ASK THE EXPERT



ABOUT THE EXPERT

Dr. Straus is a board-certified orthopaedic surgeon. He completed his foot and ankle/ sports fellowship at the Foundation for Orthopaedic, Athletic, and Reconstructive Research with Dr. Thomas O. Clanton in Houston, Dr. Straus continues to pursue the latest advancements in orthopaedic technology, including ankle replacement and ligament reconstruction. Dr. Straus has been involved in the care of professional athletes with the Houston Rockets and Dallas Mavericks. He is fluent in Spanish and is a member of the American Academy of Orthopaedic Surgeons and the American Orthopaedic Foot and Ankle Society.

ANKLE EXPERT

Brian Straus, M.D. Pine Creek Medical Center

This winter has been dragging. I'm bored with the treadmill and cannot wait to get back out and smell the fresh air! Any tips for making the transition from treadmill to the open road?

One problem is that your lower body is less active on the treadmill than it is running outside, as the belt on the treadmill pulls you along, leading to some muscle and joint stiffness. Loosen up with a foam roller on your glutes, hamstrings, and calves. Before and after you run, roll your muscles on the foam and hold any tender spots until you feel them begin to release.

As I increase mileage on my runs, I have developed pain on the outside of my ankle which progresses as the day goes on. Is there anything I can do?

Is it painful to press directly on the bone of the foot or ankle? If so, this may be a stress fracture. They can occur on either the medial (big toe) or lateral (little toe) side of the ankle, or even on top of the foot. You should stop high-impact exercise immediately and see your orthopaedic surgeon for an X-ray.

A fracture? I didn't even have any type of injury or fall!

A stress fracture is an overuse injury, not a sudden injury. In general, this happens when muscles become fatigued and are unable to absorb added shock. The fatigued muscle can then transfer the overload of stress to the bone causing a tiny crack called a stress fracture.

My X-ray came back normal, but my orthopaedic surgeon is worried about a stress fracture and recommended that I stop running. Is this true?

I agree with him. Stress fractures can be clinically diagnosed by point tenderness on the bone well before they show up on an X-ray.

I was just starting to get in shape, and now is it true that I have to lie on the sofa for two months?

This is a misconception with stress fractures. If cleared by your doctor, it can be safe to perform relative rest, which means simply keeping your activity level under the threshold of pain. How long you will be sidelined depends on the bone involved.

Sounds scary. What can I do to prevent a stress fracture?

Most stress fractures are due to training errors, such as increasing mileage or activity faster than the body can repair itself, the impact of an unfamiliar playing surface, or the use of improper equipment. Other stress fractures may be due to alignment problems or an underlying issue with nutrition, sleep, or one's metabolism. In any patient, it is important to not only heal the current fracture, but to determine the root cause.

My doctor thinks the main cause is my new barefoot running shoes. Are these bad news?

Not necessarily. Many runners are able to get away with minimalistic shoes, but I do worry about increased stress fracture risk when combined with certain foot types and running habits. The minimalist craze is still going strong, but the pendulum is shifting toward a happy medium of shoes that offer a little more cushion and stability while still lightweight to maintain speed.

What's the bottom line? Quit running and swim laps instead?

You don't have to go to extremes; just listen to your body. If a localized pain is worsening with activity and not relieved by the usual tincture of time and TLC, get a diagnosis and be safe.



Dr. Straus earned his doctorate in medicine at the University of Texas Southwestern Medical School in Dallas and completed his Orthopaedic Surgery Residency at the Medical University of South Carolina. Dr. Straus obtained further sub-specialization in lower extremity surgery at the prestigious Foundation of Orthopaedic Athletic and Reconstructive Research in Houston, TX under director Dr. Thomas O. Clanton. Dr. Straus is fellowship-trained in all aspects of foot and ankle surgery including minimally invasive techniques, sports injuries, and reconstructive surgery. A member of many national medical organizations, Dr. Straus has been involved in the care of professional sports teams such as the Houston Rockets and Dallas Mavericks.

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