

Spring, 2007

Volume 2, Issue 1



# Arizona Orthopedic & Fracture Surgeons Spring Newsletter

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## *Knee Pain? Evaluate the Hip Part 2* *by Dr Craig Metzger*

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There are many situations in which a child or adult will present to a health care provider with a complaint of knee pain or have a limp with a slightly flexed knee. The knee and surrounding area needs to be evaluated, but, in addition, the hip and proximal femur needs to be examined and at least screened to rule out any pathologic condition of the hip that may be causing referred pain to the knee.

To evaluate the limp and lower extremity pain, the history should include onset, progression, associated symptoms and signs (fever, rash, redness, pain, swelling, numbness, lethargy, nausea, etc), prodromal

signs and symptoms (cold, flu, skin lesions, exposures, repetitive micro-trauma), and family and developmental history.

Knee pain complaints need to include a thorough hip examination comparing ranges of motion and the position of comfort. Pathologic hip conditions presenting as knee pain can include the following:

Infection, such as osteomyelitis or septic arthritis, may not initially have fever nor elevated white cell count. A sedimentation rate and C-reactive protein should be included in the initial blood sampling along with blood cultures and urine evaluations. An



**DR METZGER**

ultrasound of both hips is needed if the initial hip/pelvis X-rays are normal appearing. Unless the patient is toxic or systemically ill, cultures should be obtained before starting antibiotics.

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**DR CHESLER**

## *Plantar Fasciitis and Heel Pain* *by Dr Sanford M. Chesler*

Throughout my ten years of practice in Arizona, plantar fasciitis (PF) or heel pain is the most common foot condition I treat. While treating military patients at Luke Air Force Base, I first thought PF was caused by this unique environ-

ment. As I developed my civilian practice, I realized the prevalence of plantar fasciitis between the groups was equal.

The initial symptoms of PF are morning or after-rest stiffness, pin-point or radiating heel pain, and arch pain. Driving or climbing steps can cause

similar sharp or burning heel and arch pain. The pain is reduced with stretching or walking but increases with moderate or high impact activities. The pain is progressive and can become chronic.

(continued page 2)



**NORMAL KNEE**

## *Knee pain? Evaluate the Hip -part 2 (cont) ►*

Juvenile chronic arthritis (JRA) can be difficult to diagnose if it involves only the hip joint at first. A septic work-up still needs to be done to rule out a suppurative process. Even adults and children who have known systemic arthritis have to have infection ruled out.

Transient synovitis of the hip is a self limiting inflammatory process that may be an immune response or viral

caused. It mimics septic arthritis and is a diagnosis of exclusion after several other causes of hip pain are eliminated.

Legg-Perthes Disease is a repetitive interruption of the blood supply to the femoral head occurring in young to middle-age children. Initial X-ray findings may be negative and repeat exams are needed to evaluate the head involvement and to choose the treatment needed for a particular age.

Slipped capital femoral epiphysis (SCFE) usually occurs around puberty and can be acute, sub-acute or even chronic. Too often, the knee pain complaints of these pre-pubescent boys are ignored or attributed to some other cause such as a presumed “sprain”. Comparing the range of motion and a sign of hip irritability can pick this up.

Neoplasm such as osteoid osteoma may be difficult to see on standard X-ray projections.

**This summer Arizona Orthopedic and Fracture Surgeons will open a multi-specialty clinic in Glendale**

## *AOFS Opens a Glendale Multi-specialty Clinic*

This summer Arizona Orthopedic & Fracture Surgeons will open a multi-specialty clinic in Glendale. The office will provide state-of-the-art orthopedic and podiatric medical and surgical care.

Electronic medical record, diagnostic imaging, and electronic appointment and billing

services insures our patients may be seen in the Glendale and Phoenix locations without loss of continuity of care.

The podiatric medicine department provides diabetic foot care, including footwear, wound care, minor office surgical procedures, sports medicine, biomechanics of gait, and

conservative and surgical care of foot and ankle deformities.

The orthopedic department specializes in sports medicine, joint replacement, fracture care, and general orthopedics.

The Glendale office is staffed with two orthopedists and a podiatrist. Our Nurse



## *Plantar Fasciitis and Heel Pain—continued ►*

The soreness can progress to a cold shooting pain within the arch. Patients often feel a movable lump or swelling underneath the heel or in the arch. Some patients feel a radiating burning pain from their heel towards the inside of the arch.

Patients commonly try gel heel

and arch pads, OTC pain medications, change of activity level and alter their gait pattern to off-load the heel. This can cause compensatory pain affecting their legs, hips and low back.

Although these treatments help some patients, most re-

quired a physician’s care. Primary care providers (PCP) usually initiate stretching, ice NSAIDs, and shoe therapies. In severe cases, injections of corticosteroids are used. When these treatments failed, the PCP may refer the patient to podiatrists or orthopedists for more invasive or surgical care.

## *Knee pain? Evaluate the Hip -part 2*

A careful history may raise suspicion in order to obtain special radiographic views to evaluate for subtle bone changes caused by eosinophilic granuloma, leukemia, Ewing's sarcoma, etc. Bone cysts of the proximal femur are usually readily apparent on X-ray by the time they become symptomatic.

The X-rays in acute sickle cell crisis will be normal, but the change from bone infarcts

from sickle cell disease can sometimes be seen. Individuals with pain or limp from sickle cell anemia need septic work-up because of their susceptibility to osteomyelitis.

These are just some of the conditions a health care provider need to be suspicious of when evaluating the hip in a patient with "knee pain".



*NORMAL HIP*

## *AOFS Opens a Glendale Multi-specialty Clinic*

Practitioner and Physician Assistant supplement our patient care

Consultations to North Valley hospitals will be easier as our on-call orthopedist and podiatrist are conveniently accessible. North Valley patients' follow-up visits likewise will be more convenient.

The office is located northeast off the Loop 101 and 51st Avenue exit. The address is 20325 North 51st Avenue, Bldg 4, Suite 124, Phoenix, Arizona 85308. You can contact our appointment's department at (602) 230-1400. Our fax number is (602) 230-7676.

We look forward to assisting

your patient in their orthopedic and podiatric medical and surgical care. We thank you in advance for your confidence in our service.

The office will open in September, 2007.

**Consultations to North Valley hospitals will be easier as our on-call orthopedist and podiatrist are conveniently assessable**

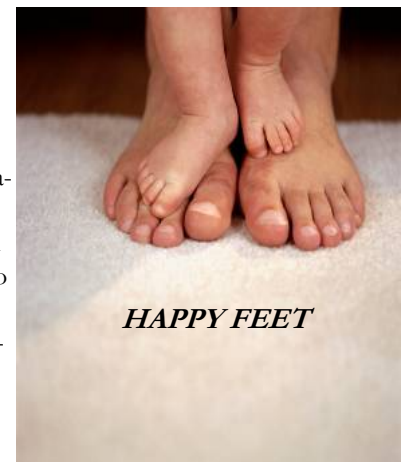
## *Plantar Fasciitis and Heel Pain*

Plantar fasciitis occurs due to foot and ankle instability. This causes a torque and sprain of the linear-banded plantar fascia starting an inflammatory process of both fascia and bone. The resultant periostitis at the fascial insertion combined with repetitive micro-trauma from standing or walking on hard

surfaces can cause new bone formation called a heel spur.

Although the inflammation can be treated with NSAIDs corticosteroids, physical therapy and exercise, the underlying foot and ankle instability must be addressed to prevent chronicity. OTC arch supports,

or if that fails, custom foot orthosis address this instability. The orthosis must take into account heel pitch, fascial bands prominence, forefoot-to-rear foot relationship, joint mobility and limb length. Surgery is a last option as 90% of my patients do well with conservative care.



*HAPPY FEET*

## *AOFS Professional Staff*

Arizona Orthopedic & Fracture Surgeons has been treating patients in the Phoenix area for 18 years. Our professional staff consists of 5 orthopedists, 1 podiatrist, 1 physician assistant and 1 nurse practitioner.

Dr Charles Creasman is board certified in orthopedic surgery. He is fellowship trained in joint replacement. He has special interest in joint replacement, trauma and sports medicine.

Dr Craig Metzger is board certified in orthopedic surgery. He has special interest in pediatric orthopedics, sports medicine, joint replacement and trauma.

Dr Steven Kassman is board certified in orthopedic surgery. He is a Fellow of the American College of Surgeons. He has special interest in arthroscopy, trauma, and joint replacement.

Dr Michael Hayman is board certified in orthopedics. He is fellowship trained in sports medicine. He has special interest in arthroscopic reconstruction of

the shoulder and knee, joint replacement and general orthopedics.

Dr C. Sabin Cranford is board eligible in orthopedic surgery. He is fellowship trained in sports medicine. He has special interest in sports medicine, general orthopedics, and joint replacement. He will join our group in September.

Dr Sanford M. Chesler is board certified in foot and ankle surgery and in podiatric orthopedics. He has special interest in including sports medicine, lower extremity pediatrics and gait, wound care, and diabetic conditions of the foot.

Ms Lillian Berry is a Certified Physician Assistant and holds certification in surgical extended core. She has special interest in osteoporosis and general orthopedics. She manages our research programs.

Ms Daria Pacheco is a surgical nurse practitioner who assists the orthopedists in surgery and does hospital rounds.

## *New Wound Care Services*

Dr Sanford M. Chesler is now on staff at Arizona Heart Institute's Wound Healing Service. National Healing Corporation (NHC) runs the wound care service. NHC provides the highest quality wound therapy and related management services using state-of-the-art clinical techniques. The service at Arizona Heart Institute Wound Healing Service provides a multi-specialty professional staff including podiatric, vascular and plastic surgeons. In-house hyperbaric oxygen chambers are available for patients whose wounds are resistant to normal healing due to peripheral vascular insufficiency.

Dr Chesler provides comprehensive wound care for lower leg and foot ulceration due to diabetes, injury, post surgical, vascular insufficiencies and lymphedema. He is also on staff at Chandler Regional Hospital Wound Care Service. Referral to Dr Chesler for wound care can be directed to the Arizona Heart Institute Wound Healing Service at (602) 532-1700. Referral for Chandler Regional Hospital can be directly called in at (480) 728-3701.

**ARIZONA ORTHOPEDIC &  
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TO: