

Foot Clinic

CONDITIONS TREATED

- Achilles Tendonitis • Arch Pain / Arch Strain • Athlete's Foot • Bunions (Bunionettes)
- Callouses / Corns • Claw Hammer Mallet Toes • The Diabetic Foot • Heel Pain • Heel Spurs
- Ingrown Toenail • Knee Pain • Metatarsalgia • Morton's Neuroma • Morton's Toe • Neuropathy
- Overlapping Toes • Over Pronation (Flat Feet) • Plantar Fasciitis • Post-tib Tendonitis
- Sports Injuries • Shin Splints • Verrucae

SERVICES INCLUDE

- Gait Analysis • FootScan • Orthoses

Shin Splints

Shin splints is a term used by many to describe a range of conditions affecting the front of the leg. Sometimes it may also affect the back of the leg when the posterior or lateral muscles are involved. There are essentially three types of condition that may affect the leg as follows;

Compartment syndrome - this is pain within the muscles at the front (anterior tibial), outer side (peroneal) or back (posterior tibial) of the leg. The pain is aggravated by activity and relieved by rest. It is normally described as a cramp in the muscle or a feeling of tiredness in the muscle. In fact that is exactly the case. The muscle gets tired due to overuse, becomes inflamed and painful. As it sits within a compartment it is unable to swell - this leads to an increase in pressure within the compartment and therefore pain. Continued activity leads to further damage and more pain. Runners are often affected by this and the primary cause is poor foot mechanics resulting from pronation - muscles have to work harder to stabilise the foot and therefore get tired. Other causes may be poor footwear, muscle damage or a trapped nerve syndrome in the lower back causing increased activity of muscle in the area.

Stress fracture of the tibia (shin bone) - here the pain is present within the shaft of the bone and an xray or bone scan may confirm diagnosis.

Tibial stress syndrome or periostitis - inflammation of the lining (periosteum) covering the tibia (leg bone). This may be due to stress resulting from abnormal muscle pull which itself may be the result of poor foot mechanics.

Treatment usually involves a detailed examination to identify the true cause of the pain. This may be followed by taping/strapping to provide stability or prescribing foot orthoses to control poor foot mechanics. A change in lifestyle, activity levels or training regime is also indicated. In severe or unresponsive cases surgery may be indicated

