



News and Updates

One unfortunate step onto a shard of wood, metal, plastic, or glass may result in a foot splinter. This time of year, Christmas tree pine needles and bits of broken ornaments join the usual list of splinter suspects.

Splinters need to be dealt with promptly to avoid infection and pain that will only intensify if ignored. Bacteria on the splinter material is the chief culprit for infection. Also, when splinter removal is delayed, the greater the chance the splinter burrows deeper and becomes trickier to remove.

Many shallow splinters can be removed at home. If doing so, the following steps are advised:

- First, clean your hands with warm, soapy water; then do the same at the area where the splinter is lodged.
- Disinfect a needle and/or tweezers with rubbing alcohol, iodine, or boiling water, then allow them to dry and cool.
- If the splinter is already partially exposed, use the tweezers to gently pull it out. Otherwise, soak your foot in warm water for 10 minutes to soften the skin.
- To begin extraction, squeeze the skin on both sides of the splinter.
 The pressure alone may force out the splinter, or the splinter may partially emerge to be tweezered.
- If the squeeze/pinch doesn't coax the splinter at least partway out, the needle can be gently slid beneath the splinter to push it to the surface. Then tweezer it.
- After the splinter is removed, wash the exit point with soap and water, then apply antibiotic ointment.

Caution: If you have diabetic peripheral neuropathy or circulatory issues, **never** attempt to remove an embedded splinter at home. "Digging" for a splinter may cause a wound that worsens (possibly undetected) and leads to an ulcer and infection. Promptly schedule an appointment at our office for safe, immediate relief.



About the Doctor

Matt Wettstein, DPM

Advanced Foot and Ankle is led by Dr. Matt Wettstein. Originally from Logan, UT, Dr. Wettstein completed his undergraduate studies at Utah State University before attending Des Moines University in the College of Podiatric Medicine and Surgery. After graduating with top honors, he then completed his residency in Salt Lake City, UT. Dr. Wettstein is married and has four, wonderful, children.

Get Social w/Us





Toenail Fungus: Plan Ahead!

Toenail fungus (onychomycosis) is a frustrating, embarrassing problem that approximately 10%–15% of Americans deal with; older adults, 50%.

Fungi thrive in warm, moist locations and can be spread easily at places such as nail salons, gyms, pools, and public showers. The insides of shoes and boots can be quite accommodating as well.

In addition, minor trauma and irritations of a toenail can create tiny openings that enable opportunistic fungi to gain a foothold. Older people's toenails are drier and more brittle, which increases their vulnerability. Fungus-affected nails may become brittle, thickened, warped, or discolored and might emit a foul odor.

Winter is the best time to attack fungal nails if you want to confidently display your feet this summer. Treatments aren't a once-and-done, everything-is-immediately-rosy deal. They can take anywhere from several weeks to several months. And, although the fungus may have been defeated, the destruction to the nail will remain until the nail grows out, which can be six months or more.

Fungal toenails require podiatric care. Hiding nails under polish won't make the problem go away. Over-the-counter remedies are often useless. An advanced infection can cause the nail to separate from the nail bed, prompting irritation, pain, and potential removal.

Treatments for fungal toenails include prescription topical ointments or polishes, oral medications, antifungal foot soaks, and laser therapy. Laser therapy is the most effective treatment. It typically requires two to four painless treatment sessions spanning two months, with each session taking 30 minutes or less per foot.

If you are dealing with fungal toenails, the time to act is now. Schedule an appointment with our office and start dreaming about summer.

Mark Your Calendars

- **Dec. 7** Pearl Harbor Remembrance Day: 1,606 of the 2,026 sailors and marines who perished were aboard either the *Arizona* or *Oklahoma*.
- **Dec. 7** Letter Writing Day: George H. W. Bush mangled a verbal expression or two but was known as a prolific and elegant letter writer.
- **Dec. 13** Violin Day: A violin and a fiddle are the same thing. Just ask Sarah Chang or Alison Krauss.
- **Dec. 21** Winter solstice: Meteorologists use meteorological seasons. In their world, winter begins on Dec. 1.
- **Dec. 25** Christmas: Thank Coca-Cola for making Santa plump, jolly, and adorned in red (matched their logo).
- **Dec. 25** Hanukkah (sunset): The fifth time since 1900 that Hanukkah has begun on Christmas evening.
- **Dec. 31** New Year's Eve Day: It's not the last day of the year ... it's the first day of the rest of your life!

Wintertime Brings Out Ingrown Toenails

If you've ever had an ingrown toenail, you already know how annoying they can be. Those who dillydally on treatment are asking for trouble, such as escalating pain, tenderness, redness, swelling, and possibly infection — always serious but especially so for diabetics.

The following elevate your risk of an ingrown toenail:

- Neglecting to trim your nails straight across (no rounding!).
- Trimming your nails too short.
- Suffering an injury (e.g., direct trauma) or engaging in sports that pound on the feet.
- Wearing shoes that cram your toes.
- Being overweight.

Wintertime increases the odds of ingrown nails because people are more frequently wearing boots, heavier shoes, and thicker socks, which can compress the toes and interfere with how nails grow out. Shoes with a small toe box and socks that are too tight double the trouble. (As for bulky socks, there are plenty of synthetic and synthetic-natural fibers that are thinner, warm, and effectively wick moisture.)

In addition, feet aren't on display like they might be during warmer weather, so people sometimes get a little lax with foot and nail grooming, paving the way for ingrown nails. In addition to proper nail trimming, wash your feet daily, and dry them thoroughly.

If you are suffering with an ingrown nail, give our office a call. Oftentimes we can gently lift the nail, then place cotton or a splint under the nail to keep it raised so it grows above the skin edge. Removing the section of nail that's digging into the skin is another option, or we might recommend a full nail and tissue removal in some circumstances (e.g., chronic cases). A prescription antibiotic — oral or topical — may be part of the treatment, too.



Herb Roasted Pork Tenderloin with Preserves

Servings: 12; prep time: 5 min.; cook time: 15 min.; total time: 20 min.

This is a ridiculously simple dish that looks like you spent way more time on it than you did!

It's a great addition to the holiday menu.

Ingredients

- 2 whole pork tenderloins
- Salt and pepper, to taste
- 8 tbsp. Herbes de Provence, or more if needed
- 1 c. preserves (fig, peach, plum)
- 1 c. water
- 1 tbsp. vinegar
- Mashed potatoes or grits, for serving

Directions

- 1. Preheat oven to 425°F. Season pork tenderloins liberally with salt and pepper, then with Herbs de Provence, pressing to get the herbs to adhere to the pork.
- Place the pork on a rack or in a large skillet, and roast in the oven for 12 to 15 minutes (or until no longer pink). Remove from the oven and let it rest for 10 minutes.
- 3. While the pork is resting, combine preserves, water, and vinegar in a small pan, and bring to a simmer.
- 4. Slice pork into thick pieces, then spoon the sauce/glaze over the slices. Serve with mashed potatoes, grits ... anything you'd like!

Recipe courtesy of www.thepioneerwoman.com.



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The Christmas Tree Blues



See page one.

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Inching Up to the Holidays

With the holiday season upon us, many women gear up for festive social occasions with high heels. High heels add a touch of visual elegance, style, and height(!) to any event, but they also contribute a heap of uncertainty to foot and ankle health.

For those who wear high heels only for special occasions for just a few hours, good for you. High heels should not be worn regularly or for long stretches of time. For starters, high heels force most of the wearer's body weight onto the balls of the feet, potentially resulting in a Morton's neuroma, with discomfort fanning out to the toes. The shift in weight distribution leads to instability, an unsteady gait, and possible falls, ankle sprains, etc. — so much for elegance.

Habitual wearers may experience a shortened Achilles tendon and calf muscles. Taking normal, longer strides becomes a challenge, and tendonitis may introduce itself. There's nothing festive about discomfort with every step.

Narrow, pointed high heels scrunch the toes into the toe box, making conditions ripe for hammertoes, blisters, and calluses. A frequent wearer already predisposed to developing a bunion will find that process greatly accelerated too.

High heels can subject the plantar fascia to excessive pressure as well. Anyone who has dealt with plantar fasciitis generally won't recommend putting it on one's bucket list.

Keep in mind that no part of the body is an island unto itself. High-heel issues affecting the feet and ankles can extend their misery to the knees and lower back.

Enjoy everything the holiday season has to offer but be mindful of your feet and ankles. If you experience persistent discomfort, contact our office for a thorough evaluation, proper diagnosis, and effective treatment.

