



MICHAEL J. BAKER, D.P.M.
JASON D. GRAY, D.P.M.
GREGORY W. BOAKE, D.P.M
JESSICA R TAULMAN, D.P.M

BFS BUSINESS OFFICE

P O BOX 330.
Fortville, IN 46040-0330
Tel 317.863.2556
Fax 317.203.0420

COMMUNITY FOOT & ANKLE CENTER

1221 Medical Arts Blvd.
Anderson, IN 46011
Tel 765.641.0001
Fax 765.641.0003

EAST FOOT & ANKLE CENTER

161B Washington Point Dr.
Indianapolis, IN 46229
Tel 317.898.6624
Fax 317.898.6636

FOOT & ANKLE AT WESTVIEW HOSPITAL

3520 Guion Rd., Ste 102
Indianapolis, IN 46222
Tel 317.920.3240
Fax 317.920.3243

MARION FOOT CENTER

330 N. Wabash Ave, Ste 460A
Marion, IN 46952
Tel 765.664.1413
Fax 765.965.6530

BAKER FOOT SOLUTIONS SATILLITE FOOT CLINICS

BROWNSBURG

Tel 317.920.3240
Fax 317.920.3243

GEIST FAMILY PRACTICE

Tel 317.898.6624
Fax 317.898.6636

NEW CASTLE

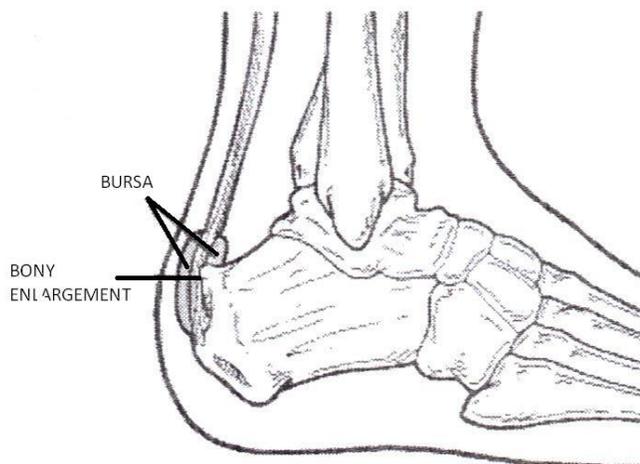
Tel 765.664.1413
Fax 765.965.6530

SPEEDWAY

Tel 317.920.3240
Fax 317.920.3243

Haglund's Deformity

Haglund's deformity is a bony enlargement on the back of the heel that most often leads to painful bursitis, which is an inflammation of the bursa (a fluid-filled sac between the tendon and bone). In Haglund's deformity, the soft tissue near the Achilles tendon becomes irritated when the bony enlargement rubs against shoes.



What Causes Haglund's Deformity? To some extent, heredity plays a role in Haglund's deformity. People can inherit a type of foot structure that makes them prone to developing this condition. For example, high arches can contribute to Haglund's deformity. The Achilles tendon attaches to the back of the heel bone, and in a person with high arches, the heel bone is tilted backward into the Achilles tendon. This causes the uppermost portion of the back of the heel bone to rub against the tendon. Eventually, due to this constant irritation, a bony protrusion develops and the bursa becomes inflamed. It is the inflamed bursa that produces the redness and swelling associated with Haglund's deformity. A tight Achilles tendon can also play a role in Haglund's deformity, causing pain by compressing the tender and inflamed bursa. Another possible contributor to Haglund's deformity is a tendency to walk on the outside of the heel. This tendency, which produces

wear on the outer edge of the sole of the shoe, causes the heel to rotate inward, resulting in a grinding of the heel bone against the tendon. The tendon protects itself by forming a bursa, which eventually becomes inflamed and tender.

Treatment

Medication. Anti-inflammatory medications may help reduce the pain and inflammation. Some patients also find that a topical pain reliever, which is applied directly to the inflamed area, is beneficial.

Ice. To reduce swelling, apply a bag of ice over a thin towel to the affected area for 20 minutes of each waking hour. Do not put ice directly against the skin.

Exercises. Stretching exercises help relieve tension from the Achilles tendon. These exercises are especially important for the patient who has a tight heel cord.

Heel lifts. Patients with high arches may find that heel lifts placed inside the shoe decrease the pressure on the heel.

Shoe modification. Wearing shoes that are backless or have soft backs will avoid or minimize irritation.

Physical therapy. Inflammation is sometimes reduced with certain forms of physical therapy, such as ultrasound therapy.

Orthotic devices. These custom arch supports are helpful because they control the motion in the foot, which can aggravate symptoms.

When is Surgery Needed? If non-surgical treatment fails to provide adequate pain relief, surgery may be needed. Doctor Offutt will determine the procedure that is best suited to your case.

