

announcer: [00:00](#) Welcome to a Teaspoon of Healing where we explore the pathways to wellness and vibrant living. Listen to personal stories of healing and interviews with experts. It's time to open a doorway to healing in your life through positive changes. Here's your host, Dawn DiMare Hi,

Dawn: [00:17](#) I'm Dawn DiMare and you're listening to a teaspoon of Ealing. This is episode seven of the podcast and it's the beginning of 2018 and a lot of you are probably planning to start a new exercise programs. Restart an exercise program that you may have let go to the wayside over the holidays. I know I did, or you might just be continuing a program. Well, if you are, you may have questions about how to keep your feet and ankles healthy, especially if you're running or doing triathlons or any activities like that. Most of the day we have a guest Dr Michael Coyer is a foot and ankle surgeon, Dr if podiatry based in Orange County, California, and he's going to talk about his background and as well he's going to talk about, but an ankle health right kind of shoes to wear, things you should avoid and common injuries, so stay tuned for that.

Dawn: [01:17](#) I actually have some experience with this myself about this time last year. I'm a pretty avid runner and I was running on the beach and I live by the beach, which is very convenient for running, but it's really best to do it at low tide because it's very flat, so unfortunately I was running when it was not low tide and it was on an incline which is really not good for your feet and just did something wrong and twisted my ankle and I couldn't run or at least eight weeks. It was a very minor sprain and it was amazing to notice what I couldn't do and I really felt so grateful once I was able to run or even walk again. It's so amazing what we take for granted, so this year I'm going to take Dr Coyer's advice and choose the right shoes, the right surface to run on and follow the tips that he will tell us all about.

Dawn: [02:18](#) In this episode is episode. He also talks about career changing. He was a former police officer who went back to school medical school when he was a little bit older, so for any of you out there who have thought about doing a career change, well this is for you. It's not easy to do, but it's very rewarding and I was very inspired by my chat with Dr. Coyer, so stay tuned for that. If you have any questions for me, you can email me. Dawn@teaspoonofhealing.com. I'm going to be featuring some listener questions in upcoming episodes and you can also visit my website, teaspoonofhealing.com to read my blog, download transcripts or read show notes. So talk to our guests now

Speaker 3: [03:00](#) Dr. Michael, clear

announcer: [03:02](#) This podcast is for informational purposes only and does not constitute medical advice. Please consult a physician or other health professional before undertaking changes in lifestyle or wellness habits. The author claims no responsibility to any person or entity for any liability, loss or damage caused or alleged to be caused directly or indirectly as a result of use, application or interpretation of the information presented here in

Dawn: [03:21](#) and before we get into our interview. Let's hear from one of our sponsors golf tours.

announcer: [03:28](#) Hi, this is Goff, owner of Goff tours, specializing in standup paddle boarding or surfing lessons. I even do snorkeling. You can reach me here. Orange County has what you're looking for. You can contact me via at gofftours@Gmail.com or mobile number is nine. Four, nine, three, three, eight, five, nine, three, seven. Golftours.com.

Dawn: [03:57](#) Hi, I'm Dawn DiMare you're listening to a teaspoon of healing today. We have a guest with us, Michael Coyer. He's a doctor of podiatric medicine, but in ankle surgeon based in Orange County, California. Hi. Mike.

Dr. Coyer: [04:11](#) Hi Dawn How are you?

Dawn: [04:11](#) I'm good. How are you doing?

Dr. Coyer: [04:13](#) I'm doing great. Thanks for having me on your podcast.

Dawn: [04:15](#) Thank you for joining me on a teaspoon of healing so mike could tell your listeners a little bit about your background. I know a little bit about it and I know you came from law enforcement background and you switched to becoming a foot and ankle surgeon and a doctor of podiatric medicine. Tell our listeners about your law enforcement background a little bit and how you made the transition into medicine.

Speaker 5: [04:41](#) I was originally, or I'm originally from Michigan, which is a great place to be from when you live in Orange County for no other reason than the weather and I had a good opportunity to life experience where I was employed for a sheriff department from the teller he grew up in. I started out as a deputy sheriff and then ultimately progressed to becoming a lieutenant for the police agency that I worked with and it was one of those careers that's, as you can see just from listening and watching the news today. It's a pretty tough tax and career and the guys that are

out there today. So it was something that I was. I was glad to be a part of. At the time, but, but as the years progressed I of found myself looking for something that was maybe a little bit different, maybe a little less stressful, maybe a little less dangerous, and ultimately kind of decided to make a transition out of the law enforcement field.

Dawn: [05:35](#) Okay. And have you always been interested in medicine? Did you ever have an interest in it growing up or was it just something you came into being interested in while you were a law enforcement?

Dr. Coyer: [05:46](#) That's a great question. Actually, when I was a little kid I was always going to be an eye doctor, so from some crazy twists and turns that life took me in and put the wrong end and uh, never, never really pursued that, but ended up a foot and ankle surgeons. So maybe I was just misdirected, but I think I wound up in the right place. So it was something that as my career was in my law enforcement career was, was kind of moving forward and it was pretty rewarding, but as it moved forward, it wasn't something that I had really given a lot of thoughts to, um, to become a doctor. It's not like an average everyday run of the mill thing that I really saw as an option. But fortunately one of my, one of my very good friends in the town that I lived and worked and grew up in was actually a foot and ankle surgeons.

Dr. Coyer: [06:30](#) So through our friendship I kind of learned more and more what the role of a foot and ankle surgeon was in, in today's patient care. And ultimately kind of saw that as a good opportunity for me to transition from law enforcement and still have an opportunity to, um, make a difference in people's lives and kind of help people when they were looking for somebody to help them with something that they were otherwise unable. And that that exposure gave me an ability to, to kind of see that transition as a, a realistic option at least at the time. And where did you go to school or medicine and why did you do your residency? Okay. Yes. So originally I went to, um, I did my undergraduate college in Michigan where I was from. And then my focus at that time was in law enforcement, obviously criminal justice and, and ultimately in law enforcement.

Speaker 5: [07:26](#) Um, when I made the decision to transition into medicine, I had to go back and take all the science classes that are required for, for the, uh, the medical college admissions test, which is the Mkat, for, for any of the listeners that may or may not be familiar with it. And then after meeting the undergraduate requirements for prescreening, I then went to Kent State, which is kind of in the Cleveland, Ohio area. Spent four years of professional school at

Kent State to obtained my medical degree and then did a, um, three year surgical residency at the Cleveland Clinic, which by name as in Cleveland, Ohio. So great place to work and train. And I was fortunate enough to learn from some of the and make friends with some of the best physicians in the world in specialties from rheumatology, infectious disease, emergency medicine, orthopedic surgery and foot and ankle surgery. I mean, you know, any, any specialty you can think of, it was just an amazing opportunity and I'm pretty humbling to be able to work with some of the world's best doctors. And you know, the downside, just like anything else, there's an upside and a downside. The upside, it was just an amazing experience and I got to meet some just unmatched on just amazing people. But you have to deal with the weather, of course. Which includes Oakland is, is about, is polar opposite of orange as you could ever imagine if you've never been there.

- Speaker 3: [08:58](#) I haven't, but I haven't been to. Michigan can get pretty cold there. So
- Speaker 5: [09:04](#) just a little trivia for any of these Cleveland fans out there. First of all, it's the only city I think that actually had the river burned twice due to pollution, but I think they've cleaned that up not to bash and Cleveland of course it is home with the calves, so they're, they seem to be doing pretty well and at some point maybe the Indians will win the world series, but that's about where it ends. I think I found paradise here in Orange County and I'm never leaving.
- Speaker 3: [09:27](#) When did you decide to move to Orange County did? Was it because of a job or did you do any schooling out here as well?
- Speaker 5: [09:33](#) So that's a great question. I guess everything has an interesting story. So basically what happened is as I was completing my residency, I was looking for locations that I thought I might be willing to live and work knowing that kind of the world could be my playground. I can just throw the dart at the map and kind of see where it landed. So admittedly I. What I did, the reason I came out here was for the job when I first saw the job advertised. So it sounded like the perfect job, it was basically reconstruct her foot and ankle surgery, sports medicine, being an athlete and a triathlete. I thought it was a great opportunity, like to be in a place where, where that would be the practice that I could have and the conditions I would focus on. But when I saw it, I actually admittedly skipped it because I had no idea where Irvine, California was then and I kinda like went down the list and was looking at some of the other jobs and just kinda

came back to the time and you know, I don't know where that is, but it sounds like a great job.

Dr. Coyer: [10:32](#) So I looked it up and it was southern California and I really never spent any time in southern California. So I can add, you know, you know, maybe it's going to be more like Los Angeles, big city and as they can maybe if it was northern California I'd be interested. Well, so I looked it up in. I think that the tipping point was was if you look on wikipedia for Irvine, there's a line on there that said and snow is non existent and I think when I read that line and knew you had me read, decided that maybe it was a good thing to check into a little bit further. As it turns out, snow is nonexistent. So I think it was a good choice.

Dawn: [11:09](#) That's true. Snow is nonexistent. So I wanted to go back a little bit to your experience in school for career changers. I'm also a career changer so I noticed like taking the science prereqs and I'm not going to medical school and I'm not going to be doing something related, but how was that being an adult? Balancing family or work or whatever else you had to do and being back in school with people raging in a ranging in age from 18 to 70. So there's runs the gamut but a lot of people are very young. So what was it like going back to school and do you have any tips for managing them? Managing the studies for somebody who is a career changer

Dr. Coyer: [11:50](#) to kind of start at the very basement of, of going back. So I decided that, you know, maybe it was time for me to start thinking about transitioning out of law enforcement and part of that was obviously having to go back and start the undergraduate part of things all over again in a science field that I had had very little exposure to when I first went to undergraduate college following high school. So I think initially the thought process was, you know, okay, can I do this or not, you know, and I think it's like anything else, we get comfortable with it or you're in a professional career where things are going well and I think we get comfortable with that. And I think as humans we tend to kind of fear change a little bit and we get comfortable with our surroundings and we know what works for us.

Dr. Coyer: [12:36](#) We know how to navigate our daily lives, whether it's professionally or home life or whatever. So initially I think kind of a little bit of fear, you know, I'm going to decide to do this is step one and I think we spent too much time thinking about starting things as people were. I think sometimes we just have to make a decision that we're going to try something and move forward that's different than what we're doing. You know, you'll

hear people say the definition of insanity is to do the same thing over and over and expect her to be a difference. So I think we spent a lot of time spinning our wheels and never really take the steps ready to transition into something new or succeed in something that we otherwise have never tried. So originally I think there's that little bit of like unknown, you know, all right, I decided to do this, but can I?

Dr. Coyer: [13:20](#)

So I remember my first chemistry and physics classes and thinking, oh my gosh, I haven't been in school in 100 years, you know, can I do this? And then I, I just thought, well, you know, what, I think I can do this and I'm gonna, you know, I believe in myself, so I'm going to make that decision that I'm just going to move forward. And I mean at that point, you know, initially there's not a lot at stake, you know, you're out a little bit of your time and there's certainly the costs of, of, you know, going back and paying for an undergraduate education. I thought it was kind of a calculated risk. What was the worst thing could happen if you fail, you know, you tried get up again or you don't, but at least then, you know. So. So initially I think there's that little bit of kind of fear.

Dr. Coyer: [14:00](#)

And then I got there and kind of found out that there's a little bit of a transition period just like anything else where you, um, kind of get acclimated and then you realize that, oh yeah, you know, I can do this. And you kind of start to just keep grinding away and build confidence. And then the next thing you know, you're through your undergraduate studies and teed up and ready to propel yourself forward to the next step. So it was kind of like a three, three stage or like a 10 year plan for me to do it actually to kind of transition fully out of law enforcement and then fully into being an attending physician. Took me about close to 10 years. So the first phase was just kind of the undergraduate, you know, the big leap was, okay, now I've done this part and now I'm accepted, you know, I'm going to medical school.

Dr. Coyer: [14:44](#)

So now I'm accepted and I think the big leap is okay, now I have to quit a job that I've had for 15 years with benefits and a retirement and a good pay and like some prestige because I believe I can do this. That I think is where the line gets drawn in the sand for people. I knew I wasn't going to be happy if I stayed in law enforcement. People in law enforcement. I have great friends in law enforcement, you know, they're taking it on the shops nowadays, but respectable in a respectful profession and I'll always be glad I had that experience. I'll always carry that with me and I'll always be that cop at heart in some ways, but I am glad that, you know, they can have it. It's gotten way too

hard out there. I give everybody credit because 15 years was enough for me. Then I decided that I was going to, uh, to leave and, you know, quit that and then it was, it was all or nothing, you know, I just quit. This is pretty good job under the auspices that no matter what happened, I, I was going to be able to do this. So failure really at that point wasn't an option. I, there's just a lot of work.

Dawn: [15:47](#) Thank you Michael for sharing your experience with career changing and that's an amazing career change from a police officer to a foot and ankle surgeon. Cheers to you. And I hope that inspired people out there. Well, let's take a little break and we'll be right back with Dr Michael Coyer to talk about foot and ankle health on a teaspoon of healing. Hi, I'm dawn tomorrow and you're listening to a teaspoon of healing or back with Dr. Michael Coyer, doctor of podiatric medicine ankle surgeon based in Orange County, California. So now let's talk about but an ankle medicine bariatric medicine. So you are a foot and ankle surgeon, Dr. podiatric medicine. And you said that you specialize in sports medicine and sports injuries.

Dr. Coyer: [17:03](#) Our practice is based here in Orange County, which is. It's a pretty active population. We have so much sun and we really don't have a winter so we're. We're pretty active, kind of athletic, sporting based population just really year round. So yeah, our focus is really to to treat the athlete, you know, whether it's the weekend warrior, high school, College, or even up to the professional levels. Anything to do with really the. If it involves surgery of the foot and ankle, that's what we do.

Dawn: [17:32](#) So what are the top conditions, maybe the top five conditions that athletes or weekend warriors or anybody coming to your practice will experience

Dr. Coyer: [17:42](#) with the athletic population. A lot of what we see in athletes, whether it's the casual athlete or or somebody who's kind of a more structured athlete, are related to overuse type injuries. So you know the weekend warrior here, people you can get on Google any day of the week, googled triathlon or Google five k race or google, you know, soccer or badminton picket, whatever, surfing from the couch to whatever. So we see a lot of overuse injuries where you get off the couch and next thing you know you're, you're out running or biking or whatever it is you're going to do and you get an overuse injury. So common things that we see. Plantar fasciitis is a big one. Heel pain, which is generally like some type of healer, arch pain, Achilles tendon injuries, no tendinitis ruptures, other tendon pathologies. We

see pretty commonly. Ankle sprains are probably one of the most common injuries that we'll see in the athletic population.

Dr. Coyer: [18:43](#)

You know, whether it's from basketball to soccer to runners, these are injuries that quite oftentimes, if they're not neglected, we can treat them pretty easily as long as you know in the hands of the right Dr we can treat them pretty easily, get people back to their feedback, to their activities and back to their desired lifestyle's pretty quickly. Unfortunately oftentimes some of these things, while easily treatable, they can get a reputation as maybe becoming too easily ignored and by the time they get to me, they kind of neglected something or it's worse than to the point where something a little more significant is required. So any of these sporting type injuries, it's never a bad idea in to go in and see somebody you know fairly quickly after the injury happens. If for no other reason than you know you're in good hands, you know you're properly evaluated, you know that it's nothing more serious than than what you believe it is.

Dr. Coyer: [19:42](#)

You know that she can move past it and stay active that much sooner. The more active we are as a population now and as we age and stay active, we're able to continue that well into our later years. So by addressing problems early in age, avoid problems down the line. It's it, it's similar to smoking, you know, smoking is probably the worst thing you can do to yourself. Um, if you're 20 years old and you smoke now, you're probably not going to bother you until you're 70, but when you know, when you're 70, it's kinda too late to go back and unsmoked all those cigarettes. So, but you know, whether it's a knee, hip, elbow, shoulder, whatever, an ounce, an ounce of prevention is always better than neglecting it and having problems down the road that she wished she could have fixed earlier.

Dawn: [20:26](#)

Really good point. And I suffered an ankle sprain and I did get it checked out and it was so minor, but it really can derail you. I wasn't able to run for eight weeks. And again, I'm not an athlete, I'm just a weekend warrior. Some run for, you know, to stay fit and not be able to do that for eight weeks. It was, it was, it was really hard if you're really used to being really active and not able to, it can affect a lot of your life. So what do you recommend for people who are runners, triathlon people who run triathlons, maybe more of the casual athletes. What do you recommend that casual athletes do to keep their feet and ankles just to keep them in the best shape and to prevent injuries? Or are there certain things that people do that like overuse or doing certain moves or wearing the wrong kind of athletic shoes? What can people do to prevent these injuries?

- Dr. Coyer: [21:22](#) That's another great question. And I have that discussion multiple times every day. So I think it's everybody's burning question. How do I do the things I want to do and, and not hurt, you know, because if your feet or ankles or, or hurting basically the rest of is pretty miserable trying to stay active. So we're, we're a society of instant gratification. You know, we want to get on the Internet and we want to surf at right now and I'm just as guilty. Um, you know, we want to go to the store and buy it and have it in our size and color and whatever as soon as we see it and we want it now. So I think one of the mistakes we make is to just kind of put the cart before the horse or push things a little too soon or too hard. So the number one tip I would give people when you're ready to start an athletic program, don't expect to jump off the couch and be a marathoner.
- Dr. Coyer: [22:11](#) You know, overuse is probably one of the biggest problems that can derail, as you said, an athletes. So I think the best advice would be gradual transition from the current activity level to your desired activity levels. So don't go out on day one and run 17 miles on day one and start chipping away at what you want to do. I mean you've got to build a foundation before you build the house. So kind of gradual transitions. Get on a workout program that allows you to gradually go from your current activity level closer and closer to your desired activity level over a period of several weeks or even months, depending on what that is. People ask me all the time, okay, well that's, that's great, but you know, what is that document? How do I do that? So it's really our bodies are smart. You know, pain is not a bad thing in a lot of regards and we'll see that with our diabetic patients when they require amputations because they've lost their pain sensation.
- Dr. Coyer: [23:09](#) So pain is your body's way of telling you that, hey, you know you're doing a little bit too much for me right now. So allow pain to guide your symptoms. You know, if, if you start a workout program and you're able to go a mile and feel comfortable, go your mile and if it starts to hurt you when you get to a mile and a half, then that's a sign that, hey, maybe I need to back this off. And my limit now is a mile and a half. So if you kind of gradually work your way through whatever that activity is, whether it's running or biking, obviously your distance would be up some, but you work your way up to that level and you know, give your body time to repair and
- Dr. Coyer: [23:46](#) be smart about it. And you'll notice that this is one of those things where hindsight's 20/20, right? We hear the stories of the phrases and the outages all the time, but they can apply

them to our daily lives pretty easily. So, so what seems like that first mile and a half as hard on day one, we're doing really well. And then next thing you know we're looking back going, oh yeah, I'm doing five miles and I'm not feeling so bad. But then, you know, when we kind of, we waned off that a little bit. We tend to overuse it. I think the biggest in that regard is just be aware of overuse injuries. Allow your body to guide your symptoms and that's probably the number one thing. Secondly would be, you know, there's, there's a big push now you'll hear people talking about minimalist running and barefoot running and, and all those things and there is a place for that, you know, there are studies on both sides of it, barefoot running versus, you know, in minimalist shoes and normal kind of run of the mill everyday, what everybody knows to be a running technique and he'll strike toe off some of those, those things while they're, they get trendy, they're, they're good for some people, but they're not good for everybody and they're probably not good for most people's.

Dr. Coyer: [24:51](#)

So find something that works for you. You don't need to go reinventing the wheel, stay consistent with what works for your body. And just because it works for somebody else doesn't mean that it'll work for you. So as a general recommendation, barefoot running minimalistic shoes, these nonsupportive shoes don't work well for most people. So a good. Usually we like Stability Type or stiff soled shoe works magic for most people when it comes to sporting injuries and people will ask me why. That is what kind of makes sense when regardless of whether what our beliefs are, the human foot was really never designed to run significant distances on Asheville. The earlier years we didn't really have paving companies to put roads out everywhere, so our sidewalks, so to expect our feet to have adapted to that or had been designed for that isn't really realistic. So. So a lot of times people will have problems, you know, either with foot sprains or joint pain or plantar fasciitis pain in the ligament and those overuse syndrome which, which can be diminished or alleviated just by, you know, a good, stiff, soled, stability, athletic shoe.

Dr. Coyer: [26:00](#)

It's not so much brand. These things are so common that it's all basically written down in addition to talking about him, but it's not so much brand. You know, there are a lot of great shoes out there, you know, from aasics, new balances, you know, Brooks, Mizuno, whatever. I mean you Nike pick a name and it's out there. It's more about the structure of the shoe and there are good and bad in each line. So go to somewhere reputable somewhere that knows how to service and treat athletic individuals in whatever sport you're interested in. Start strong

early and you don't have to go back and try to try to repair injuries that would otherwise not occur. Here's the question, what is the best surface run on? I'm a runner and asphalt. Is it beach sand? Is it like a running track or a trail? So great question.

Dr. Coyer: [26:50](#)

No one thing is great for everybody, but some of the things create problems more than others and some of those problems are created based on everybody's individual foot structures or foot or ankle types of structures. So generally a flat surface tends to. People tend to do better with that because the foot is really designed to be a mobile adapter, so you have to adapt to whatever the terrain that you're on, whether it's walking, standing, running, whatever. So if you think about trying to stand on the side of a mountain, even just standing there, you have to. Your foot or ankle has to accommodate that. So you're going to put more pressure on one side or the other. Makes Sense, right? So if you're on level surfaces, you really don't have to make that accommodation that you would otherwise have to if you were on a, an unlevel surface.

Dr. Coyer: [27:39](#)

So you give an example of the beach, the beach, you're more likely to have some kind of ankle sprain or something like that without a supportive shoe than you are on level ground. So does that mean everybody shouldn't run on the beach? No, I mean running on the beach is great. It's great exercise. It's great. It's much harder workout, but there's a time and place for everything so you have to be careful. And it also depends on the type of foot that you have. So you know, running uphill, if you have foot pain or, or even running downhill foot or ankle pain, it's going to make that worse. So you know, as a general rule, flat surfaces are probably better, at least starting out and you're, you're less likely to develop an athletic injury. Being on a flat surface. You know, some of the tracks we have, like some of these high school and college tracks are pretty amazing.

Dr. Coyer: [28:22](#)

They have really good surfaces that are forgiving and you're less likely to have an injury there. You know, I tell people all the time, it's like we live in Orange County, California, so, so everybody comes in and I mean we, we have the beach all year. We have the sun all year, so I would never tell anybody to never wear high heels because I would basically, I would be strung up in a day that just doesn't work here. Right. But everything in moderation is the key. So flip flops, same thing. You know, you can't tell a 20 year old kid to not wear flip flops when you live in Orange County, California, the. But does that mean you should be wearing them for 20 miles? Of course not. Should you run on the beach? Well, you know, I'm not gonna say that you

shouldn't run on the beach either, but you just have to be smart about the situation for you.

- Dr. Coyer: [29:07](#) And some things work for some people, some, some things worked for others. Let your body be your guide. If certain activities bother you, then maybe you know they're not for you. I'll give, I mean I'm not a golfer, I can't hit a golf ball to save my life, so you'll never see me on the golf course. I. I'm a scuba diver so I know how to swim. So basically if you're a golfer that can't swim, you don't want to be scuba diving and if you're a scuba diver, they can't golf. You don't want to be golfing. And I guess I guess that's the best analogy. I can put it, Phil, about footwear. You mentioned high heels and different kinds of shoes. I'm someone who likes to wear high heels once in awhile and switch into flip flops.
- Dawn: [29:42](#) I pretty much live in flip flops, so our high heels bad for your feet to where you know on a regular basis for the best health of your foot. What shoes should you be wearing?
- Dr. Coyer: [29:52](#) Another great question. High heels are certainly not, and I'm going to understate the sun purpose. It's fair to say that high heels are certainly not the best thing you could possibly wear on a regular basis. We will see a higher degree of problems with foot pain and some progressive foot deformities in ladies who wear high heels because in a you're in a tight toe, you're in a, you know, you're putting more pressure on the flip than what it was designed to have. You know, it's designed to really be in a flatter shoe so they're not great for your feet. But having said that, everything in moderation is another set. Another line that we can fall back on. So what I'll tell my patients kind of regularly as should you be in high heels, 14 hours everyday during your day and expect your feet not to hurt.
- Dr. Coyer: [30:49](#) Well, the short answer is absolutely not. They're, they're more likely to, to hurt because they're not as good for your feet. However you know it. If we go by her, everything in moderation designation. If you're, if you wear high heels because you're going to go on the town. And I guess everybody's definition of high is different. Too high to me would be a half an inch because I don't know if I. If I had to walk in a half inch heel, I'd break my leg. I don't know how some of the ladies do it. It's impressive to be honest with you, but you know, like a really high heel is always bad, like five, six inches or whatever, but if you're going to wear heels, it should be in moderation. You know, if you're going to go hit the town and you want to go to dinner or you're going to an event, you're going to a wedding or an.

Dr. Coyer: [31:32](#) It's really not as big of a deal. You should be sensible if you're going out walking, hiking on your feet during the day, you're going to do better in a flat or a low heel with some arch support because it mechanically support your foot more. You know, I tell people this is pretty much everyday. If you're willing to pay your penance in high heels, they hurt your feet, but you have to wear them to this dinner and you can accept that and get past it. Then that's okay too. It's just our bodies as given or are. They're pretty amazing. So. So a lot of times we tell ourselves what we really need to be doing and you'd be amazed how many patients kind of know the answer to what they should be doing for their foot and ankle health before they even hit the door. And sometimes I think we just need somebody to remind us.

Dawn: [32:12](#) Absolutely. And that's what you're here for, right? I am. Well, thank you so much Mike. Where can people find out more about you if they're in the Orange County area? Do you have a website that people can look up just if they're interested in visiting you or anyone in your practice?

Dr. Coyer: [32:30](#) So yeah, absolutely. Our website is orange county foot and ankle surgeon.com. It's all one word and easy to say in one breath and you'll. You can also just google my name. If you Google Micheal Coyer, DPM, it'll come up and we're happy to see. We have our main offices in Irvine. I'm right across from, from Hoag Hospital Irvine and Hoag Orthopedic Institute just off the 5. So it's really easy to get to write on Sand Canyon. I'm there Monday, Wednesdays and Fridays all day pretty much, and we also have a second office in Huntington beach where I see patients on Tuesdays and Thursday mornings and we just opened up a third office. Actually, things are going pretty well up in orange, right across from St Joseph Hospital, so if it's got a foot or ankle attached to it we can certainly get you a get you taken care of.

Speaker 3: [33:24](#) Excellent. Well thank you so much Mike, for joining me today on a teaspoon of healing. It was really fun to interview you and I actually learned a lot and I hope all of you out there learned a lot and I'm going to be careful when I run. I do run on the beach so I'll be really careful when I do that. And and what were high heels? Too much

Dr. Coyer: [33:43](#) run carefully and enjoy yourself. You're very unlikely to have a problem. The high heels.

Dr. Coyer: [33:50](#) I'll leave that. I'll leave that to the wind. I think that speaks for itself, so.

Dawn: [33:55](#) Right. Well thank you again Mike.

Dr. Coyer: [33:57](#) My pleasure. Thank you.

announcer: [34:04](#) Thank you for listening to this episode of a teaspoon of healing. If you have any questions for me or for Dr. Coyer, you can email me at dawn@teaspoonofhealing.com, and that's d, a w n you can also visit my website, [teaspoon of healing.com](http://teaspoonofhealing.com). Click on contact and fill out the contact form and I'll reply when you're at my website. You can also read my blog. I post there regularly and you can also get show notes and you can also download transcripts of the shows. Have a great week and you'll hear from me again next week. Thanks.

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