



Tailor's Bunion ... Keeping Up with Big Brother

About the Doctor

Lucy Meier, DPM



Dr. Lucy Meier is a Wisconsin native and grew up on a strawberry farm in Sturgeon Bay. She aspired to be a foot

doctor since she was twelve years old. She attended the University of Wisconsin - La Crosse before going to podiatry school at Rosalind Franklin University in North Chicago. She completed three years of surgical training at Legacy Wheaton Franciscan Hospitals, here in Milwaukee. She loves to teach and is currently the Assistant Director for the Foot and Ankle Surgery Residency Program at Ascension Hospitals in SE Wisconsin. Dr. Meier is a proud mom of 3! When she has time to herself, she loves to read history, specifically presidential biographies!




A tailor's bunion, or bunionette, is a prominence of the fifth metatarsal bone (the long bone that runs along the top outside of the foot) where it connects to the base of the little toe. The fifth metatarsal begins to protrude outward; the little toe begins to point inward. The subsequent bump is prone to irritation, pain, redness, and swelling and can significantly impact one's quality of life. Occasionally, a bone spur (a bony outgrowth) on the outside of the metatarsal bone causes similar issues.

Tailor's bunion has been identified as such for centuries. Early on, tailors spent long hours sewing while sitting on the ground cross-legged, the outside edges of their feet rubbing along the ground. The resultant friction and pressure greased the skids for little-toe bunions.

Tailor's bunions are not as common as regular old bunions. One study of over 2,200 subjects with foot disorders found that nearly ten times as many had regular bunions than tailor's bunions. Some people are blessed to have a regular bunion and tailor's bunion on the same foot!

Prime instigators of tailor's bunions include inherited foot bone structure that's abnormal, loose ligaments, wearing shoes that don't fit correctly or are otherwise terrible for foot health when worn too much (e.g., high heels), and tight calf muscles.

If you suffer from discomfort in the little-toe area, contact our office. A tailor's bunion is a fairly simple diagnosis because the bony protrusion is so visually apparent. Conservative treatment measures are abundant — e.g., shoe modification, padding, oral medications, icing, orthotic devices (over-the-counter or custom), and corticosteroid injections. Surgery looms if conservative options fail.



‘Pain and Expletives: The Stubbed Toe Story’

While going barefoot, stocking-footed, or donning open-toed footwear, we’ve all stubbed a toe. The pain is jolting because the toes are teeming with nerve receptors (more so than many other parts of the body) that relay messages about pressure, vibration, texture, temperature, pain, and body position to the brain. Hopping on one leg, desperate foot rubbing, and choice words often follow. Most times, the pain quickly dissipates.

However, if you stub your toe and the discomfort is not temporary, a number of things could be going on. For instance, swelling, bruising, and intense pain when applying weight to the toe might indicate a broken bone. (Bruising can occur apart from a broken bone and sometimes takes a day or two to appear.)

Ligament tears are possible, too. Ligaments in the toes aren’t as sturdy as elsewhere and tear more easily. The object responsible for the stubbing might splay two toes.

If a toenail bears the brunt of the impact, the nailbed might get damaged and bleed under the nail (subungual hematoma). Nails are home to lots of bacteria, so any damage there raises the risk of infection.

Lacerations can result from a stub, too. If a wound continues to leak blood after being tended to, a medical professional should have a look. Stitches and disinfection may be necessary.

If pain recedes quickly after stubbing your toe, there is no deformity or swelling, and your nail displays no obvious changes, you’re good to go. Otherwise, rest, ice, and elevate the toe. If improvement stalls, give our office a call. If you have severe pain, diabetes, or circulatory issues, call us right away.

Mark Your Calendars

- Feb. 2** Groundhog Day: Groundhogs are also known as woodchucks and whistle-pigs.
- Feb. 9** National Pizza Day: Lombardi’s of New York City is recognized as the first U.S. pizzeria (1905).
- Feb. 12** Super Bowl: Fans of Detroit, Cleveland, Jacksonville, and Houston are still pining for a Super Bowl appearance.
- Feb. 14** Frederick Douglass Day: Douglass was the first African American to receive a vote for president at a major political party convention (1888, Republican Convention).
- Feb. 14** Valentine’s Day: Americans spend over \$750 million on Valentine’s gifts for their pets.
- Feb. 20** Presidents’ Day: George Washington is recognized as America’s first mule breeder.
- Feb. 22** Ash Wednesday: The ashes are traditionally derived from the previous year’s Palm Sunday branches.



MLS Laser: Healing & Repairing

We are now offering MLS Laser Therapy in our New Berlin office, located at 3333 South Sunny Slope Road, Suite 102 in New Berlin.

MLS Laser Therapy is a type of regenerative medicine that promotes soft tissue healing and repair. Approved by the FDA, this treatment option generates an anti-inflammatory effect within the body, which can significantly reduce pain, inflammation, and swelling.

MLS Laser Therapy is ideal for treating a variety of foot and ankle conditions and injuries, including the following: Chronic heel or ankle pain, Sports injuries, Post-surgery, and Neuropathy!

If MLS Laser Therapy is right for you, you can expect painless and brief treatment sessions. During each session, which will last approximately 20 minutes, our trained medical staff will position the laser above the affected areas. You will be asked to sit back and relax while the laser delivers its highly therapeutic wavelengths into your skin. Again, MLS Laser Therapy is light-based and completely non-invasive. You can resume your normal activities following each treatment session, and expect long lasting results.

Please give us a call at 262-821-1588 or visit www.thirdcoastfoot.com for more information.



Linguine with Shrimp Scampi

Yield: 3 servings; Prep time: 10 min.; Cook time: 15 min.;
Total time: 25 min.

This recipe, courtesy of Ina Garten (Barefoot Contessa Family Style) and www.foodnetwork.com, is simple, tasty, and comforting. Perfect for Valentine's Day!

Ingredients

- Vegetable oil
- 1 tablespoon kosher salt (step 1 of directions) plus 1½ teaspoons (step 2)
- ¾ lb. linguine
- 3 tablespoons unsalted butter
- 2½ tablespoons good olive oil
- 1½ tablespoons minced garlic (4 cloves)
- 1 lb. large shrimp (about 16 shrimp), peeled and deveined
- ¼ teaspoon freshly ground black pepper
- ⅓ cup chopped fresh parsley leaves
- ½ lemon, zest grated
- ¼ cup freshly squeezed lemon juice (2 lemons)
- ¼ lemon, thinly sliced in half-rounds
- ⅛ teaspoon hot red pepper flakes

Directions

1. Drizzle some oil in a large pot of boiling salted water, add 1 tablespoon of salt and the linguine, and cook for 7 to 10 minutes, or according to the directions on the package.
2. Meanwhile, in another large (12-inch), heavy-bottomed pan, melt the butter and the olive oil over medium-low heat. Add the garlic. Sauté for 1 minute. Be careful, the garlic burns easily! Add the shrimp, 1½ teaspoons of salt, and the pepper, and sauté until the shrimp have just turned pink, about 5 minutes, stirring often. Remove from the heat, add the parsley, lemon zest, lemon juice, lemon slices, and red pepper flakes. Toss to combine.
3. When the pasta is done, drain the cooked linguine and then put it back in the pot. Immediately add the shrimp and sauce, toss well, and serve.



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Takin' It Outdoors ... Healthfully

Spring is just around the corner. Many who shifted their exercise routines indoors to beat the winter chill will soon be heading outdoors again. But consider the following to keep your feet and ankles healthy.

Despite the indoor workouts, our overall activity levels are typically lower during the winter. Many people overrate their fitness level when they return to outdoor workouts. Whether it's running, hiking, bicycling, etc., many go too hard out of the gate, their bodies can't keep up, and injuries occur.

Try transitioning to the outdoors gradually. If you've been doing three miles on the treadmill over the winter, try a two-mile outdoor run to start. If you had been doing four treadmill workouts per week, do three treadmill and one outdoor the first week, two and two the second week, and so on.

Spring still has chilly days, and properly warming up outdoors sometimes gets short shrift, which can cause problems — cold temperatures can pressure people to get moving ... before they're ready. However, stretching before exercise should not be intense — gentle and easy. A brisk walk before a run or bike-riding venture can get the juices flowing. Save the more intense stretching for the post-workout cool-down.

Many studies indicate that exercise injuries peak in the spring. One from 2018 found that Achilles tendon ruptures spiked in the spring and were at their lowest in the fall. Stress fractures shoot up in the spring, too.

If you hit a few bumps in the road with the shift to outdoor workouts, contact our office to schedule a thorough evaluation, proper diagnosis, and effective treatment.

