

# Move Better

AUTUMN 2022 | Co-published with  
*Community Health Magazine*

**LOW-IMPACT WORKOUTS** 10

---

**FOOTWEAR FOR FALL HIKES** 14

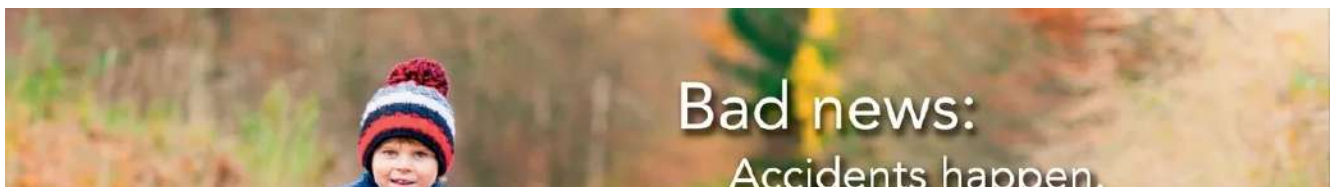
---

**SCHEDULING SURGERY** 16

---

## Return to Fall Sports

PAGE 3





Bad news:  
Accidents happen.

Good news:  
The ER isn't your only option.

IBJI OrthoAccess® provides faster, more affordable, immediate orthopedic care than an ER.

For injuries that can't wait, but don't necessarily require a trip to the ER, IBJI OrthoAccess® provides faster, more affordable orthopedic immediate care. Staffed by highly trained orthopedic professionals, including board-certified orthopedic surgeons, OrthoAccess® is here for you with the high-quality immediate care you need.

So bring us your aches, breaks, twists, and sprains. We'll get you moving again—quickly and affordably.



**Immediate Orthopedic Care.**  
**Exceptional Quality You Can Trust.**

**Walk-ins welcome at 13 IBJI locations:**

- Arlington Heights
- Bannockburn
- Barrington
- Bourbonnais Now Open!
- Chicago - Avondale
- Chicago - Norwood Park
- Frankfort
- Glenview Open 7 Days
- Gurnee
- Hinsdale
- Joliet
- Libertyville
- Morton Grove Open 7 Days

Find an OrthoAccess® location near you and view walk-in hours at [ibji.com](https://www.ibji.com)

While you will always be evaluated by an IBJI orthopedic provider, you may need to be referred to a subspecialist depending on the extent of your injury/condition.



**Move**



COVER STORY

# Return To Fall Sports

**5** Our sports medicine experts provide tips for avoiding injuries and how to best recover from them when they do occur.

### THE RIGHT TIME?

## When To Schedule Surgery

**16** Two IBJ surgeons weigh in with their advice on the best time to schedule spine and shoulder surgeries.



### GAIN WITH NO PAIN

## Low-Impact Exercises

**10** Rheumatologist and Pain Management Specialist Alfonso Bello, MD, MHS offers his suggestions for how patients with arthritis can get an effective workout without stressing their joints.

### HAPPY FEET

## Tips for Taking Fall Hikes

**14** Autumn is a wonderful time of the year to take a walk in the great outdoors, and knowing how to keep your feet happy while doing so will make it that much more enjoyable.

# Move Better

AUTUMN 2022  
VOLUME 3 | ISSUE 2

### IBJI EDITORIAL ADVISORY BOARD

RYAN CLAWSON  
Marketing & Content Creation Manager

STEFANIE DELL'ARINGA  
Senior Copywriter & Social Media Manager

SARINA DONOHUE  
Marketing Coordinator



Move better. Live better.

[www.ibji.com](http://www.ibji.com)

### COMMUNITY MAGAZINE GROUP

Larry Perrotto | CHAIRMAN

Mark Hornung | MANAGING DIRECTOR

Zach Payer | VP DIGITAL OPERATIONS

Jason Maholy | EDITOR

Rebecca Fortner | EDITORIAL ASSISTANT

Courtney Weed | ART DIRECTOR

Dee Edington, PhD | WELLNESS EDITOR



2019 Silver Ozzie (Folio Awards)  
Custom Publishing



2009 Gold Ozzie (Folio Awards)  
Best Feature Design/Custom Publishing  
2009 Silver Ozzie (Folio Awards)  
Custom Publishing



[CommunityHealthMagazine.com](http://CommunityHealthMagazine.com)

Like us on Facebook: [Facebook.com/CommunityHealthMagazine](https://www.facebook.com/CommunityHealthMagazine)

Follow us on Twitter @CommHealthMag

# IBJI Keeps You On Track

**T**here's nothing like the crunch of leaves under your feet and the brilliant colors of fall. As you head outdoors to watch or play football, hike, bike, jog, or engage in other fall activities, we want you to know that IBJI is here to keep you on track.

If you're ready for hiking or want to know more about keeping your feet healthy, read our article that features tips on boots, avoiding blisters, and more from our IBJI foot and ankle specialists and podiatrists. You'll learn what you need to know before heading out on the trails.

As the cooler weather hits us, arthritis sufferers start to feel it in their bones. If this is your scenario, you can benefit from IBJI Rheumatologist Alfonso Bello's Q&A, detailing low-impact exercises that can reduce your pain. Even if you don't suffer from arthritis, this is a great article if you want to incorporate low-impact exercises into your fitness routine.

Also in our fall issue, we'll help you determine the best time to schedule your back or shoulder surgery based on interviews with two of our orthopedic surgeons. They discuss typical recovery times and offer suggestions on how to be back to your normal activities for special events, such as weddings and the upcoming holidays!

Finally, as many of you return to fall sports this time of year, we want you to stay injury free. Our feature article includes five tips from our sports medicine physicians, who give their best advice for staying safe. Their tips apply to every type of athlete, young and old.

Autumn has so much to offer and we aim to keep you on track, whatever your sport or activity, so you can move better and live better.

Enjoy this issue!

**Stefanie Dell'Aringa**  
Senior Copywriter & Social Media Manager  
Illinois Bone & Joint Institute



**STEFANIE DELL'ARINGA**  
SENIOR COPYWRITER  
& SOCIAL MEDIA MANAGER  
ILLINOIS BONE & JOINT INSTITUTE

*"As you head outdoors to watch or play football, hike, bike, jog, or engage in other fall activities, we want you to know that IBJI is here to keep you on track."*

# 5 Tips for Returning to Fall Sports Safely

## Best Tips from Our IBJI Sports Medicine Physicians

When it comes to fall sports, football, hockey, and soccer come to mind. Youth sports, cheerleading, gymnastics, and adult league play get into full swing with this new season. At IBJI, our sports medicine experts help out as team physicians, and work hard to keep players safe and performing their best.

No matter who you are or what your age is, you'll benefit from their fall sports injury-prevention tips.



**Tip #1: Rest and Recovery**  
**Eric Chehab, MD**  
Orthopedic Surgeon with Fellowship Training in Sports Medicine and Shoulder

"Many aches and pains athletes experience will get labeled as 'overuse' injuries," says Eric Chehab, MD, an IBJI orthopedic surgeon with fellowship training in sports medicine and shoulder. "But that may be inaccurate. More often than not, the condition is a result of 'insufficient recovery.'"

As athletes re-enter fall sports, it's important that they focus on their recovery just as much as they focus on their training. We tend to be laser-focused on training, but not so much on our recovery. Recovery includes sleeping well and sufficiently, eating well, and resting sore muscles.

Recovery is a bit of a nebulous concept, but we know when we are 'feeling well' or 'feeling tired.' This needs to be accounted for when training. In addition, helpful aids are available, such as wearable fitness apps, that can help athletes gauge their recovery. For some, the additional data provided by these wearable apps can be very helpful in maximizing both performance and health."

*Continued on next page*



MOVE BETTER AUTUMN 2022 5





Continued from previous page



**Tip #2: Hydration/Fueling**  
**Kevin Hayek, MD**  
 Orthopedic Surgeon with Fellowship  
 Training in Arthroscopy and Sports  
 Medicine

“Many fall activities begin during the high heat and humidity of late summer. Two of the biggest and underrecognized injuries are dehydration and heat-related injury (HRI). Adequate hydration prior to and during activity is key to staying safe and preventing heat-related injury (heat cramps, heat exhaustion, and heat stroke).

Individuals in constant activity could need a minimum of two glasses of fluid each hour when the temperature is over 80 degrees. It’s best to discuss with your provider, trainer, and coach to determine a hydration and rest plan that is right for you. Don’t forget to refuel with balanced meals after activity in addition to rehydrating. Your engine needs fuel to recover and take on the next day’s activity.”



**Tip #3: Distinguish Discomfort from Injury**  
**Richard Nicolay III, MD**  
 Orthopedic Surgeon with Fellowship  
 Training in Sports Medicine

“We are all excited for fall sports to commence but, unfortunately, with training

and competition comes injury. Muscle strains and soreness, minor skin bruises and abrasions, and mild joint sprains are all common occurrences in sports. However, it is important to distinguish discomfort arising from these benign conditions from pain generated by a more serious underlying injury.

For any athlete experiencing pain with activity that does not improve after a short period of rest, an evaluation by a specialized health care professional is recommended. Oftentimes, minor injuries can be successfully managed with a personalized treatment plan, training modification, and rapid return to sport. However, if a more serious injury is identified, timely treatment and rehabilitation may prevent exacerbation of the condition, prevent future damage and allow the athlete to safely return to sport as soon as possible.”



**Tip #4: Cross-Train to Reduce Injuries**  
**Giridhar Burra, MD**  
 Orthopedic Surgeon with Fellowship  
 Training in Sports Medicine

“Cross-training is the addition or incorporation of an alternate exercise or activity into an exercise or training regimen. It is very helpful in reducing injury but also offers the advantages of quicker weight loss and fitness improvement. Additionally, research has shown that cross-training improves focus and improves the ability to adhere to the training regimen. A good





cross-training program should have the following components to it: strength, cardio, endurance, and flexibility.

Cross-training is ideally done two to three times a week for an hour or less. Beginners can start at even once a week. There are no specific cross-training regimens; it is simply an alternate activity from a regular exercise regimen that focuses on different muscle groups.

Examples of cross-training are cycling for a runner, elliptical and rowing for a swimmer, running for a weightlifter, and so on. Circuit training, Pilates, and yoga are other examples that are gaining popularity. This is a good training technique for beginners, amateurs, and established or even professional athletes. While traditional cross-training has been understood to be a different activity done two to three times a week, it can also be done by missing up to two to three activities on the same day. The key is to activate different muscle groups with varying activity. The message is: If you want to train well, it helps to cross-train."



**Tip #5: Don't Play Through Pain**

**Steven Chudik, MD**  
Orthopedic Surgeon/Shoulder & Knee,  
Fellowships in Shoulder/Sports Medicine

According to sports medicine physicians and research, pain is a "warning" message sent to the brain by

nerve endings called nociceptors that respond to tissue injury. Therefore, pain should not be ignored and athletes should not continue to play when they are experiencing pain, a sign that something may be wrong.

Continuing to play with pain will typically make an injury worse, take longer to recover, and become more serious which may permanently affect an athlete's ability to return to sport. Yet, research shows that most athletes are willing to do just that for distinct reasons:

**Sports Ethic**

Sports ethic describes a culture where "real athletes" must make sacrifices for the game, strive for distinction, and accept risks including playing through pain and refusing to accept limits in their pursuit of future playing possibilities.

**Athletic Identity**

Athletic identity describes how athletes are more likely to "tough it out" and continue to play even when it can cause physical injury because they are not willing to stop and potentially lose their athletic identity.

**Culture of Risk**

Culture of risk describes how athletes are conditioned to accept risk, pain, and injury and believe in the importance of playing while injured and playing through pain. This culture

*Continued on next page*

MOVE BETTER AUTUMN 2022 7





*Continued from previous page*

is encouraged when the athletic community takes away a starting position or mocks an injured athlete who removes themselves from a game or competition and rewards and praises others who continue to play through pain and injury.

#### **Influence of Others**

Athletes are often conditioned into playing through pain by parents, coaches, officials, teammates, and others involved in sports, including physicians who often “give in, making concessions or partially treating to get an athlete through an important game or meet.”

Research has discovered that a majority, approximately 70% of athletes, were willing to play while injured across all levels and all types of sports and more women than men were willing to play injured. As a result of these findings, researchers recommended sports injury prevention programs need to not just include female athletes but focus on them.

As stated earlier, the willingness of athletes to play through pain is influenced by different members of the athletic community such as coaches, officials, teammates, parents, and the sponsoring institutions;

and, once the sports ethic is fully internalized, it becomes difficult to implement successful strategies for injury reduction/prevention.

#### **So from an orthopedic specialist's point of view, we need to:**

Spread the word that playing through pain results in worsening of injuries and delays in diagnosis and treatment which compromises recovery, health, and return to sport.

Understand how sport ethics, athletic identity, the culture of risk, and the influence of others encourage athletes to play through pain, risk their health, and compromise their ability to play sports. Develop strategies to prevent this indoctrination into a culture where playing with pain is acceptable. Recognize that the influence of all those involved from coaches, officials, teammates, parents, professionals, and sponsoring institutions begins during early childhood.

Send a clear and better message of health over competition with our words and our actions. ■

#### **WANT TO KNOW MORE?**

**Learn more about sports medicine and view the list of our providers and the conditions they treat to help you achieve your best athletic performance.**







## Physical & Occupational Therapy to Keep You Moving

IBJI Rehab offers an integrative team approach to your orthopedic needs.

Our therapists work alongside your physician to diagnose and determine the best treatment approach for you. Every therapeutic intervention is tailored to your individual goals, so that you can move better and live better.

**IBJI has 40 physical therapy clinics. Find a location near you at [ibji.com](https://www.ibji.com)**



**ILLINOIS  
BONE & JOINT  
INSTITUTE®**

Rehabilitation Services

### Services offered:

- Physical & Occupational Therapy
- Blood Flow Restriction Training
- Complimentary Injury Screening\*
- Sports Injury Prevention Screening\*
- Concussion Management
- Compression Wrapping
- Dry Needling
- Industrial Rehabilitation
- Massage Therapy
- Orthotic Fitting
- Pelvic Floor Therapy
- Performing Arts Rehabilitation
- Pitching/Throwing Analysis
- Golf Analysis
- Dance Analysis
- Return to Play Therapy
- Video Gait Analysis

\*Per federal guidelines, beneficiaries of plans such as Medicare, Medicaid, Tricare, VHA, and other federally funded plans are not eligible for complimentary injury screenings.

# Low-Impact



# Low-Impact Exercises

## For Patients With Arthritis

### Q&A with Alfonso Bello, MD, MHS



**Alfonso Bello, MD, MHS**  
Board-Certified Rheumatologist with Fellowship Training in Rheumatology

**You've heard it said that low-impact exercises** are easy on the joints. When you have arthritis, your joints often hurt, so it can be difficult to become motivated to move. Seasonal changes that cause a drop in the barometric pressure can cause additional swelling in the joints, which leads to more pain.

One way to combat painful joints is to perform low-impact exercises on a regular basis. These exercises are gentle on your body, easy to do, and provide many health benefits including improving your mood.

Here are some answers to commonly asked questions about low-impact exercises for patients with arthritis from IBJI Rheumatologist and Pain Management Specialist **Alfonso Bello, MD, MHS**.

Dr. Bello practices at our IBJI Doctors' Office in Glenview

and serves as clinical associate professor of medicine at the University of Illinois College of Medicine.

**Q: What are low-impact exercises?**

**Dr. Bello:** Low-impact exercises are those that don't involve jumping, hopping, or running. These are more static-type activities that don't put pressure on your joints. Low-impact exercises focus on stretching and flexibility, while building strength in muscles to support your body. Things like chair yoga, water aerobics, and mall-walking all qualify as low-impact activities that may benefit patients with arthritis.

**Q: How do low-impact exercises benefit arthritis sufferers?**

**Dr. Bello:** Low-impact exercises will lessen pain because the endorphins of exercise reduce pain. You're providing more stability, whether it's a hip, back, or knee; and strength and stamina, which are really important. The main benefit is building up muscle.

**Q: What are the benefits of water exercises?**  
**Buoyancy/Resistance**

**Dr. Bello:** It's easier to exercise in the water because of the buoyancy of the body. However, it also provides necessary resistance, which can help patients with arthritis get a safe

10 AUTUMN 2022 MOVE BETTER

yet challenging workout.

You can feel that there's a resistance to the water, but while your joints aren't feeling it, your muscles are feeling it. At the end of the day you want to put good muscle around joints

You want to start low and go slow. You find a sweet spot for yourself.

**Q: What can you expect the day after doing low-impact**

yet challenging workout.

You can feel that there's a resistance to the water, but while your joints aren't feeling it, your muscles are feeling it. At the end of the day, you want to put good muscle around joints that are damaged. That way it provides better support.

#### Stability

**Dr. Bello:** Walking through water can strengthen the quadriceps and hamstrings, resulting in better stability. For patients who can barely stand because of their arthritis pain, getting into a pool where gravity isn't an issue can really help.

#### Temperature

**Dr. Bello:** Organized classes for water aerobics tend to be led by physical therapists and may offer warm-water pools, which can be soothing on the joints.

#### Q: What are some of the exercises patients can do in the water?

**Dr. Bello:** There are organized classes for water aerobics that could work well for patients. They use different types of foam appliances and that may help to work with those. They will have certain exercises that they'll work on with patients in a supervised class.

Obviously, swimming is going to be very good. Using a board and doing laps could be very helpful for some people. Some people may not make it for many laps, but they can stay in the shallow end of the pool and walk, and then they may advance to swimming. Eventually, they make it to the entire length of the pool. Setting goals is very important.

You want to start low and go slow. You find a sweet spot for yourself.

#### Q: What can you expect the day after doing low-impact exercises?

**Dr. Bello:** You're going to have some muscle discomfort. You're probably working muscles that you haven't used before or as often. You will be sore, but you can't be discouraged by this. It's a good kind of hurt. These are muscles that you need to work on.

#### Q. What should you do if you're hurting beyond soreness?

**Dr. Bello:** If it becomes very painful, it's time to consult your doctor. We can better ascertain what is going on. We can ask what type of exercise you are doing and if it can be modified. We can ask whether it's on water or land. If you're working with a physical therapist, that person is credentialed and can come up with alternative exercises that are easier to do.

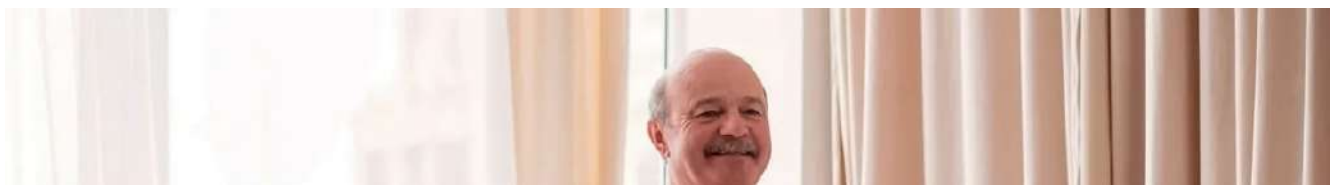
#### Q. What advice do you have to prevent injury?

**Dr. Bello:** As a general rule, you shouldn't try to do the twisting and turning that other people are doing if they've been in the class for months and you're the newbie. Set your expectations. If it does hurt, you can ask the instructor, 'Is there another way to modify this?' They should be able to give you modifications. You can also reduce the length of time or how often you exercise.

*Continued on next page*



MOVE BETTER AUTUMN 2022 11





*Continued from previous page*

**Q. The CDC recommends starting slow and going low. What does that mean exactly?**

**Dr. Bello:** A good example is a walking program. I tell people to try walking a block or maybe it's less than a block. It depends on their cardiopulmonary status as well. They may have spinal stenosis. If you're going to start a walking program, go to a location that has either a park or a mall, for example, where there is seating every so often, so that at least when you're starting and you say, 'I have to sit down,' they have spots available for you. That's one way to start.

Once you feel confident, you can extend the length of what you're doing. You'll find yourself doing two blocks and three blocks. I never have them try to do a mile the first time, especially if they haven't exercised in a long time because of their arthritis.

With so many beautiful parks we have in the city and suburbs, there are plenty of places where you can stop and sit. Going to the Chicago Botanic Garden, for example, is a nice place because there are benches every so often. You can have the opportunity to confidently walk and you get to see things and that makes it so enjoyable. You're getting more out of it.

**Q. What kinds of exercise should patients with arthritis avoid?**

**Dr. Bello:** Avoid joint-pounding exercises. I think for some people, anything that's jumping or hopping. Those things are going to be very difficult. For some people, stair-climbers are hard because the knee flexion is too much for them. If we're in the dead of winter and you have the opportunity to go on a treadmill, keep it flat and don't put an incline on it. Go at a nice, even pace. From there, you can make an advancement to what you can tolerate. You can adjust the pace and speed, and you can have a sense of time to focus on. Next time, you can increase it.

**Q. Can patients with arthritis use a stationary bike?**

**Dr. Bello:** Some people can ride a bike but leaning forward may hurt. There are recumbent bikes that you can buy. Doing something like that would be easier for patients with significant back problems. Riding on a regular stationary bike may or may not be a comfortable position to be in.

12 AUTUMN 2022 MOVE BETTER

**Q. What are some specific muscle-strengthening exercises for patients with arthritis?**

**Dr. Bello:** A lot of times, patients are very deconditioned. One

**Q. When should I work with a physical therapist?**

**Dr. Bello:** Listen to your body and stay positive, but if you need assistance with exercising a physical therapist can help.

**Q. What are some specific muscle-strengthening exercises for patients with arthritis?**

**Dr. Bello:** A lot of times, patients are very deconditioned. One thing I do is have them extend out their legs. When they're watching TV, they can extend and point their toes to their nose and hold it there. You can feel the quadriceps muscle and try to hold that for five or 10 seconds and then switch and do the other one and do that 10 times on each side. You're going to start feeling it. You can extend it for longer periods of time and you feel it in your calf when you point your toes towards your nose. You can get isolated muscle strengthening and that's an easy one to start with.

With that same type of exercise you can add an ankle weight, and that can be challenging for some people. It's a very inexpensive exercise for an older patient population.

**Q. What are some exercises for balance?**

**Dr. Bello:** Balance is important, obviously, for fall prevention. That's so important for our older patients, especially for our patients with osteoporosis. There are things that you can do to try to get that balance. If you have guardrails, you can stand on one leg at a time and hold for 10 seconds at a time. That's a start to get your proprioception. Some people find that it's pretty hard, especially if you feel like your joints will give out on you. Sometimes I'll advance that to doing a stair and having them balance and hold the rail. Hold with one foot on a stair and then come back down. You can alternate feet and start getting a little more balance there. There are other exercises you can do while working with physical therapists.

**Q. What are some flexibility exercises patients can do?**

**Dr. Bello:** A lot of what we do with yoga and those types of things are the best programs. You get the stretch and, again, sometimes it's hard for people to get down on the ground. It can be challenging, but there's chair yoga available at a lot of senior centers. They work with different types of appliances. If you can't get down on your hands and knees, you can get some stretching done in a chair.

**Q. When should I work with a physical therapist?**

**Dr. Bello:** Listen to your body and stay positive, but if you need assistance with exercising a physical therapist can help. They can watch you and make sure you're doing exercises correctly. They'll also customize what is right for your problems and issues. If you can't do it on your own, you can start with physical therapy and go from there.

**Q. What are some signs you may need to visit a rheumatologist?**

**Dr. Bello:** Obviously, pain is going to be a factor. If you start noticing joint swelling or you feel a lot of warmth with pain in a joint, that is a big factor in determining if you have something going on. If your joint is unstable, if it feels like it's going to give out on you, it needs to be looked at as well.

**Next Steps**

Completing exercise programs when you have arthritis can bring some of your mobility back, improving your quality of life. Putting forth effort and sticking to low-impact exercises can feel very empowering for the patient who suffers from arthritis.

In the end, you will feel proud of yourself if you can walk from your car to the grocery store without looking for an assisted device. Feeling strong enough helps you psychologically, Dr. Bello says.

"My patients who exercise come in and they're so proud that they can walk in without a walker or cane," he says. "They tell me that they're feeling much stronger." ■

Visit [ibji.com/rheumatology](http://ibji.com/rheumatology) to learn more about our services and the conditions we treat.



MOVE BETTER AUTUMN 2022 15



# Great Fall Hikes:

## What to Know About Boots and Blisters



**Douglas Diekevers, DPM**  
Podiatric Surgeon



**Anand Vora, MD**  
Orthopedic Surgeon with Fellowship Training in Foot and Ankle Surgery

**Whether you're trekking miles across hilly terrain, making your way through a well-worn forest preserve path, or strolling along the sidewalks of your urban neighborhood, fall is a great time for a hike. To enjoy great fall hikes this season without pain or injuries, you'll want to make sure you're wearing the proper footwear to avoid blisters, twisted ankles, or other injuries.**

The American Podiatric Medical Association (APMA) has several recommendations for avoiding blisters, the first of which is buying proper-fitting shoes or boots. They suggest getting your feet measured so you know your true shoe size, and the best time of day to do that is in the afternoon because your feet tend to swell throughout the day. In addition, your feet can swell during physical activities or when temperatures climb.

14 AUTUMN 2022 MOVE BETTER

### Choosing your boot

To decide on what kind of boot to buy, **Anand Vora, MD**, an orthopedic surgeon with



**Choosing your boot**

To decide on what kind of boot to buy, **Anand Vora, MD**, an orthopedic surgeon with fellowship training in foot and ankle surgery, says you should know your foot and ankle.

“If you have had episodes of your ankle ‘giving way’ or chronic pain and discomfort of the ankle, a rigid high-top boot is the way to go,” Dr. Vora says. “The increased stability decreases the potential for injuries and the immobilization will reduce the likelihood of aggravating underlying arthritic or tendinitis conditions.”

A high-top boot will also provide maximal stability, especially if it has a rigid-sole design.

“The rigid sole is helpful for patients with pain in the middle or front of the foot, as this design often protects this part of the foot from increased stresses during hiking,” Dr. Vora states.

“If you feel confident in your ankle and like the ‘feel’ of the terrain under your foot, lower-profile semi-rigid shoes are the right option. The traction of newer technology footwear is often similar to many more rigid version boots but will require your ankle to work hard to maintain your leg balance.”



**Avoiding blisters**

To avoid blisters while hiking, **Douglas Dickevers, DPM**, an IBJI podiatric surgeon, cautions you to watch out for three things: friction, moisture, and pressure.

**Here are his tips for minimizing friction:**

1. Purchase shoe gear later in the day since feet tend to swell as the day progresses.
2. Break in your shoes before hiking.
3. Wear the socks you plan to hike in when purchasing your gear.
4. Make sure to buy a size that feels right. Don't go up or down in size unless the fit isn't right, and walk around the house in boots before venturing outside as unworn, ill-fitting gear can be returned for resizing.

**Here are his tips for minimizing moisture:**

1. Avoid cotton socks.
2. Wear wicking socks. They will pull moisture away from the skin.
3. Wear waterproof or water-resistant gear if in a wet environment (early morning dew can significantly soak shoe gear).
4. Waterproof boots also can cause increased perspiration.

**Here are his tips for addressing pressure:**

1. Boots/shoes should fit like your normal shoes. Don't go up or down in size unless the fit doesn't feel right.

2. If boots are too tight, break them in or buy a new pair. The same applies if they are too loose.
3. When purchasing gear, wear the socks you plan on hiking in to try boots on.
4. If you wear orthotics, place them in the shoes you're trying on.
5. If you have a tight spot or spot of pinch in an otherwise well-fitting boot, a trigger-point stretch can be done at the shoe repair shop.

**Wear the right shoe for the right terrain**

Keep in mind that running shoes are fine to wear for more well-groomed trails, hiking boots are preferred for advanced or un-groomed trails, and hiking shoes are preferred for more moderate trails.

If after all these tips you still get blisters from your footwear, the APMA says to refrain from popping them. They recommend applying a bandage or gauze to the affected area, avoiding whatever footwear caused the irritation, and making an appointment with a podiatrist if the area starts to smell or have discharge.

Now that you know about boots and blisters, you can enjoy getting outdoors for some great fall hikes! ■

Source: [https://www.apma.org/files/TPKAW\\_blisters\\_fact.pdf](https://www.apma.org/files/TPKAW_blisters_fact.pdf)

**Take great care of your feet this fall. Get to know our IBJI foot doctors and schedule an appointment.**



# Best Times for Scheduling Your Back or Shoulder Surgery

**When to schedule surgery is a typical question that doctors get.** Patients wonder how and when they need to alter their regularly scheduled lives. Work and activities will be altered, but for how long? And with the holidays coming up, when is the right time to schedule surgery in order to be back to normal?

In this article, two of our IBJI orthopedic surgeons shed light on the timelines for recovery from common back and shoulder surgeries to help you decide when to schedule.



## Spine Surgeries

**Gregory Brebach, MD**, is an orthopedic surgeon with fellowship training in spine surgery.

Common spine surgeries include microdiscectomy, decompressive lumbar laminectomy (DLL), decompressive lumbar laminectomy and fusion (DLL F&I), and anterior cervical discectomy and fusion (ACDF). Recovery times depend on

how many levels of the spine are involved.

"Discectomies are usually just one level, the other three common surgeries can be one or multiple levels," Dr. Brebach says.

What's encouraging to hear is that spine surgeries are often done in outpatient surgery centers.

"Discectomies, one- to two-level laminectomies, and one- to two-level ACDFs are usually outpatient surgeries in healthy patients," Dr. Brebach says. "Many surgeons are beginning to perform outpatient one-level DLL F&I as an outpatient as well."

When people think of spine surgery, they may envision a long recovery, but they are surprised to learn that many, if not most, approaches to these surgeries are minimally invasive.



**Gregory Brebach, MD**  
Orthopedic Surgeon with Fellowship  
Training in Spine Surgery

## Recovery Times

"Recovery from these surgeries is reasonably quick with a return to work within a week or two, depending upon work requirements," Dr. Brebach says. "For office work, it is a week or two, for the U.S. Department of Labor moderate to heavy work requirements, the recovery is four to eight weeks. For lumbar fusions, add a couple of weeks to a month or two."





**Rehabilitation**

Rehab is quite helpful for people returning to more demanding jobs as well as for those who are deconditioned or have preoperative weakness and neurological deficits, Dr. Brebach notes.

Rehab is usually twice a week for four to six weeks, more if necessary. Multiple-level lumbar fusions will require a hospital stay of a day or two and will be three or more level ACDF. The recovery can be slightly longer than the above. ACDF patients are often required to wear a cervical brace for a couple of weeks, so no driving is to be done while in the brace.

**When to Schedule**

Late October to mid-November should maximize the chances for a happy holiday season. Remember that without surgery, you're going to be in pain during the holidays. Today's surgical techniques have evolved to address your pain while decreasing recovery time.

**Back to Normal**

Your back-to-normal mobility will depend upon the surgery and your definition of functional, Dr. Brebach notes.

"For the outpatient surgeries, within a month or two; for the multi-level lumbar fusions, another month," he says. "Surgical or incisional pain improves quickly over the first few days to weeks."

"The preoperative pain should be much improved and is the goal of the surgery. It can take some time for those symptoms to resolve completely. Nerves have memory and behave differently depending on how long the symptoms have been present and how severe the preoperative symptoms are. If weakness is present that should improve with time and rehab."

Dr. Brebach tells patients that they'll forget about their successful surgery within a month or two, but they must maintain vigilance by not lifting too much too early.

"Patients need to refrain from overdoing it," he says. "It's a good idea to refrain from lifting more than 20 pounds for a couple of months to allow for appropriate healing. This is important to remember because often a patient feels remarkably better after their surgery and forgets that they recently had work done. Enhanced functionality from preoperative status is the goal."

**Rotator Cuff Surgery**



**Ryan E. Harold, MD**, is an orthopedic surgeon with fellowship training in shoulder & elbow, and hand surgery. He practices at the IBJI Doctors' Offices in Glenview, Bannockburn, and Morton Grove.

Dr. Harold says rotator cuff surgery is the most common shoulder surgery performed in the U.S. Recovery from rotator cuff surgery can be variable and dependent on the individual.

**Recovery Times**

"The recovery comes in phases and depends on the extent of surgery that they require," says Dr. Harold. "There are some people who have around a week of surgical pain. Other people can experience some



**Ryan E. Harold, MD**  
Orthopedic Surgeon with Fellowship Training In Shoulder & Elbow, And Hand Surgery

*Continued on next page*





*Continued from previous page*

discomfort for several weeks.”

Dr. Harold usually tells people they will be uncomfortable for one to two weeks and they will likely require some pain medication, but that it will taper over time.

“They can be on pain medication anywhere from one to two weeks and up to four to six weeks on the high end,” Dr. Harold says. “We always encourage patients to taper off narcotic pain medication as quickly as possible and then transition to over-the-counter medications. OTC medications are generally much safer, and in many studies they are more effective than narcotics.”

Keep in mind that if you’re scheduling surgery in the fall, you’ll be in a sling for six weeks.

Once surgical pain wears off, you can certainly be out and about — to the store, performing light desk work, and getting around safely — but you will need to keep the sling on.

“Some people have short-term disability and will take several weeks off because they are not in a rush,” Dr. Harold says.

Dr. Harold tells patients that they can usually get back to work in one to two weeks as long as there is no lifting involved with their job and they keep their sling on.

#### **Attending Events**

If a patient had a wedding to attend they could go as soon as a few weeks after surgery in a sling. However, to enjoy it more fully, ideally you’d want to schedule surgery at least three months before the event. You’d still need to be careful with your dance moves at that point, as your shoulder won’t be fully healed for another several months.

“You would need to be somewhat protective,” he says.

“To be out of a sling and dancing, you would need to be at least three months post-surgery. It’s an unpredictable environment — the lights are low, people are drinking, and people may fall. If it’s a really wild crowd, it wouldn’t be a bad idea to put a sling on to remind people you’ve had surgery recently.”

#### **Rehabilitation**

Recovery from rotator cuff surgery is a process that usually takes five to six months and a lot of work with physical therapy. You start with some simple home exercises two weeks after surgery. You then start formal physical therapy six weeks after surgery to begin lifting your arm on your own. From weeks six to 12, you shouldn’t do any resisted lifting with the shoulder.

“At 12 weeks out, physical therapy begins a new phase to start progressive strengthening, and there will be pulling and pushing exercises with just a few pounds initially,” Dr. Harold adds. “PT typically goes until five to six months after surgery.”

#### **When to Schedule**

The best time of year to schedule a rotator cuff repair can depend on your activities. Teachers can opt to do this surgery in the summer months. Golfers tend to prefer the winter months.

Accountants definitely wouldn’t schedule it during tax season. And for people with a lot of shoulder pain, the best time can sometimes be as soon as possible.

“Patients generally know what season is best for them,” Dr. Harold says. “It’s very individualized.” ■

**Visit [ibji.com](https://www.ibji.com) to learn more about specialized orthopedic surgeries.**

# IBJI CARES Foundation 3rd

# IBJI CARES Foundation 3rd Annual Charity Golf Outing and Silent Auction Fundraiser

On July 23, 2022, we raised over \$30,000 for the Northbrook-based Glenkirk organization through our IBJI CARES Foundation's 3rd Annual Charity Golf Outing and Silent Auction Fundraiser. More than 110 golfers showed up to tee off at the 18-hole course at Chevy Chase Country Club in Wheeling.

"Glenkirk is so grateful to be IBJI CARES Foundation's 2022 Charity Partner," Glenkirk CEO Kim Berenberg said. "The charity golf event was an incredible example of the important work IBJI CARES accomplishes in the community. Glenkirk was humbled to see so many volunteers and golfers come out in benefit of the individuals with developmental disabilities that we support."

Attendees included IBJI physicians, medical support staff, physical and occupational therapists, patients, friends, and family members. A dozen volunteers helped to make the event a success. ■



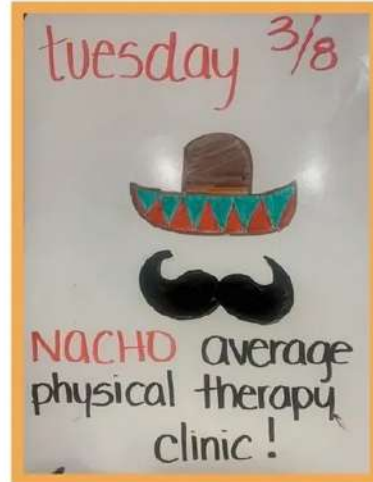
MOVE BETTER AUTUMN 2022 19

## IBJI Physical Therapists

# IBJI Physical Therapists Share Talent with Patients

At IBJI's Glenview Physical & Occupational Therapy clinic, two team members — John Boehmer and Mariah Flores — have put their artistic skills to good use on a whiteboard that features "Daily Chuckles."

John and Mariah have created a warm sense of community with their motivational images, and patients look forward to seeing the latest artistic renderings when they arrive for their rehab appointments! ■



# The Spirit of the Day

Illinois Bone & Joint Institute (IBJI) celebrates monthly Spirit Days to help create a positive work environment and promote fun and camaraderie! Even our patients have enjoyed seeing our monthly themes and are excited to see how everyone dresses up.

Physicians, physical and occupational therapists, front desk staff and many more of the IBJI team have enjoyed celebrating these days. Some of our team members go all out by dressing up and decorating their offices according to the theme. ■



MOVE BETTER AUTUMN 2022 21

## Hear from Our Patients

## Hear from Our Patients

IBJI appreciates our patients and the feedback they give, and we are honored to hear all of our patient-experience stories. If you have an experience you would like to share, please visit our website at [ibji.com/share-your-story](https://www.ibji.com/share-your-story). We welcome you to write a patient story, write a short feedback review on your doctor's profile page or submit a patient experience video. Thank you to everyone who has shared their experience with us. ■

**James Bresch, MD**

"Dr. Bresch is by far the greatest surgeon in the world. His skill far surpasses any other doctor!"

**Lou**

**Douglas Solway, DPM**

"Dr. Solway is one of the best Doctors I've had in a long time. Great bedside manner and he really knows his stuff. Thank you Dr. Solway for being a ROCK STAR!!!"

**Debbie**

**Ari Kaz, MD**

"Dr. Kaz is a great surgeon. He is extremely knowledgeable yet down-to-earth, and he is very kind yet direct. He set realistic expectations for a timeline to recovery. I am now 3.5 months out of surgery and have recovered well. I highly recommend working with Dr. Kaz if you need your foot or ankle looked at."

**Ian**

**Anuj S. Puppala, MD**

"Very happy with Dr. Puppala and all the staff at IBJI. Dr. Puppala did my total knee replacement surgery. He was very straightforward, took time to explain all the options and answer questions, so I was really able to make an informed and confident decision regarding my surgery. I never felt rushed at my visits and both he and his assistant, Megan, were great. My recovery is going well and I am getting stronger every day. Would highly recommend Dr. Puppala."

**Chris**

**Ritesh Shah, MD**

"Very professional, listening to the patient, discussing few options. I absolutely love the approach to my hip problems. I left IBJI very happy after the first visit. I got shot on my painful bursitis and I slept all night without the pain.... after 2 months!!! Thank you Dr. Shah and your PA Aidan. I started PT today. Thank you."

**Ewa**

**Jeremy Oryhon, MD**

"I went online and pre-registered before I arrived at the Kildeer location. I was called into the office on time, reviewed everything with Dr. Oryhon's nurse and within minutes he came in to see me. He had reviewed my chart and was ready to help me. I wanted to either get a pain reliever, cortisone shot, or schedule surgery to replace my knee since I was bone on bone on the inside of my left knee. Since I'm going on vacation and wanted to be able to have the best time walking around, I thought the shot was my best bet and he agreed and I was out of the office in the next 5 minutes with minimal pain from the shot after elevating and icing my knee. I have faith in him and will not hesitate to use him as my dr when the time comes to replace my knee."

**Carol**

**Jason Ghodasra, MD**

"Everyone In the office was very welcoming and professional. Dr. Ghodasra was so nice, very thorough and explained everything so that you can understand it. Very happy with my appointment!"

**Colleen**

**Josephine Mo, MD**

"Dr. Mo is the best. Has performed surgery on my wrist and thumb area with great success. Also can administer a cortisone shot with no pain."

**John**



# IBJI OrthoInform® PODCAST

*Where we talk all things  
Ortho to help you  
Move Better, Live Better.*



IBJI OrthoInform® is a podcast from Illinois Bone & Joint Institute designed with patients in mind.

Orthopedic physicians from IBJI explain what patients need to know about orthopedic conditions and treatments.

Available on all major podcast providers and our website at [ibji.com/podcast](https://ibji.com/podcast)



**Ortho on the go.**



## Prenatal & Postpartum Care



# Prenatal & Postpartum Care

IBJI Health Performance Institute offers wellness services



## STAY HEALTHY AND STRONG



Our team of professionals will design an integrative care program tailored to your specific needs.

**Prenatal Program:**

**Fit & Feeling Good** - 4 week prenatal program to help you stay strong and feel good through the use of pilates, massage, & personal training

**Postpartum Program:**

**Recover & Restore** - 4 week postpartum program to help you bounce back using pilates & myofacial massage

1919 Skokie Valley Rd.  
Highland Park, IL 60035

**224-765-5550**

Health Performance Institute



HEALTH  
PERFORMANCE  
INSTITUTE



ILLINOIS  
BONE & JOINT  
INSTITUTE®

Move better. Live better.