Adriana Strimbu, DPM, PA

News and Updates June 2022

About the Doctor

Dr. Adriana Strimbu, DPM

Broward County, Hallandale Beach, Florida Podiatrist | Foot Doctor

Born in Romania

- Education:
- Florida International University, Miami, FL
- Bachelors of Science, Biology
 Barry University School of Podiatric Medicine & Surgery 1996-2000 Doctor of Podiatric Medicine

Residency:

Cedars Medical Center 2000 - 2002

Work Experience:

- Private practice in Hallandale Beach, FL 2002 present
- Adjunct Clinical Instructor, Barry University School of Podiatry 2002-2012
 Backtonic Fil 2002
- Podiatrist for CHC in Miami, FL 2002-2014
 Redistrict for Holon Bentley Family
- Podiatrist for Helen Bentley Family Health Center, Miami, FL 2004-2007

Appointments:

- Chair of Public Affairs Committee for Florida Podiatric Medical Association 2018 - present
- President of Miami Dade County Podiatry Medical Association April 21, 2020 - present
- Vice President of Miami Dade County Podiatry Medical Association 2019 -April 20th, 2020
- Treasurer of the Miami Dade County Podiatry Medical Association 2017 -June 2019
- Adjunct Clinical Instructor for Barry University School of Podiatric Medicine 2002 - 2012
- Clinical laboratory Instructor, Barry University School of Podiatric Medicine 2002 - 2004

Professional Associations:

- Chair of Public Affairs Committee, Florida Podiatric Medical Association
- Member of Affinity Program, Florida Podiatric Medical Association
- Member of American Podiatric Medical
 Association
- Member of American Academy of Podiatric Practice Management
- Member of American College of Foot and Ankle Pediatrics
- President of Miami Dade County Podiatry Association

Family:

Dr. Strimbu is married, with 3 children, two girls, and one boy.

Keeping Summer Splashdowns Enjoyable

Swimming can be fun and refreshing; it's also a great total-body workout. But just because it's an exercise that takes weight off the feet and lower extremities doesn't mean you can take your foot and ankle health for granted while splashing away.

Competitive swimmers and those who swim for a workout sometimes deal with foot cramping due to excessive pointing of the toes. Tendonitis on the top of the foot and in the Achilles tendon may occur with all the kicking. Flip turns while swimming laps sometimes result in heel slams into the wall, bruising and pain, and possibly an ankle sprain.

Preventing these conditions includes gentle stretching of the feet and lower extremities before and after a workout. Proper hydration can diminish the risk of cramps interrupting your routine, and good technique will help reduce foot and ankle issues.

For casual, active, and competitive swimmers, staying in the pool too long makes skin more susceptible to cracking, opening the door to bacteria, funguses, and viruses. Take intermittent breaks and dry off the feet (between the toes, too) upon exiting the pool.

Bare feet don't mesh with wet pool decking or locker room floors. To help avoid falls and accompanying ankle sprains or fractures, concussions, traumatic brain injuries, and possible drowning, take it slow and wear slip-free, waterproof sandals; pool socks; or APMAapproved flip-flops.

Proper poolside footwear also offers a barrier against microorganisms that thrive in warm, moist environments and can spur conditions such as athlete's foot, toenail fungus, and plantar warts, among others.

If you experience lingering foot or ankle discomfort, contact our office to schedule a thorough examination.

When Morton's Neuroma Becomes Your Neuroma

Morton's neuroma is a small, benign mass of thickened nerve tissue in the ball of the foot, primarily between the third and fourth toes. Compression and irritation of the nerves produce tingling, numbness, and pain when that area bears weight — some describe the sensation like stepping on a pebble … every step. Swelling also adds to the occasion.

Women are nearly 10 times more susceptible to Morton's neuroma than men, with women in their 30s and 40s afflicted the most. The primary culprit is poorly fitting shoes such as high heels, which transfer weight to the front of the foot, spiking pressure in that region. Narrow, tight toe boxes put the squeeze on feet from the sides.

In addition to poorly fitting shoes, flat feet (overpronation) may contribute to Morton's neuroma. High arches, hammertoes, and bunions also create unnatural pressure on the ball of the foot. Repeated physical activity can do the trick, too. Examples include runners, tennis players, ballet dancers, and people whose jobs require them to stand on their feet all day. And we can't forget injuries.

In early stages, Morton's neuroma symptoms may be relieved temporarily by avoiding the offending activities or footwear, or even applying a quick foot massage. However, without treatment, the discomfort will get progressively worse.

Persistent discomfort warrants an appointment at our office. The earlier we see you, the greater chance conservative measures have of being successful.

Morton's neuroma treatments include eliminating ill-fitting shoes, activity modification, stretching exercises, taping and padding, orthotics, anti-inflammatory medications, and injection therapies. An exciting treatment option is extracorporeal pulse activation technology, although most insurances don't cover it yet. Surgery is a last resort to restore quality of life.

Mark Your Calendars

- **June 3** National Doughnut Day: Don't try eating a batting doughnut. A bit tough ... and heavy.
- June 6 D-Day: Normandy's Mont-Saint-Michel Abbey is France's second-most visited tourist site.
- June 14 Flag Day: There are six American flags planted on the moon.
- June 19 Father's Day: (Dad joke) Two fathers walked into a bar. The third one ducked.
- June 19 Juneteenth: On June 19, 1865, General Orders No. 3 freed those still enslaved in Texas.
- **June 21** Summer solstice: The Eiffel Tower grows 6 inches over summer (thermal expansion).
- June 27 Sunglasses Day: Look for a "UV 400" or "blocks 99–100% of UVA/UVB rays" label.

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Insurance List

AARP Medicare Complete AETNA Ambetter (coming soon) Amerigroup Better Health Blue Cross Blue Shield Bright Health CIGNA Community Care Plan DMERC (for diabetic shoes, braces and insoles) Health Kids Wellcare Humana Medicaid Medicare MOLINA Multiplan Private Health Care Plan / PHCP SIMPLY SOLIS Staywell Sunshine United Health Care United Health Care OneNet Workers Compensation Wellcare Workers Compensation Canadian Insurances with Prior Authorization

Please call us with any other information we are dedicated to your patient's health and want to help them get rid of their foot pain as soon as possible.

X-rays, Diagnostic Ultrasound and Circulation tests, Toenail fungus laser are available in the office.

We are DME Suppliers for diabetic shoes, braces and Insoles.

We Speak Romanian, Russian and Spanish.

Group NPI: 1992768741 Dr. Strimbu's NPI: 1346300183 UPIN: U90653





Mediterranean Inspiration for Father's Day Brunch

Here is a Mediterranean-inspired Father's Day brunch item that will hit the spot — and beats a new tie!

Ingredients

- 4 slices sourdough and chosen spread
- 1/2 Tbsp. extra-virgin olive oil
- 8–10 oz. baby plum tomatoes sliced into halves
- 4 large eggs
- 2 tsp. milk
- Red chili, sliced
- 2 oz. feta cheese (more if you like)
- 2 oz. chorizo slices
- Handful flat-leaf parsley roughly chopped
- Black pepper

Directions

- 1. Toast your sourdough and cover with your chosen spread.
- 2. Quickly fry the baby plum tomatoes in extra-virgin olive oil, scramble your eggs spiked with the fresh chili slices, and quickly crisp up the chorizo.
- 3. Load up the sourdough with the chili scrambled eggs, crumble the feta over top, and top with crispy chorizo. Serve with a side of fried baby plum tomatoes.
- 4. Sprinkle the whole lot with freshly chopped parsley and cracked black pepper.
- 5. Serve your brunch to a pleased father.

Note: As an alternative, you can go veggie and skip the chorizo, swap the chorizo for crispy bacon, or skip the chili if you don't like heat.

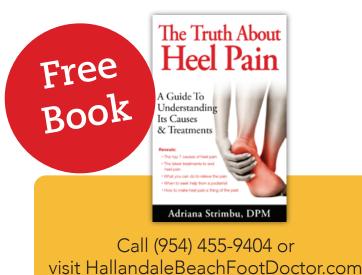
Recipe courtesy of www.morocco-gold.com.



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Tiptoeing Through the Early Years



Toe walking is a common occurrence with young children. Toe walkers literally walk on their tiptoes and balls of the feet; their heels never strike the ground. Conversely, they typically run in normal fashion.

Toe walkers generally don't feel any pain, and most outgrow it shortly after exiting their toddler years. Some might continue out of habit. If kids are still doing it past age 3, there are potential consequences — for instance, pain, stiffness, and tightening of the Achilles tendon; ankle stiffness; and a widening of the forefoot.

The origin of toe walking is frequently unknown ("idiopathic"). In roughly one-third of cases, there is a family history. Sometimes there is a physical cause, such as a short Achilles tendon or calf muscles. In a small percentage of cases, toe walking might be a sign of an underlying sensory, muscular, or neurological disorder.

If your child is toe walking past their third birthday, give our office a call. We'll ask you some questions, observe your child walking, and perform a physical exam that will include determining their range of motion and gauging their muscle tone.

Kids who appear to be toe walking out of habit and show no ill effects will likely not require treatment. They'll outgrow it eventually. If there is a physical issue, gentle stretching, special shoes, physical therapy, a leg brace or splint, and custom orthotics are among the treatment options. Surgery is the backup plan if conservative measures fall short.

If we suspect an underlying disorder outside the realm of podiatry, we will steer you in the right direction.