

Is There A Fungus Among Us?

A Guide to Fungal Nails
(And Other Foot and Ankle Aches and Pains)



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www.countryfootcare.com



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(And other foot and ankle aches and pains)

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Why I Wrote This Book

Let's start at the beginning and answer the question, "*What is a podiatrist?*"

A podiatrist is the specialist who is best qualified to care for your feet. We are quite simply "The Experts" on your feet, heels and ankles and should be the very first doctor you call when you experience pain or other problems with them. In addition to fungal toenail infections, I've also listed many of the other problems podiatrists treat in this book.

The DPM after our name stands for Doctor of Podiatric Medicine. Most people know that podiatrists deal with foot, heel and ankle problems and work with seniors, diabetics or people with poor circulation; what most people don't know is that podiatrists treat patients of all ages. A podiatrist is also well-qualified to help children and young adults with the problems that they can experience with their feet, heels and ankles.

Podiatrists are required, just like any other doctor, to be licensed by the state in which they practice. When medically necessary, podiatrists can perform surgery to correct or remedy problems. Before we recommend surgery, we will explore the many conservative therapies and remedies that are available for our patients and then recommend the very best course of treatment. As medical science advances and new therapies become available to the public, podiatrists are increasingly able to offer their patients some of the most state-of-the-art care available. I am constantly amazed at the new therapies I can offer my patients and will discuss several of them now.

As a podiatrist, I specialize in the care and treatment of foot and ankle problems. In the last decade, I've seen firsthand that the incidence of fungal nails has increased as our general population continues to age.

Over 6 million Americans suffer from toenail fungus.

People of all ages and demographic backgrounds experience toenail fungus. The incidence of fungal toenail infections, also known as onychomycosis, increases with age. It is rarely seen in children, with only one in 200 being affected, but it increases to 50% or more of the population over the age of 60. There are many reasons why more of us are experiencing fungal toenails; two of the biggest are our increasingly active lifestyles and the increase of pedicures. So many of us are exercising on a regular basis. While this is a

tremendous thing for our health, it can contribute to the incidence of fungal toenails. The good news is that you can continue to work out regularly and effectively treat your fungal nail infections too.

There are a number of causes of fungal toenails and I will cover them in greater detail later in this book. What I find interesting is that most of the root causes can often be prevented. Sometimes it is a simple matter of wearing the correct shoes and socks, taking precautions at the gym and nail salon, taking proper care of your nails and proactively working with a podiatrist to maintain the health of your feet.

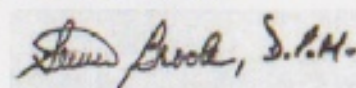
People most often come in to see me after the embarrassment of having their fungal toenails becomes unbearable. This is frustrating for me because the fact is you simply do **NOT** have to suffer. Don't wait until your nails become so unsightly and perhaps painful that you can't even walk or function normally. If you come in at the first sign of toenail infection or even after you've been suffering for a while, the likelihood of a successful treatment is greatly enhanced.

After noticing all of this I decided to create a publication for you. I wrote it so that you could understand the causes of fungal nails and the treatments available to you and so that you could learn how to prevent fungal toenail infections in the future. I'm very excited about the new treatment options for fungal toenails that are available to podiatrists, including the use of laser technology and I want you to know that we have the very latest technologies available in our office.

If after reading this book you think you might be helped by seeing a podiatrist, I hope you consider Country Foot Care. My staff and I will do everything we can to treat your condition, eliminate your infection and make you feel at home.

Dedicated to your health,

Country Foot Care



Steven Brook, D.P.M.
Podiatrist & Founder

What is a Fungal Nail Infection?



Fungal nail infection is the most common disease of the nails, making up more than 80% of all toenail ailments I treat. Fungal nail infections are much more common in toenails than in fingernails and occur when a fungus invades the growth plate or bed of the nail.

Most fungal nail infections begin when fungi enter the nail through tiny cuts or separations between the nail and the nail bed. Most infections begin at the hyponychium, the seal located between the free edge of the nail and the skin underneath it, more commonly known as the quick of the nail. As the fungus grows, it feeds on the nail plate, which is the skin beneath the nail, destroying and disfiguring the nail. Fungi thrive in warm, dark, moist environments, making your shoes their perfect home.

Symptoms of fungal nail infections include:

- White, yellow, or brown discoloration of the nail
- Change in shape or a distortion of the nail
- Brittleness
- Crumbling
- Thickening of the nail
- Loosening or lifting of the nail from the nail bed
- Dullness or loss of shine in the appearance of the nail
- Debris accumulating under the nail
- Foul odor
- Pain when wearing shoes

It is important to remember that the human body hosts a variety of bacteria and fungi. Fungi can live on dead body tissue such as hair, nails and the outer skin layer. Fungal infections are everywhere in our environment just like mold, pollen and dust. This means that contracting a fungal nail infection can happen anywhere, even in your own home. The problem of fungal nail infection begins when the fungi invade the nail bed.

Causes and Treatments of Fungal Nails?

Active Lifestyle

One of the causes of fungal nail infection is living an active lifestyle. The reason for this is, as stated previously, fungi thrive in dark, moist, warm places. This makes swimming pools, gyms, public showers and locker rooms ideal places for a fungus to be contracted. People who sweat a lot are more prone to getting fungal nail infections than others, as is anyone who has moist skin for extended periods of time. Fungal nail infections often follow from a case of athlete's foot, which is why it is so important to treat athlete's foot as soon as it appears. Certain types of exercise that cause repeated trauma to the tip of the nail, or the hyponychium, can also contribute to fungal nail infections. Don't get me wrong, I'm all in favor of my patients leading a healthy, active lifestyle and getting plenty of exercise. We'll talk later about things you can do to prevent fungal nail infection while still spending time at the gym or in the pool.

Nail Care

Another cause of fungal nail infection is getting pedicures done in a salon that is not properly cleaning and sterilizing their instruments between clients. If the instruments are not properly sterilized every time, a fungus can be passed from one person to another. Another cause is sharing nail clippers and nail polish with others. Be sure to always use your own nail implements and keep them just for yourself. Sharing nail polish is another way to spread nail fungus. If you're using nail polish supplied by a salon, the nail fungus from another client can spread to you.

Health Concerns

Anyone who has diabetes, immunosuppressive diseases (like AIDS or cancer) or poor circulation has an increased risk of getting fungal toenails. Even a minor toenail or skin injury could lead to a fungal infection. If you have any one of these health issues, you should see a podiatrist to discuss proper foot care and preventative measures that you can take to avoid fungal toenail infections.

Improper Footwear

Wearing closed in footwear can lead to fungal nail infection because it creates that warm, dark, moist environment that fungi love. The same can be said for wearing shoes, socks or hosiery that are tight fitting because this can lead to injury of the tips of the toenails.

Diagnosis

The first step in treating fungal toenail infections is proper diagnosis. The first time you visit a podiatrist for an examination, they will perform a test to make sure that you have a fungal infection. There are three tests available that can be run and your podiatrist will choose the best one for your situation. The first is called a potassium hydroxide (KOH) smear. This can be done in the podiatrist's office and involves scraping off part of the infected nail and examining it under a microscope in a potassium hydroxide solution to look for signs of a fungus. Another test that can be performed in your doctor's office to detect the presence of a fungal infection is the periodic acid-Schiff stain. In this test, adding acid to the sample causes the cell walls of the suspected fungus to turn a bright magenta. Thirdly, your podiatrist might perform a DTM culture right in the office. These tests can accurately identify the presence of fungus in skin and nails; however, it can take 3-4 weeks for the results. As such your podiatrist may want to be proactive and begin treatment before the results come back from the lab.

Topical Treatments

Topical treatments including ointments, lotions, creams and even medicated nail polish might be prescribed for fungal toenail infections. These treatments can sometimes offer a price advantage, but unfortunately their rate of effectiveness is very low. Studies show the success rate of treating fungal nail infections with topical treatments is 8% or lower. They are still prescribed though, sometimes in the cases of people who can't take oral medications due to liver or heart disease or depending on the individual case.

Oral Medications

If topical treatments prove to be ineffective, some patients consider the use of oral medications to treat their fungal nail infection. Available medications include Terbinafine (Lamisil), Itraconazole (Sporanox) and Fluconazole (Diflucan). These medications must be taken for 12-24 weeks, can cause liver damage and may not interact well with other medications. People who are taking cholesterol medications cannot take oral anti-fungal medication due to the increased risk of liver disease. With oral medication treatments, there is also a possible connection to increased risk of eye damage (macular degeneration) and possible loss of the ability to taste food when taking oral anti-fungal medications. We will need to do blood tests while you are taking the medication to monitor for liver damage. The problem with taking oral medication,

besides the side effects, is that they are only 40%-50% effective in eliminating fungal infections depending on the dosage and duration. In other words, you might go through the expense and trouble of taking a regimen of oral medications and still have fungal toenail infections when it's all over. The biggest drawback to oral medication is the health risk that they present.

Laser Therapy

There is good news for those who suffer from fungal toenail infections. A few years ago the FDA certified the use of lasers to treat toenail fungus. As time has passed, more and more manufacturers have introduced FDA-certified lasers to treat fungal toenail infections. Tiny pulses of light are emitted from the laser and pass through the toenail to the fungus underneath. The laser destroys the fungus with heat or extremely powerful pulses of energy, without causing damage to the nail or the surrounding skin.

Laser therapy treatment time varies with the number of nails being treated but generally lasts 10-20 minutes. Many patients report feeling a slight warming sensation but no discomfort reported afterward. In my experience, patients who undergo the full course of treatment (three treatments over eight months) see the most effective results. The treated nails do not fall off; rather they are replaced by healthy, new nail growth near the cuticle. Because it takes 8-18 months for a completely new nail to grow, results may not be visible immediately.

The main advantages of laser therapy are that there are **no side effects** and the success rate can be as high as 90%. We're very happy to share that we now offer laser therapy for fungal nail infections in our office.





BEFORE TREATMENT



DURING LASER TREATMENT



AFTER 4 MONTHS



AFTER 8 MONTHS

See video of a laser treatment and patient testimonials on our website: www.countryfootcare.com

In some extreme cases, toenail infections do not respond to any conservative treatments. These patients would most benefit from having their nails cared for by a podiatrist, whose expertise and sterile technique allow even the worst nails to look and feel better.

BEFORE



Patient 1 – 7/10

AFTER



Patient 1 – 3/11



Patient 2 – 10/10



Patient 2 – 11/10

How Can You Prevent Fungal Nail Infections?

There are a number of ways that you can help to prevent a fungal nail from occurring in the first place or from coming back after treatment and I will list them for you here.

- First and foremost, if you have been treated for fungal nails, you must sterilize all of your shoes. We can tell you how when you visit our office.
- Using anti-fungal creams, sprays or powders will inhibit the growth of fungus.
- Always keep your skin clean and dry – remember the fungi thrive in warm, dark, moist environments.
- Fungal skin infections (athlete's foot) can cross-contaminate a patient's toenails and must be controlled.
- Wash and dry hands thoroughly after any contact with your feet.
- Wearing sandals in community showers and locker rooms will decrease your risk of infection.
- Never use tools provided by the nail salon when getting a pedicure. Bring your own instruments or ask if the salon sterilizes their instruments using an autoclave.
- Bring your own polish to a salon. Do not use shared nail polish.
- Take good care of your nails making sure they are cut properly and kept clean and dry.
- Wear comfortable shoes and socks that breathe such as synthetic or cotton.
- Wear clean socks every day.
- Never share shoes or socks with anyone.
- Let your shoes dry for 24 hours before wearing them again.
- Quit smoking.

How Does a Podiatrist Treat Other Conditions?



Now let's take a look at some other foot problems and the treatments we can offer to reduce or eliminate your pain. It is impossible to discuss all of the potential problems that can affect the health of your feet in a book of this size, but what I want to tell you about here are the problems we see most often at our offices.

Arthritis – There are numerous types of arthritis and over 30 million American adults report being told by a doctor that they have some type of arthritis. It is a major cause of lost time at work and serious disability for many people. Although arthritis is mainly a disease affecting adults, children may also have it. When a patient has arthritis, it means that the cartilage and even the lining of their joints has become swollen and inflamed.

The reason that your feet seem to be more susceptible to arthritis than other parts of your body is that your feet have so many joints that can be affected. The odds are just stacked against your feet. In addition, your feet and ankles bear the full weight of your entire body every single day.

While there are dozens of types of arthritis, I want to point out two of the most common:

Osteoarthritis – The most common type of arthritis is osteoarthritis. It is seen in many people as they age, although it may begin when they are younger as a result of obesity, injury or overuse. It is often more painful in weight bearing joints such as the knee, hip and spine than in the wrist, elbow, and shoulder joints. All joints may be affected if they are used extensively in work or sports, or if they have been damaged from fractures or other injuries.

In osteoarthritis, the cartilage covering the ends of the bones gradually wears away. In many cases, bone growths called "spurs" can develop in osteoarthritis joints. The joint inflammation causes pain and swelling. Continued use of the joint produces pain. Some relief may be possible through rest or modified activity.

Rheumatoid Arthritis – Rheumatoid arthritis presents as chronic inflammation around joints and, if left untreated, can be quite painful and cause a decrease in mobility. Rheumatoid arthritis can affect people of all ages. However, more than 70% of people with this disease are over 30 years old. The goals of treatment are to provide pain relief, increase motion and improve strength.

Bunions – Bunions are often inherited and can also be aggravated by shoes that don't fit well. Bunions occur when your big toe joints become incorrectly aligned, causing the first joint on your big toe to slant outward and the second joint to angle toward your other toes. The misaligned first joint rubs on the inside of your shoe causing a bump on the bone that can become very painful if left untreated. Most bunions can be treated temporarily by using physical therapy, wearing custom orthotics, wearing protective pads to cushion the painful area and, of course, avoiding ill-fitting shoes in the first place. In many cases, where conservative treatment has failed, surgery is recommended and necessary to relieve the painful symptoms.



Hammertoe – A hammertoe is a flexible or rigid contraction usually affecting the second, third, fourth or fifth toes. In this condition, muscle imbalance leads to a bending or "buckling" of the toe joints, usually the middle joint, resembling a hammer. These buckled or contracted positions create any number of problems within and on top of the toe, such as corns or calluses, at the point where they come into contact with shoes. As with many foot problems, one of the causes of hammertoes can be improperly fitted shoes.

Podiatrists have a variety of ways to treat hammertoes, including surgery, shoes designed with extra room for toes, corn pads, straps and cushions. However, as the condition advances the toes lose

flexibility the only option for correction may be surgery so it is important to recognize and treat hammertoes early.



Diabetes – Diabetes can affect many parts of the body. Because diabetic patients often have circulation and nerve issues, foot problems are commonly associated with the disease. According to the American Diabetes Association, about 15.7 million Americans (5.9 percent of the United States population) have diabetes. The ADA also predicts that over the next decade, the incidence of people with diabetes will rise sharply with over 10% of the U.S. population expected to be affected. It is very important that a diabetic gives their feet very special care. A small problem in a healthy person could become a severe one to a diabetic.

Diabetes can affect the feet in a number of different ways. The first is infection, which is one of the most common and serious complications of the diabetic foot. Because diabetes causes reduced immune response, a diabetic patient's ability to fight infection is decreased. Early treatment of infection is a critical component to success. If neglected, infection of the foot can cause gangrene, ulceration, osteomyelitis (bone infections) and even amputation.

Another complication of diabetes is called neuropathy, which causes decreased sensation to pain and temperature. This may cause a patient to underestimate a foot problem. It may also be responsible for an absence of perspiration leading to dry, cracking skin that can more easily become infected.

With a diabetic foot, a wound as small as a blister from wearing a shoe that is too tight can cause a lot of damage. Diabetes decreases blood flow, so injuries are slow to heal increasing the risk of infection which spreads more quickly in diabetics. If you have diabetes, you should inspect your feet every day looking for puncture wounds, bruises, pressure areas, redness, warmth, blisters, ulcers, scratches and cuts. If you have flexibility issues you may want someone to help you, or you can use a mirror to see

the bottom of your feet. Diabetic foot care can be very complicated and good podiatric care is an essential component of managing diabetes.

Here is some basic advice for the care of diabetic feet:

- Inspect your feet every day.
- Keep your feet clean and dry.
- Always keep your feet warm.
- Take extra care drying your feet and toes after showering. Pay special attention to the space between your toes.
- Be sure to exercise. Walking is one of the best exercises for diabetics unless you have complications. If you struggle with balance use a cane.
- Always protect your feet and legs. Never walk barefoot. Avoid hot water bottles and heating pads.
- Do not overexpose skin to the sun.
- Never use razor blades, knives, scissors or medicated corn/wart removers.
- Look for redness, blisters, scratches, cracks between the toes, discoloration or any other change.
- Avoid all actions that diminish circulation such as tobacco use, sitting with legs crossed and circular elastic garters.
- Change your shoes and socks daily.
- Wear soft leather shoes that conform to the shape of your overall foot.
- Gradually "break in" new shoes and avoid blisters.
- Call us immediately if you see any changes in your feet.

Metatarsalgia – Metatarsalgia is foot pain in the ball of your foot, the area between your arch and your toes and gets its name because the pain experienced affects the metatarsals located in this part of the foot.

In this condition one or more of the metatarsal joints becomes inflamed and painful and some people may develop a callus under the affected joint. There are many causes of metatarsalgia including injuries, arthritis, poorly fitting shoes and working or standing on very hard surfaces. Sometimes changing your shoes

will fix the problem. We may also recommend custom shoe inserts called orthotics to stabilize a patient during their gait cycle (when they walk) and accommodate the painful area.

Plantar Fasciitis (heel pain) – Heel pain is the most common complaint that we see in our office other than fungal nails. Plantar fasciitis is an inflammation in the band of tissue (the plantar fascia) that runs from the heel to the toes. This condition is most often caused by wearing non-supportive footwear on hard surfaces, spending long hours on your feet or obesity. The pain from plantar fasciitis is usually a sharp, stabbing pain on the bottom of the heel and is usually most severe when you first stand on your feet in the morning. It will usually subside, but can return with prolonged standing or walking or getting up after long periods of sitting.

We offer a variety of treatments for heel pain including stretching, ice, cortisone injections, oral anti-inflammatory medications and custom fabricated orthotics. Because there is often tissue damage associated with heel pain, we use Shockwave therapy to increase healing of the tissue, reduce pain and help the patient stay active. Shockwave is a totally safe, non-invasive, in-office treatment that greatly reduces or eliminates heel pain on the bottom or back of the heel without injections or side effects. There are always advances being made in the way that heel pain is treated so you should seek the advice of a podiatrist if you are experiencing pain for longer than 4-5 days.

In some patients, where chronic heel pain isn't resolved with conservative care, surgical options are considered. Radiofrequency, which is minimally invasive, often relieves chronic heel pain. In extreme cases surgery may be necessary to relieve heel pain.



Sprains – An ankle sprain occurs by over-stretching or tearing one or more ligaments on either or both sides of the ankle. Ignoring a sprain won't help it heal any faster. A podiatrist should treat ankle injuries that are serious enough to cause disabling pain. Further examination may even reveal a torn ligament or bone fracture.

Common treatments for sprains include protection, rest, ice, compression and elevation (PRICE). More serious sprains may call for crutches or other walking devices. Ankle sprains can permanently overstretch the ligament and may require custom orthotics, ankle braces or surgery to support the ankle.

Stress Fractures – Any break in a bone caused by overuse is known as a stress fracture. Symptoms can include pain, swelling and redness. Up to 15% of all sports injuries are stress fractures. A podiatrist needs to perform an examination and take X-rays of the injury in order to diagnose a stress fracture. Treatments include immobilization of the foot with the use of a cast, medications, and in some cases, orthotic devices to prevent further injury.

Warts – Warts are caused by a virus that generally enters the body through small nicks or abrasions in the skin. When they occur on the soles of the feet they are known as plantar warts. Due to the amount of pressure that is put on the feet in the course of a day, plantar warts can become quite painful. Warts most commonly affect children between the ages of 12 and 16 but they can occur at any age and are typically contracted by walking barefoot on dirty surfaces or outdoors. The virus thrives in warm, moist environments like showers and swimming pools and is contagious so it can easily spread to other parts of the foot or to other family members.

If you suspect that you or a family member has a plantar wart, see a podiatrist to get a correct diagnosis and treatment plan. Treatments may include the use of a wart-removal preparation or CO2 laser cautery performed under local anesthesia to safely remove the wart.



Wounds and Ulcers – Foot ulcerations or open wounds are a condition where there is a breakdown in many layers of skin and tissue, sometimes going all the way to the bone. They can be caused by pressure to a weight bearing point on the foot, but they can occur on top of the foot or due to pressure from shoes or a bony spur. The risk of ulcer formation is higher in patients with decreased circulation (impaired blood supply to the legs and feet) and diabetics, but they can be found in patients with high blood pressure, blood clots, varicose veins and phlebitis as well.

Treatment varies according to the cause of the wound. The goal of the treatment is to close the wound from the inside out as quickly as possible. In cases where there is adequate circulation, debridement (removal of dead tissue) may be used around the edges and within the ulcer itself to promote healing. Other treatments include oral medications, compression, off-loading the ulcer site and bed rest.

When a patient's circulation is compromised, it may be necessary to improve blood flow in order for the ulcer to close. If an infection is present, it must be controlled before an ulcer can heal. New advances have been made in wound care in recent years including the use of a team approach, where the podiatrist works with the patient's physician and wound care center to significantly improve the prognosis and outcome for these patients.



What Can You Do About Foot Pain?

The first step in dealing with foot pain is to care for your feet since your feet are the hardest working part of your body. They carry you wherever you go, whenever you need to go there and they do it for years and years. In fact, during your lifetime you will have traveled on your feet the equivalent of three trips around the entire world. You take, on average, 8,000 steps a day and will walk or run well over 75,000 miles in your lifetime. Caring for your precious feet is the best step to avoid pain and is a critical component in eliminating it as well.

Here are some steps you can take to keep your feet healthy and functioning:

First and foremost – do not ignore pain in your feet and ankles. Healthy feet don't have persistent pain or skin that looks unusual. If your pain doesn't subside quickly, please contact our office right away. The sooner we can see you and examine your feet, the quicker we can begin to make the corrections needed to get your feet healthy again. So often we see people who have waited a very long time and suffered needlessly – sometimes for years.

Try to develop a habit of always checking your feet. A great time to do this is right after a shower or during a bath. If you start a habit of carefully drying your feet after bathing (pay special attention to the skin between your toes) you can quickly check your feet to see if you notice any changes. If you see nails that look unusual you might be seeing a potential fungus developing. If your skin is broken, cracked or an unusual color you are noticing abnormalities. Finally, if your foot is changing shape or you observe new growth you should make an appointment to see us so we can treat these conditions before they progress and become worse.

If you have diabetes, it is especially important to check your feet very regularly and often. In fact, we recommend that you have someone else help you check your feet because you may not be able to see, or most importantly, feel problems. Early detection and treatment may avoid potentially serious complications later.

See a podiatrist if you have a problem with your feet. Treating yourself can often cause problems or exacerbate existing problems. If you are diabetic you are at greater risk for foot problems so be sure to make an appointment to see us at least once a year. We'd love to see you. We are here to help.

When to Call a Podiatrist

Podiatrists are the experts on feet and ankles and treat patients of all ages so they should be the first doctor you call when you experience any of the symptoms or pains described in this book. If you notice that there is any change at all to your heels or the skin on your feet and ankles, or you suspect you may have a fungal toenail infection you should see your podiatrist, the "expert" on your feet.

If you have diabetes or poor circulation you should see us regularly whether or not you have symptoms or pain. If you develop any abnormal symptoms you should see us immediately as you are at much greater risk for serious complications. Regular checkups are a great way to help keep your feet healthy.

Remember that foot, ankle or heel pain is never normal regardless of age or activity, so if you experience any pain or symptoms, you should see your podiatrist right away. The sooner you get treatment the better.

What To Do If You Are In Severe Pain

Pain is our body's way of telling us that something is wrong. And it is usually true that the more severe the pain, the more serious the problem. If you are experiencing severe foot pain, seek treatment from a podiatrist immediately. Podiatrists specialize in dealing with foot problems and are experts in helping treat your symptoms.

We have two offices for your convenience.

Mineola

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and of course you can find us online at:

www.countryfootcare.com

If you are experiencing an emergency, call 911.

Final Thoughts

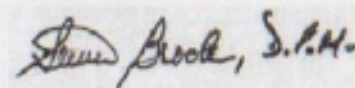
I hope the information in this publication has been helpful. My purpose in sharing it with you is to give you the information you need to take the appropriate actions to care for your feet. I hope it helps you understand fungal toenail infections and what can be done to treat them and to keep them from returning. I also wrote it to help you see that podiatric medicine has benefited greatly from the advances medical science is making in the treatment of toenail infections and overall foot conditions.

Having a fungal toenail infection is not dangerous to your health, but it can affect your quality of life. Many who suffer from this condition feel embarrassment over the appearance of their feet so they avoid activities where their feet will be exposed such as going to the beach. They may also avoid intimacy because they don't want others to see their feet. Having fungal toenails can lead to limited activities, limited ability to work, worry about treatments and ultimately, depression.

I know that making an appointment to see a doctor isn't always the easiest thing to do, but with knowledge and understanding you can see that we podiatrists can offer you many treatments that can greatly improve the quality of your life. Please make an appointment to come see us to discuss how we can help you with any foot problems you may be experiencing.

Dedicated to your health,

Country Foot Care



Steven Brook, D.P.M.
Podiatrist & Founder

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About the Author



Dr. Brook graduated with his degree in Podiatric Medicine in June 1981 from Ohio College of Podiatric Medicine, Cleveland, Ohio. Continuing his education, Dr. Brook was selected by the New York College of Podiatric Medicine to perform a podiatric surgical residency. While completing this program, Dr. Brook served as Chief Podiatric Resident at Coney Island Hospital. He completed his surgical training in 1982. Dr. Brook received his board certification in June 1989 in both podiatric surgery and podiatric medicine from the American Board of Multiple Specialties in Podiatry.

Dr. Brook, the founder of Mineola Foot Care, P.C. and Country Foot Care, P.C., has been dedicated to providing the community with "state-of-the-art Podiatric Medicine with good old fashioned caring" since 1983. His Mineola and Williston Park patients are treated in "boutique" settings rarely found in medical practices today. The many services provided in Dr. Brook's offices include the most advanced in-office diagnostic testing, laser treatment of fungal nails, foot surgery and diabetic foot care. The sports medicine aspect of the practice includes on-site physical therapy, fabrication and fitting of custom orthotic shoe inserts and custom and non-custom braces, Radiofrequency and Shockwave therapy, the newest modality for treating acute and chronic foot and heel pain without invasive surgery.

With more than three decades of experience, Dr. Brook has seen the evolution of technology used in Podiatric medicine and has treated multiple generations within families.

"Our practice is dedicated to our patients and their needs. We couldn't have reached this milestone without them," said Dr. Brook. "We are proud to serve Mineola and the surrounding communities and look forward to the next 30 years."