

THE COUNTRY WALKING GUIDE TO FOOTCARE

How to look after – and fix – your primary propulsion systems, and thus make walking a joy. Always.

Your feet are a machine that the greatest engineers in the world should envy. Containing a quarter of the body's bones and an intricate network of bones, tissue, muscles and nerves, they are among the most complex systems in the human anatomy. And we use them *all the time*.

They're generally fine with that; humans are built to move. But we need to give them all the support we possibly can.

As John Vonhof, author of the acclaimed book *Fixing Your Feet* puts it: "Your feet take a beating with every step. Don't wait until foot pain inhibits your speed, strength and style. Learn the basics of footcare *before* pain becomes a problem for you."

His book can give you the whole story, but here we've addressed some of the biggest issues faced by walkers, and how you can head them off before they start – and treat them if you fall foul of them.

3 SIMPLE STEPS



PHOTO: AGENCIA FREE / ALAMY

INSPECT

Once a week, inspect your feet thoroughly. Look for reddening, nails that need trimming, discoloured nails, cracks, dry skin or corns. Spotting these is the first step to preventing them causing problems on a walk. In particular, look for hot spots that can become blisters and treat them with Compeed or tape.

EXERCISE

The exercises you need will vary depending on your feet and any conditions they have. See below for some universal exercises that may stave off the worst problems.

REST

When they've done great things, reward them! If you've walked long distance, or over a number of days, give them a good 2-3 days' rest to recover. Heat packs, cold packs, foot oil, kinesiology tape and (best of all) a bit of professional massage are all great ways to say 'you did good, guys'.



PHOTO: ANDRES RODRIGUEZ / ALAMY

3 SIMPLE EXERCISES



PHOTO: ATSTOCKPHOTO / ALAMY

THE BOTTLE ROLL

Again sitting, spend five minutes rolling an ice-cold can or frozen water bottle under each foot to stimulate and strengthen the muscles and nerves through the sole.



PHOTO: TOM BAILEY

THE ANKLE ALPHABET

Sitting in a chair, write the alphabet on the floor with the toes of your left leg. Repeat with the right. A great way to strengthen your ankle.

THE WADDLE

Walk on your heels for five steps, then take five steps on tiptoes. Repeat for a few minutes, travelling forwards, backwards and sideways.



PHOTO: SHUTTERSTOCK

3 COMMON PROBLEMS



PHOTO: MEDICAL ART IN/ALAMY

PLANTAR FASCIITIS

The most common podiatric complaint suffered by walkers. An inflammation of the *plantar fascia*, a shock-absorbing ligament running along the bottom of the foot.

How to fight it: Reduce activity to allow the ligament to recover. There are many possible treatments including exercise, specialised footbeds, shoe adjustment, compression socks and even steroid injections; most sufferers agree that tackling it requires a combination of some of the above.

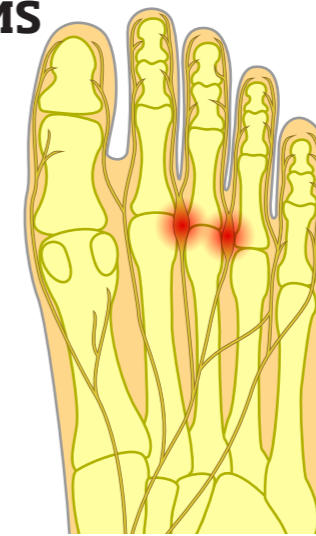


PHOTO: AKSANAKU/SHUTTERSTOCK

MORTON'S NEUROMA

Inflammation of the nerve tissue between the third and fourth toes, causing burning or tingling sensations, numbness or pain between toes, often likened to treading on a pebble. Can be caused by a shoe's toe-box being too tight, compressing the forefoot.

How to fight it: Ice, footwear with a wider toe-box, cushioned insoles, massage, metatarsal pads (shoeinsoles.co.uk/metatarsal-pads). Anti-inflammatory injections can help in more serious cases.



PHOTO: ROB3000/ALAMY

BUNION

An osteoarthritic lump on the inside of the big toe joint which forces the big toe inwards; sometimes the toe will be pushed under or over the second toe. Also causes a weakening of the arch.

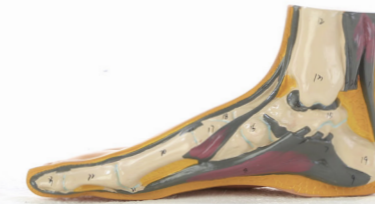
How to fight it: Wider-fitting footwear. Women with bunions commonly switch to men's-sized boots. Hanwag make wide-toed versions of many of their boots specifically to help with bunions. Orthotic inserts, splits, shields and supports can also help.

3 COMMON ARCH FORMS

The height of your arch should define the kind of insole you look for; see our guide over the page.



FLAT ARCH



NORMAL ARCH



HIGH ARCH

NEED MORE ADVICE?



A qualified chiropodist can do an in-depth assessment of your feet and their needs. If you're a regular walker, it's worth a consultation even before any particular pain has manifested. They can identify any problems your feet might be susceptible to and advise on

how to avoid them. They can also advise you on the type of footwear you should look for. Also try John Vonhof's book *Fixing Your Feet* (£14 on Amazon), which really is the go-to guide to footwear for walkers.

And check out fixmyfoot.co.uk, where podiatrist Michael O'Neill (left), spokesman for the College

of Podiatry, gives a great overview of common foot problems and advice on how to tackle them.

Turn over to find some feet-fixing solutions that can help you stride out in confidence...



HOW TO SAVE YOUR SOLES

The at-a-glance guide to common solutions to podiatric problems.

1 INSOLES

The average insole (AKA footbed) that comes pre-fitted into your footwear is usually a generic shape. Some are more sophisticated than others, such as those by Ortholite, found in certain ranges by Berghaus, Salomon and Keen, amongst others. But if you want something more tailored to your specific needs, consider replacing it with an 'external' insole. These come in a range of widths, shapes and thicknesses to meet different needs, but their aim is to a) cradle your foot, b) fill any surplus space inside the boot, minimising the risk of rubbing, and/or c) support your arches. Here are some common options.

OBOZ

Boot brand Oboz are so proud of their O-Fit footbeds (below) that they've released them as standalone purchases. Their Poron urethane pods provide support under the metatarsals and heels, and at £20, they are a bargain, if they fit you correctly. obozfootwear.com

SUPERFEET

Their hiking range is divided into three colour-coded insoles: Green (for high-volume footwear), Blue (low to medium volume footwear) and Black (low-volume footwear, and footwear whose insole is not removable). RRP £35.



They also offer the lightweight Carbon (above, £40), with enhanced shock absorption. superfeet.com

SOLE

Sole's range is divided into Thin, Medium and Thick, with each one sub-divided into Casual, Active and Performance. The Performance range (£48) is great for regular walkers as it includes a recycled cork base, polygiene odour control and a moisture-wicking topsheet. yourssole.com



ORTHOSOLE

Orthosole's footbeds are customisable, thanks to a range of swappable shock-absorbing pads included with each pair. Once you've chosen your footbed (Thin, Lite or Max Cushion), you then choose an insert: light, medium or firm. You can even use different inserts on each foot. Prices range from £35 to £40. orthosole.com



2 SPECIALIST BOOT FITTING

A good specialist outdoor shop should take at least a six-point foot measurement with a Brannock Device before trying to sell you some boots. But what if you need a more specialised fit? Certain stores offer specialist fitting where they will not only measure you super-accurately but also assess your posture and stride, then match you to a specific boot – and then adjust that boot so it's *perfect*.

The best example we know of for this service is **Whalley Warm & Dry**, based in the Lancashire village of Whalley (their service is so well loved, people visit from all over the country, especially as they're based at the foot of the Pennines – handy for great walks). Whalley's consultants take *ten* measurements to identify your foot length, volume and size, then match your feet to their range which includes seven different widths and shapes, plus half-sizes.

They can then use specialist machinery to personalise the fit of the boot – which is perfect for relieving pressure on problem areas.

They also work with **The Foot and Insole Specialist**, whose expert Graham Holgate can analyse your feet and hand-build custom insoles for you. The main fitting service is free; biomechanical assessment and custom-made insoles costs £160. See whalleyoutdoor.co.uk and footandinsolespecialist.co.uk, or call 01254 822220.



Podfo's remarkable orthotic insoles.

3 ORTHOTICS

Orthotics refers to more specialised footbeds created after clinical analysis with a podiatrist.

The pioneer in this market is **Podfo**, a company which has developed a biometric orthotic insole that is bespoke to your needs, in conjunction with a full podiatric assessment.

Through Podfo's website, you set up a consultation at one of its partner clinics around the UK. There you'll meet a clinician who carries out a complete assessment of your stance, posture, musculoskeletal structure and walking gait.

The clinician then creates

a 3D imprint of your feet and writes a prescription for a biometric insole that will correct any posture problems and smooth your walking gait. Both are sent to Podfo's HQ, where your bespoke insoles are created by laser printer and sent to the clinic. You then return for a second consultation, where you are given the insoles and guidance on how to get used to them. A six-week review period follows, during which adjustments can be made if needed, at no extra cost.

In theory the insoles should last a lifetime. Podfo says it has tested the design to the equivalent distance of 25 non-stop ultramarathons, with no discernible change, and the insoles are also washable, breathable and odour-free between washes.

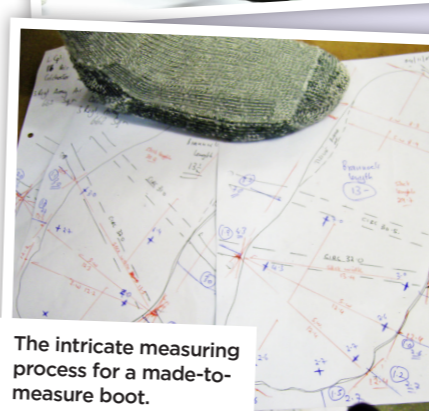
The cost is around £450, which sounds a lot – but when you



Podfo consultant Jamie Ollett creating a 3D imprint.

consider that it's a combination of two premium services – podiatric consultation and bespoke footbeds – it makes sense, especially if it permanently fixes a persistent and painful problem for you. Find out more at podfo.com

A consultation with Altberg's senior bootmaker.



The intricate measuring process for a made-to-measure boot.

4 MADE-TO-MEASURE BOOTS

This is the most specialist and expensive option: top-quality boots, hand-made to your specific foot measurements.

The only walking boot brand that has pioneered this in the UK is Yorkshire-based bootmaker **Altberg**, and it very much constitutes the company's last resort. Altberg's range already boasts the biggest choice of widths and fits on the UK boot market, and it also offers custom-fitted adjustment of its existing boots.

But if none of those options can solve the problem and you struggle with what Altberg defines as 'more extreme or unusual foot shapes and dimensions' (often resulting from serious injury), then a pair of made-to-measure boots may be the only viable answer.

It's a long process, taking around 20-24 weeks in 'normal'

circumstances, and involving between two and four consultations at Altberg's factory in Richmond, North Yorkshire.

It costs between £1200 and £1500 depending on the amount of work required.

There is also an option to buy the last (the mould based on your foot shape) so it stays in storage at the factory in case adjustment or a new pair is ever needed.

By contrast, Altberg's custom-fitting process, by which the bootmaker takes measurements of your foot and then adapts the closest-fitting boot from the existing range, might cost between £35 and £130 depending on the adjustment technique required (plus the cost of the actual boot, of course.)

Find out more at altberg.co.uk or call 01748 850615.

HOW I FIXED MY FEET

The ultimate casebook of *Country Walking* readers, their footcare issues - and the solutions they found.

WHEN WE ASKED about readers' pains in the podiatrics, we were overwhelmed by the replies. The vast majority concerned plantar fasciitis - but as you will see, everyone who has suffered from it seems to find their own ideal combination of solutions. But people also talked to us about Morton's neuroma, metatarsalgia, arthritis, toe joint issues and bunions, giving a huge range of expertise on how to identify these ailments - and beat them.

WIDE-FITTING BOOTS

Christina Lander, 60

THE PROBLEM:
PLANTAR FASCIITIS

What was it like and how did it affect your walking?

Extremely painful feet; usually started about five miles into a walk.

What did you try and what finally was the best solution?

I would have to stop and take off my boots or at least sit and rest my feet. And a foot bath after every walk. But then I tried wide-fitting boots and an extra size up to my usual, with good-quality walking socks. Totally cured, no problems after that!

Best advice?

Get your feet measured properly by an expert and make sure you get advice before buying boots. Also I always remove hard skin when necessary and apply foot moisturising cream to my feet every evening.



STRETCHING, RESTING AND THE RIGHT BOOTS

Carol Bianca, 63

THE PROBLEM:
PLANTAR FASCIITIS

What was it like and how did it affect your walking? I couldn't walk any distance. After resting it was agony to get going again.

What things did you try and what finally was the best solution?

Icing, rolling a ball on the bottom of my foot. Frozen water bottle on bottom of foot. Bought new shoes, slippers, trainers. I also did plenty of stretching of feet and calf muscles - I still do this. The best solution was the stretching and wearing the correct footwear,

including inserts. I also saw a podiatrist who was very helpful and taught me all about taping. But the biggest help was resting it for six weeks, which gave my foot a chance to heal. And my soft and supportive Merrell walking boots are my saviour.

Advice for someone with the same problem?

If it's plantar fasciitis, rest it for as long as you can. See a podiatrist and wear the correct footwear, with arch support. Make an exercise regime and stick to it.



SEE A PODIATRIST

Elaine Davenport, 52

THE PROBLEM:
PLANTAR FASCIITIS

How did it affect your walking?

Extremely painful. At worst it limited what shoes I could wear and meant I could only walk a couple of miles.

What did you try and what finally was the best solution?

I have worn off-the-shelf insoles for years but despite this had a really bad phase of plantar fasciitis last year. I went to a podiatrist who did a full gait analysis. Turns out I have hypermobile joints and shallow feet with a narrow heel. He made me custom orthotics which have been adjusted twice in the last ten months. It continues to be a problem but it is much better. But I can now walk six to ten miles in a day, with help from ibuprofen gel and physio tape. My first podiatrist visit was at the time when CW had a feature on



foot problems so I knew the cost of my package of care (£450) was about standard.

Best advice?

See a podiatrist. And speak to your employer, especially if you are on your feet all day. There needs to be a culture shift around footcare in the workplace. My employer reluctantly allows us to wear plain black trainers but I think they would prefer I wore black heels or court shoes, which won't help my condition at all.

STRETCHES, INSOLES & SWIMMING

Ruth Taylor, 56

THE PROBLEM:
PLANTAR FASCIITIS

What was it like and how did it affect your walking?

I had it in both feet for nearly two years and at times the pain was unbearable - like sharp shooting pains in my heels. It stopped me doing long distances - but never stopped me walking altogether.

What things did you try and what finally was the best solution?



I tried all sorts of things including stretching, compression socks, various insoles, a foam roller, rolling a golf ball and of course painkillers. I must have spent over £100 on insoles alone! I think the thing that worked best was a combination of stretches and the correct insoles. I swim five mornings a week and made a point of flexing my heels in the pool to stretch my calf muscles. I still do this. I finally got a great pair of insoles fitted in a shop called Shuropody [based in Coventry, shuropody.com] which supported my instep as I've got flat feet, apparently. Also my latest boots are Merrells, which have a high instep. In the end, thankfully, it just got better.

Advice for someone with the same problem?

Keep trying all the different options as everyone is different and what works for one person might not for another.



SHOES FOR EVERY ACTIVITY. AND TURMERIC

Katie Coleman, 39

THE PROBLEM:
PLANTAR FASCIITIS

How did it affect you?

I injured my feet walking around Dollywood (the Dolly Parton theme park!) in some flat sandals with my son for his 13th birthday. By the end of the day, my feet were swollen and tender. After that, my feet would hurt from the moment they touched the ground every morning. I had searing pain from my heel to my arches. Every step felt like a decision - do I actually care enough about this step to deal with the pain? One of the best things to do is rest but I have six kids and the rest of my body loves and craves movement.

What things did you try and what finally was the best solution?

Compression socks seemed to help them not get worse. I used ibuprofen. I iced them after walks. The two things that ultimately seemed to help most were: 1) I started eating anti-inflammatory foods (lots of colourful fruit and veg) and I took a turmeric supplement daily. 2) I got supportive footwear for every occasion and *always* wear shoes: house shoes for washing the dishes, Keens for out and about.

Best advice?

Plantar fasciitis is not supposed to be a lifetime ailment; you *can* recover! Take care of your whole body and not only will your feet feel better, but the rest of you will too.

MASSAGE MAGIC

Nicki Spilman, 64

THE PROBLEM:
PLANTAR FASCIITIS

What was it like and how did it affect your walking?

Incredibly painful, especially first thing in the morning or after resting whilst walking. Sharp pains in the foot that made me not want to put it to the floor!

What things did you try and what finally was the best solution?

Tried stretches, rolling a golf ball or a frozen water bottle with the base of my foot, anti-inflammatory gels and insoles, to no avail. Eventually someone suggested a sports massage focusing on the calf muscles, and boy was that an eye opener! As my calves were being massaged I was on the ceiling with pain but it worked



from that very first session. After four weekly massages it was all but gone and monthly massages have kept it at bay. But I still use the insoles on long walks.

Advice for someone with the same problem?

Keep trying different things and stick at it. and once the plantar fasciitis is gone don't forget to keep doing the stretches to prevent it coming back.

WALKING BAREFOOT FIXED ME!

Hazel Kerrison, 32

THE PROBLEM:
PLANTAR FASCIITIS

How did it affect you?

I was getting injections every few months in my feet to help with the pain. The doctor believed my work boots were causing it and gave me all sorts of exercises and insoles, but nothing helped. I would struggle on and still walk (and run) but I'd be limping and very slow.

What things did you try and what finally was the best solution?

Insoles, exercises, podiatrist, painkillers, injections. But they didn't help in the long term. The answer will sound crazy: last year I took on a challenge of running a marathon barefoot – and everything changed. The doctor advised against not



wearing shoes but I thought, "Well I'm going to be in pain anyway", and I'm stubborn so I went ahead. I did lots of research into barefoot walking and how it makes your feet move in a more natural way. I started small, with walking barefoot and foot strengthening activities, and built up to running. And I've had no plantar issues since. The doctor refuses to accept that the barefooting cured it, but I definitely hadn't changed anything else. It could be a coincidence, I know, and it may not be the answer for a lot of other people, so please be cautious about it. But I really do think that altering my feet to move in a more natural way is what fixed it.

Best advice?

I feel odd advising people to try what I did as I know doctors would disagree. I just want to explain my experience, and the research I've done. Another knock-on is that I'm taking such better care of my feet now. I do specific foot and calf stretches (a lot of foot issues start in the calf) and strength work. I make sure any shoes I wear fit properly and are well made, not cheapies. I take care of any pains or odd feelings in my feet straight away. So look after your feet even when they are well, that's my message.

HANWAG BOOTS AND CO-CODAMOL

Denise Reynolds, 63

THE PROBLEM: ARTHRITIS
IN TOES AND INSTEP

What was it like and how did it affect your walking?

Really hurt after about five miles.

What things did you try and what finally was the best solution?

I bought Hanwag bunion boots which have a bigger toe-box. I also take two co-codamol at start of a walk and after four or five hours if the walk is ongoing or to make the drive home bearable. My podiatrist advised me that the benefits of walking outweigh any negative

connotations of taking co-codamol. Now I'm able to manage seven or eight miles, although that's my limit even with pain relief. The boots made a big difference and I use a lacing pattern recommended for bunions. I also miss the holes where my instep is raised due to the arthritis.

Best advice?

Don't give up. See a good podiatrist. Use pain relief if you need it.



ROLL A BEER CAN (AND THEN DRINK THE BEER!)

Jon Bridgland, 68

THE PROBLEM:
PLANTAR FASCIITIS

What was it like and how did it affect your walking?

Really painful in my foot arch and heel. It stopped me walking all through last winter.

What things did you try and what finally was the best solution?

Regular foot stretches. Grab the toes and pull up and back repeatedly. Use outstretched arms to lean against a wall, door etc and putting one foot forward and bent, stretch the other leg straight. Really pulls the tendon in the leg which causes the problem. Finally my favourite: roll a beer or other can repeatedly under the arch of the foot. When fed up with waiting for condition to get better, drink beer in can! There's also a great book that was recommended by the Outside shop in Hathersage called *Fixing your Feet* by John Vohnhof, full of good advice.

Advice for someone with the same problem?

Be patient and do the exercises diligently. It will pass. Get some good insoles to replace the standard ones in your walking boots/shoes. Try and avoid long periods in flat-bottomed shoes.

CARE FOR YOUR FEET LIKE THEY'RE A LOVED ONE

Ann Grundy, 67

THE PROBLEMS:
MORTON'S NEUROMA
AND METATARSALGIA

How did they affect you?

Extremely painful and debilitating. It took a long while for me to decide to seek clinical advice as I just thought it would go away. It caused me to walk with a limp, do fewer miles and not as often.

What did you try and what was the best solution?

I tried everything: walking fewer miles, buying wider shoes, insoles and cushioning things. I soaked my feet in Epsom salts. I drank gin. In the end, the best solution was a steroid injection between the bottom of my toes.

Best advice?

Try wider shoes and insoles, but don't be afraid to seek clinical advice much earlier than I did, or be frightened of the injections. I simply thought nice thoughts and it was over with very quickly. I was stubborn and ignored the problems, thinking they would go away in time. I didn't realise what I had and carried on regardless, making the symptoms much worse and harder to treat. Seek help sooner rather than later. Care for your feet like a loved one. Listen to them, nurture them and love them!



SOME TAPE AND A BALL

Sara Unsworth, 45

THE PROBLEM:
PLANTAR FASCIITIS

How did it affect your walking?

Painful; I had to reduce my walking miles from 17 to six! Limping getting out of bed in the morning, and hobbling home from a walk. Made me feel sad I couldn't continue with my hobby.

What did you try and what finally was the best solution?

Tried elasticated foot supports, strapping up my foot with kinetic tape, foot balls, insoles and

massage. Best solution was the tape for support whilst walking, gradually increasing the miles and a foot ball to knead the foot. A cold glass or a frozen bottle of water does the job too!

Best advice?

Reduce your miles, roll your foot with a ball daily and ensure you have supportive shoes. And love your feet: they're amazing and take you to awesome places!



SURGERY FAILED, ORTHOTICS WON

Alison Burns, 60

THE PROBLEM:
MORTON'S NEUROMA

How did it affect your walking?

The pain increased over a period of years until it reached the point where I had to significantly curtail my walking. Following unsuccessful surgery in 2004 to resolve it, I couldn't walk properly for about six months and I pretty much gave up walking as a hobby for about two years. I missed it so much I realised I had to find a non-surgical solution.

What did you try and what finally was the best solution?

The unsuccessful surgery resulted in 'stump neuroma' where the nerve had been cut. The only option to resolve this was further surgery, which I declined as there was no guarantee it would sort it. Because the nerve has been cut, sensations in my foot are permanently affected. It feels a bit like pins and needles. I eventually worked out through trial and error that to minimise the pain I can only wear flat, broad footwear, and that Salomon boots work best for me. They are good and wide, but I had to go up two sizes from my usual shoe size. I also have orthotics custom-made by a podiatrist who suffers from this condition too. My GP is sympathetic to my reluctance



for further surgery and has prescribed a low dose of a drug for nerve pain (gabapentin), which I can top up with ibuprofen if necessary.

What's the situation now?

In the last few years I have probably walked more than ever. I completed #walk1000miles in 2018 and 2019. I have completed the Moonwalk three times, and climbed Ben Nevis and Snowdon. I lead occasional walks for two walking groups. Probably the most significant thing is that I have accepted that this pain is not going to go away. I have to manage it using the tools available: footwear, orthotics and medication. I want to walk, so I have learned how to manage it.

Advice for someone suffering with the same problem?

Don't rush into surgery, explore all the other options too. You may need to accept that the pain is here to stay and it's how you manage it that's the key. CW