PODIATRY MANAGEMENT

Biomechanics and the Survival of Podiatry

BY BARRY H. BLOCK, DPM, JD

uch debate has occurred over the last four decades about the pros and cons of a degree change. Many fear that a change of degree would mean loss of our identity as podiatrists. What has been lost in all these discussions is a universally accepted understanding of exactly what gives podiatry its identity. In the 1960s, when our degree was changed to DPM, podiatry consisted of the basic elements: biomechanics, surgery, and medicine. Unfortunately, the education of



podiatric students in biomechanics has slowly eroded each year.

Podiatric students used to learn how to cast patients and actually make orthotics. While our residencies have increased from one to two to now three years, the minimal activity volume (MAV) for biomechanical cases has actually decreased. We are training reconstructive rearfoot surgeons while neglecting many of the biomechanical skills necessary to treat the typical patient that comes into a podiatry office.

All is not lost, however. The New York College of Podiatric Medicine (NYCPM) holds annual Richard Schuster, DPM seminars each fall. NYCPM recently hired Samantha Landau, DPM, its first modern fellow in orthopedics, as a clinical instructor. We hope other institutions will follow suit.

This special issue is devoted to biomechanics and orthotics. We encourage you to read the many practical articles on this essential topic. Biomechanics is a difficult subject to master, but improving your knowledge and skills in this area will benefit you and your patients. After all, it is part of the essence of what defines your identity.

Respectfully Submitted,

Barry H. Block, DPM, JD Editor-in-Chief

Barry H. Block O.P.M.

bblock@podiatrym.com

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Editor-in-Chief

Barry H. Block, DPM, JD

718-897-9700

Managing Editor

Hermine S. Block, MS

Desktop Publishing & Graphic Design

Stephanie Kloos Donoghue stephkloos@optonline.net

Senior Editor

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David Kagan Advertising

Associate Publisher 1062 E. Lancaster Ave. Rosemont Plaza, Ste. 15F Bryn Mawr, PA 19010 215-808-0770 (m)

Robert J. Snyder, DPM

Controller

610-645-6944 accounting@kanec.com

Joseph W. Mellek

Circulation

Susan Mease

PODIATRY MANAGEMENT

1062 E. Lancaster Ave. Rosemont Plaza, Ste. 15F Bryn Mawr, PA 19010 (610) 645-6940 FAX: (610) 645-6943

E-mail: podiatrym@kanec.com Website: podiatrym.com

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Send Manuscripts and Letters to: bblock@podiatrym.com

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