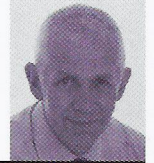


MR TREVOR PRIOR is a consultant podiatric surgeon, who has worked with a wide range of international sports people. He is the Director of Premier Podiatry, where he offers a comprehensive service for diagnosing and treating foot problems and injuries



ON YOUR TOES

Trevor Prior qualified in London in 1983, and completed his podiatric surgery training in Northampton. He is currently a consultant podiatric surgeon at Homerton University Hospital, London; and Director of Premier Podiatry in London and Essex.

Trevor is also a past Dean of the Faculty of Podiatric Surgery at the Society of Chiropodists and Podiatrists. He has lectured internationally and worked with a wide range of professional and international sports men and women.

THE FOOT: A COMPLEX STRUCTURE

The foot is one of the most complicated structures in the body, comprising of 26 bones, 100 ligaments and 250,000 sweat glands. The average person will take 6,000 steps a day, and running increases the force through the foot to two or three times the person's body weight. It's not surprising that 75-80 per cent of adults experience some form of foot problem.

Diagnosing a foot problem can be complicated, but it's essential if a sports person is to return to activity. At Premier Podiatry, this is done with the help of slow motion video analysis and insoles with special force sensors, which record the load under the foot to diagnose gait abnormalities. The majority of problems can be managed with appropriate shoes, exercises and shoe inserts (orthoses), which help to modify foot and leg function.

When necessary, injections or shockwave therapy can help symptoms, while surgery can be helpful for more resistant or severe problems. With newer techniques and equipment, outcomes are much more predictable than they once were, and many surgical procedures can be performed under local anaesthetic.

HELPING TOP SPORTS PLAYERS

Matt McCullough, former Ulster and Ireland second row forward, visited Trevor when he had a foot injury that wasn't settling. Matt had damaged one of the small bones under his big toe joint, called a sesamoid. Although his injury had been helped by rest, orthoses and an injection, it had not fully resolved.

'Scans showed I'd broken my sesamoid into several small bits, which was stopping

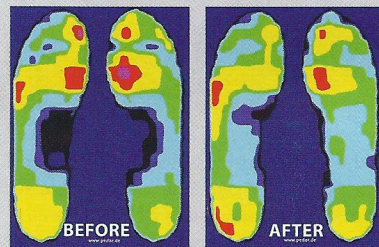


Matt McCullough, former Ulster and Ireland second row forward

MATT MCCULLOUGH IMAGE © JOHN DICKSON - www.dicksondigital.com

PODIATRY - FOOT & ANKLE, GAIT ANALYSIS

BENEFITS OF ORTHOSES



Force beneath big toe joint before (left) and after (right) orthoses, with high force visible beneath right big toe joint.

me from training and playing,' says Matt.

The first stage of Matt's treatment involved using force-sensing insoles to help modify his orthoses to optimise function and reduce force under the injured bone. When a second injection failed to relieve the symptoms sufficiently, Matt had surgery to remove the damaged pieces of bone and repair the tendon, in order to reduce the possibility of further joint problems.

'The explanations and attention to detail during my treatment were very thorough,' says Matt. 'By the time I had the operation, I was confident everything that could have been done to avoid an operation had been tried. My surgery healed without problems, and helped to extend my rugby career by two to three years.'

Trevor adds: 'Matt's case is a good example of a well-structured management plan that used a range of technologies to aid diagnosis and direct treatment.'

FOR MORE INFORMATION

For a private appointment with Mr Prior at the following clinics, call:

London W16: 020 8502 1777
Holly House Hospital, Buckhurst Hill, Essex: 020 8505 3311
Spire Roding Hospital, Redbridge, Essex: 020 8551 1100

For further information visit www.premierpodiatry.com or email info@premierpodiatry.com