, you won't harm a sleepwalker if you awaken them. However, due to the sleepwalker's potential confusion and agitation, the reverse guarantee can't necessarily be made. Better to play it safe and just gently guide them back to bed.



Chickpea Salad

Serves 6; calories per serving: 240; prep time: 10 minutes; cook time: 0 minutes

Delicious, low in fat, and packed with protein, chickpea salad is the perfect send-off for the fresh summer produce season!

Salad Ingredients

- 1 avocado
- 1/2 fresh lemon
- 1 can chickpeas, drained (19 oz.)
- 1/4 cup red onions, sliced
- 2 cups grape tomatoes, sliced
- 2 cups cucumber, diced
- 3/4 cup green bell peppers, diced
- 1/2 cup fresh parsley (dried parsley doesn't hack it for this salad; cilantro and dill are preferable substitutes)

Dressing ingredients

- 1/4 cup olive oil
- 2 tablespoons red wine vinegar
- 1/2 teaspoon cumin
- salt and pepper

Instructions

1. Cut avocado into cubes and place in bowl. Squeeze juice from 1/2 lemon over avocado and gently stir to combine.
2. Add remaining salad ingredients and gently toss to combine. (Note: If salad is prepared well ahead of mealtime, keep avocado and lemon juice separate from rest of salad ingredients until just before eating.)
3. Refrigerate at least one hour before serving.
4. Dressing ingredients can be combined in a mason jar ... give it a good shake! (Leftover dressing will keep for at least one week.)

(Recipe courtesy of Holly N., www.spendwithpennies.com.)



Alpine Foot & Ankle Clinic

FOOT & ANKLE CARE FOR THE WHOLE FAMILY

Dr. Gregg Neibauer, DPM

1845 Bancroft Street, Missoula, MT 59801



Free
Books



Call (406) 721-4007 or
visit www.AlpineFoot.com

We want to thank you for referring patients to us. We are very glad that you trust us with your patients, family and friends. Making our patients feel comfortable at our office and healed is most important to our staff at Alpine Foot and Ankle Clinic! Thank you for partnering with us.

No part of this newsletter may be used or reproduced in any manner whatsoever without written permission of the author. No expressed or implied guarantees have been made or are made by the author or publisher. Individual results may vary. Neither author nor publisher accepts any liability or responsibility to any person with respect to any loss or damage alleged to have been caused by the information in this newsletter. Always seek professional medical advice.

Keeping Feet and Ankles Healthy While Playing Sports



Sports are a great way to get exercise, build self-confidence, and have some fun. Foot and ankle injuries sometimes come with the package. Certain injuries may be unavoidable, but many can be prevented with some simple measures.

Warm up before diving into an activity. It's eye-opening how many people bypass this step. Warm-ups don't have to be convoluted. A brisk five-minute walk or two to three minutes of light jogging followed by some stretching (no "bouncing") should do the trick.

Wear sport-specific footwear. For instance, wearing running shoes to play basketball is not ideal. Basketball shoes are designed for the cutting, quick stops, and jumping inherent in basketball; running shoes are not. In addition, make sure that shoes fit well and provide good arch support, and replace them when the tread or heels are visibly worn down.

If you're just beginning a new sport or have been inactive for a while, don't try to go full throttle immediately — that's a prescription for injury. Ease into it by participating at low intensity for a couple of weeks, then raise the intensity level in subsequent two-week intervals.

Beware of running on uneven surfaces. Nature trails contain many foot and ankle hazards: rocky terrain, hills with loose debris, hidden obstacles and holes, and tree roots.

Take regular breaks during a game to enable the body to recover and stay hydrated. Muscle fatigue raises the risk of injury.

Some muscle soreness is normal with most physical activity; pain is not. If you experience pain, stop. Attempting to tough it out will cause an injury or exacerbate an existing one.