PROBLEM FEET?

NEW TREATMENT FOR HYPER PRONATION (FLAT FOOT)

This minimally invasive procedure uses a small "stent" to straighten out the foot by controlling abnormal movement within the foot. This five minute procedure which is performed as a brief out-patient procedure has been extremely successful in eliminating the need for arch supports/orthotics in shoes.

PROBLEMS WITH ORTHOTICS

The problem with orthotics and arch supports is that they are ineffective in preventing the excessive rear foot motion that is responsible for the majority of foot deformity. They are usually very expensive and are not covered by insurance companies. They need to be replaced on a regular basis as their life-span is limited. In many cases patients are offered cheaper non-custom devices which may be even less well fitted. People who wear orthotics often find they can only wear them in a limited range of shoes and so a compromise of either what

"Hyprocure treating the cause not the symptoms"

shoes can be worn or how often the devices can be worn is made. Even if the orthoses could be proven to properly control excessive foot movement they would only work when being worn. So walking barefoot or wearing shoes or sandals not suitable for orthoses means no benefit. With the Hyprocure device excessive movement is controlled within the foot and there are no restrictions of footwear.

CORRECTING THE PROBLEM

This revolutionary procedure has been compared to LASIK eye surgery eliminating the need for glasses. Unlike LASIK most insurance plans cover the costs of the "Hyprocure" procedure. The stent should remain in place forever and should never need to be replaced. This procedure has been successfully performed in patients from age three to ninety years old.

The stent itself is made from medical grade titanium. It does not set off metal detectors at the airport and once inserted you should not be able to feel the device. Patients who have this operation are typically back into shoes within a few days and may participate in regular sporting activities within four to six weeks. A number of patients who have had this operation have been able to run marathons after this procedure. Realigning the foot improves the efficiency of the muscles of the leg and can reduce muscle fatigue, join pain and soft tissue injury.

In the unlikely event there was a problem with the stent the good news is that it can be removed. Overall the removal rate of the stent in patients is less than 3%. Compare this to

other treatments for hyper-pronation in which joints are fused and tendons moved. These operations cannot be undone and require major surgery and long periods of recovery.

The foot is the interface between your body and the ground. It is uniquely designed to allow the human body to adapt to different terrain, absorb shock and withstand the forces as we walk and run.

"Hyprocure controls excessive foot movement even when barefoot with no compromise on footwear choice"

Hyperpronation is a common problem leading to progressive mail-alignment of the feet. Hyperpronation is known to be responsible for a wide range of pains within the foot and further up the body. Knee pain, shin splints, tendon problems for example can all be related to hyperpronated feet.

The specialist at the Foot and Ankle Centre feel it is more sensible to try and address the cause of these problems rather than simply treat the symptoms. Where hyperpronation is considered to be the underlying cause addressing the problem with a simple and effective procedure seems to be a sensible choice before major surgery is considered.

WHO SHOULD CONSIDER HYPROCURE?

Hyprocure is not suitable for all patients and you will require a thorough and detailed evaluation including x-rays of your feet. If your consultant who has been trained in the application of this technique feels your symptoms may be related to hyper-pronation you may be offered this procedure as an option for corrective treatment.

WHAT DOES THE PROCEDURE INVOLVE?

In many cases the stent may be fitted as an outpatient procedure. It involves an incision no more than 1 cm long and take less than 5 minutes as the stent is simply fitted over a guide wire into position. The skin is closed with an absorbable stitch and you can go home. The foot needs a few days rest afterward but most patients are back to activity very quickly with their foot in a corrected position.

For More Information Contact:

The Foot and Ankle Centre
Station House Medical Centre
66 Station Road
North Chingford
London E4 7BA
Tel: 020 8524 4516