

H, IF I ONLY KNEW THEN WHAT I KNOW NOW! DURING MY FIRST PREGNANCY I WAS A TEACHER. I TAUGHT PRESCHOOL AND MIDDLE SCHOOL ELECTIVES: YOGA, GIRL'S PHYSICAL EDUCATION AND NUTRITION. I UNDERSTOOD A BIT OF BIOMECHANICS BUT NOT AS MUCH AS I DID WHEN I BECAME A PEDORTHIST IN 2009. HAD I KNOWN OF THE TOOLS I COULD HAVE USED FOR MY LOWER EXTREMITY I MIGHT HAVE BEEN MORE COMFORTABLE. THIS TIME AROUND I HAVE THE KNOWLEDGE AND EXPERIENCE ON MY SIDE AS WELL AS AN IN HOUSE PODIATRIST WITH AMPLE ADVICE TO GIVE, MY HUSBAND, DR. JOHN MINA DPM, OF SW FLORIDA ANKLE & FOOT CARE SPECIALISTS.

During pregnancy a woman's body including her feet and legs go through many changes, some gradual and some seem to transform overnight. As a practitioner you may have an expectant patient walk in your pedorthic practice or retail facility and ask for your help. What do you do?

First, you must recognize the changes of a pregnant woman's body, or at least in our scope of practice; the gastroc soleus and downward. Understand that by the 2nd and 3rd trimester she has likely put on 20lbs or more. More often than not, the mother-to-be has more pressure on feet, especially her mid-foot due to weight gain. With this, her arch strength and height have been compromised.

This can become very uncomfortable with prolonged standing. As her feet change shape, sometimes temporarily and sometimes more permanently, her shoe size and width will also change. Her body has increased blood flow, which can add pressure to tissue and often cause swelling and occasional numbness. Realize that her joints and ligaments experience greater laxity during the 3rd trimester due to a hormonal release. All of these changes cause the feet to become less stable and more flexible, as well as add to the loading factor, decreasing shock absorption. From her spine, to hips and feet, bones often spread with this miraculous transformation.

So, when your pregnant client comes in to see her favorite pedorthist, what important assessments will you be making? What tools of the trade will you equip her with to keep her on her feet? Making observations like, is she experiencing swelling occurring in her lower extremities, is important in your evaluation. Does she have pain in her feet? Has she consulted a Podiatrist? Has she been diagnosed with a foot pathology?

As reported by Orthotist and Pedorthist, Ted Rolling, of Innovative Prosthetics & Orthotics of Omaha, pregnancy seems to trigger the onset of conditions like "Post Tib Tendonitis, Achilles Tendonitis, Plantar Fasciitis, Corns, Plantar Calluses and MTP Synovitis." Find out how many hours a day does she spend standing? How active is she during the course of a day? Remember that, all activities take a toll on her feet.

Let's not forget the fact that her balance will be thrown off as her belly grows. Her center of gravity is displaced and her equilibrium will surely be compromised. Stable shoes to ground her are a must! Not to mention what's inside her shoes. Was she wearing orthotics prior to pregnancy? What type of material was used?

Are her original inserts causing stress and pain now that her feet have changed? Very possible! At this point, I would encourage her to wear soft but supportive accommodative orthotics along with compression hosiery, combined with an extra depth shoe including an extra firm counter. As pedorthist, Rick Snyderman of New Balance, Fort Myers, Florida says to his pregnant clients, "Do NOT skimp on footwear! This is the time to take good care of your feet and get into a pair of athletic shoes that fit correctly."

A huge player in keeping the swelling down with mama's legs and feet would be fitting her for compression stockings. From knee high to thigh highs, you can provide her relief instantly with light gradient compression. Or go for the gold with the full length hosiery that goes over the stomach. A favorite of mine is "Preggers" by Therafirm. (Of which, I order through Miami Leather.) This gives your client support from tummy to toes. They also come in great colors so you achieve style along with comfort. Ladies love that! Remind her too, that she should be slipping them on first thing in the morning to prevent excessive swelling.

Personally speaking, as a pedorthist and now pregnant with my second child I have noticed some of these differences in my feet as I step into my 3rd trimester. In my experience, and prior to my pedorthic education, I did what many women do; threw on some roomy Crocs, as that was all I thought I could fit my swollen feet into. I know now, that was an unsupportive and unforgiving choice.

What was really an unexpected shock to me then, was that post-delivery my feet became even more swollen appearing as though I had been bitten by venomous snakes. In hindsight, I really should have been using compression hosiery and wearing the proper footwear. This time around, I am prepared for all the fun changes. I have put aside my sandals and dress shoes. I'm wearing compression hosiery. I have stashed my rigid orthotics and have slipped into my accommodative orthos along with my wider more roomy athletic shoes.

My logic is simple, I have to do what's best for my feet. It is very probable they will look and feel different after I give birth. Paying attention to those differences and adapting my footwear accordingly will make all the difference in the world.

For you the practitioner, remember that you play an important role as part of your patient's health care team. Along with her doctor, you can provide her with the tools to keep mom on her feet, before and after the baby arrives!