

Adriana Strimbu, DPM, PA

News and Updates March 2022

About the Doctor

Dr. Adriana Strimbu, DPM Broward County, Hallandale Beach,

Florida Podiatrist | Foot Doctor

Born in Romania

Education:

- Florida International University, Miami,
- 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
- Podiatrist for CHC in Miami, FL 2002-
- 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
- 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**

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



The Achilles tendon is the largest and strongest tendon in the body, connecting the calf muscle to the heel bone. It's pivotal in every step we take. Tearing it (partially or completely) could mean a heap of frustration ... and pain.

Upwards of 80 percent of Achilles tears occur while playing recreational sports, with basketball leading the way. Running, jumping, cutting, and quick starts and stops place tremendous pressure on the Achilles tendon. Overuse and "powering through" discomfort don't help matters either.

Although anyone can sustain an Achilles tear, weekend warriors from ages 30 to 50 are most vulnerable. The Achilles tendon tightens up as we get older, proper stretching is frequently neglected, and many players who don't play consistently try to go full bore immediately.

Achilles tears can be marked by a popping or snapping sound; pain and swelling in the heel area; a feeling of having been kicked in the calf; or inability to "push off" when walking.

Preventing Achilles tears is preferable to treating them:

- Daily stretching can keep your Achilles tendon flexible, even as you age.
- Strong calf muscles will aid your Achilles tendon. Do standing and seated calf raises each day.
- When increasing your workout length or intensity, do it gradually. Don't do too much, too soon.
- Vary your workouts. Mix in some low-impact workouts to give your Achilles tendons a break.
- Buy proper footwear! Good heel cushioning is a must.
- Don't ignore lingering heel pain. Put your workouts on pause and schedule an appointment with our office for a thorough evaluation and treatment. We can also assist you with a stretching/strengthening regimen and shoe selection.



Corns and calluses are formations of hardened, thickened skin that protect areas subjected to excessive friction or pressure. Unpleasant to look at and sometimes painful, at least they start with good intentions.

Friction is the driving force behind corns. Hard corns, the most familiar type, are small, round, and yellowish, with well-defined centers. Their stomping grounds are the side of the little toe and the tops of toes. (Soft corns are rubbery, whitish, look like an open sore, and form between toes. Seed corns are the runts of the corn litter and reside on the sole.)

Poorly fitted shoes are responsible for many corns, since they pump up the friction factor. Conditions such as hammertoes, claw foot, and bunions create extra friction points. Unnatural walking patterns are sometimes to blame too.

Pressure is the catalyst for calluses, which generally form at various spots on the underside of the foot/toes. Calluses cover larger areas than corns, have less-defined edges, sport that attractive pale-yellow color, and lack surface sensitivity.

Jobs that require a lot of standing, athletic activity that pounds the feet, frequent high-heels usage, and regularly walking barefoot can spur calluses.

If corns or calluses cause irritation, make sure your shoes fit well. Gel pad inserts may help, along with warm foot soaks followed by pumice stone treatments to gently remove dead skin cells.

Beware of over-the-counter remedies containing harsh chemicals (e.g., salicylic acid), which can damage healthy surrounding skin. People with diabetes or circulatory issues should never use them.

If corns or calluses are bothering you, schedule an appointment with our office. We can shave away thickened, dead skin with a surgical blade — quickly and painlessly — and effectively address the root cause of the problem.

Mark Your Calendars

- March 1 Mardi Gras: No corporate sponsorships are permitted on Mardi Gras floats.
- March 2 Ash Wednesday: Sundays are not included in the 40 days of Lent.
- March 13 Daylight Saving Time begins: Many blame DST for killing the drive-in movie biz.
- March 15 March Madness begins: Most titles: UCLA, 11 (men's); UConn, 11 (women's).
- March 17 St. Patrick's Day: Approximately one in 10,000 clovers are four-leaf clovers.
- **March 20** First day of spring: Vernal equinox ... 12 hours of daylight, 12 hours of darkness.
- March 31 National Crayon Day: Coloring books predate crayons (were used by painters).

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



Irish Pork Roast with Roasted Root Vegetables

Yield: 8 servings; Prep time: 40 min. (active), 1 hr. 40 min. (total)

In this easy one-pan dinner, boneless pork loin roast is cooked over a bed of carrots and parsnips for an allin-one dish that makes an impressive centerpiece for a holiday meal or Sunday dinner.

Ingredients

- 1½ pounds carrots, cut into 1-inch pieces
- 1½ pounds parsnips, peeled and cut into 1-inch pieces
- 3 tablespoons extra-virgin olive oil, divided
- 2 teaspoons fresh thyme leaves, divided
- 3/4 teaspoon salt, divided
- 3/4 teaspoon ground pepper, divided
- 2 pounds boneless pork loin roast, preferably free-range heritage pork
- 1 teaspoon honey
- 1 cup dry hard cider
- Favorite chutney or applesauce for serving (optional)

Directions

- 1. Preheat oven to 400 °F.
- 2. Toss carrots and parsnips in a large bowl with 2 tablespoons oil, 1 teaspoon thyme, and 1/4 teaspoon each salt and pepper. Spread evenly in a roasting pan. Rub pork with the remaining 1 tablespoon oil, and season with the remaining 1 teaspoon thyme and 1/2 teaspoon each salt and pepper. Place the pork, fat-side up, on top of the vegetables.
- 3. Roast, stirring the vegetables occasionally, until an instant-read thermometer inserted into the thickest part of the pork registers 145 °F, 50 to 65 minutes.
- 4. Transfer the pork to a clean cutting board. Tent with foil and let rest for 15 minutes. Transfer the vegetables to a large bowl and stir in honey.
- 5. Place the roasting pan over two burners on high heat. Add cider and cook, scraping up any browned bits, until reduced by half, 3 to 5 minutes.
- 6. Slice the pork and serve with the vegetables, sauce, and chutney or applesauce (if desired).

Recipe courtesy of www.eatingwell.com.



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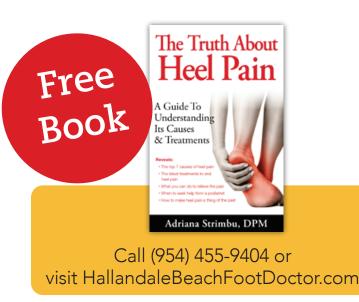












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Feet Can Be a Window to Overall Health

Some foot conditions aren't indicative of a foot problem, per se; some underlying general health conditions reveal clues of their existence via the feet.

For instance, some hair is typical on the top of the feet and toes, more so for men. If the hair disappears over time, there could be a reduction of blood flow to the feet. Peripheral arterial disease (PAD) restricts circulation in the arteries of the lower leg. If it's present there, it might exist elsewhere too.

Consistent numbness or tingling in the feet that lasts for more than a few minutes could point to peripheral neuropathy, diabetes, spinal stenosis, or a vitamin B12 deficiency.

Foot cramps can be more than a nuisance; they're painful! First, make sure you're drinking enough water each day — simple enough. However, cramps might occasionally be a sign of a nutritional deficiency or a circulatory, neurological, or thyroid issue.

If a foot sore isn't healing (or taking its sweet time), get it checked. Diabetes, skin cancer, or PAD or another circulatory condition might be at work.

Swelling of the feet may be a benign condition caused by pregnancy or improperly fitted footwear. But when swelling comes on suddenly, circulatory problems, congestive heart failure, or kidney disease may be the source.

Thyroid dysfunction can trigger a host of reactions in the feet: cold, itchy, dry (cracked), swollen, or stinky feet; foot cramps; and toenail changes.

Sunken toenails, or those with spoon-like indentations, may indicate chronic iron deficiency or anemia.

Changes in your feet or ankles should not be ignored. Contact our office for a thorough evaluation, diagnosis, treatment, and/or coordination with another specialist.