

INTRACTABLE PLANTAR KERATOMA (IPK):

Intractable Plantar Keratoma (IPK) is one of the common problems seen in the foot. An IPK is a “deep callus” which is extremely painful. Intractable is a synonym for the fact that the callus will not go away by itself. Plantar means the bottom of your foot. Keratoma is a hard, thickened portion of skin. An IPK is associated with abnormal pressure caused by a misaligned metatarsal bone. When one metatarsal bone is longer or lower than the others it hits the ground first with more force than it is equipped to handle. This condition is often referred to as a dropped metatarsal. The pain is extreme. Our patients tell us it is like walking on a stone. They can also be caused by the wart virus and can occur throughout the rest of the plantar foot for various reasons.

Conservative care includes trimming and padding the IPK, which alleviates the pain for a short period of time. If a misaligned bone is causing the problem then it will simply rebuild the IPK. Other types of conservative care include metatarsal bars and Orthotics. These devices redistribute body weight from the misaligned metatarsal bone to the other parts of the foot. Special shoes may also be used to help reduce the pressure on the foot in the area of the IPK. A strapping or tape may be applied to the foot to help some of the pain.

A chemical called Cantharone can help remove the IPK permanently when applied. This chemical is painless when applied to the foot, causes a blister and can hurt for a couple days. A laser may also be used to remove the IPK. With the laser you can have pain initially from a shot used to place a small amount of anesthesia under the IPK; however, after the procedure you have hardly any pain. Sometimes, if the problem is caused by a deformed bone and when pain persists surgical intervention is the treatment of choice.

Post operative instructions for the laser procedure:

1. Keep bandage clean, dry and intact until the morning after the procedure.
2. Apply ice pack 20 minutes on then 20 minutes off if significant pain is present.
3. Keep foot elevated.
4. Wash foot daily with Hibiclens soap **or** soak foot in warm Epsom salt water for 15 minutes with bandage on (1st time only). Soak twice daily for 15 minutes for 2 weeks or until your post operative check up.
5. Recipe for Epsom salt solution: 4 Tbs. Epsom salt per quart of warm water.
6. Apply fabric band aid to wound for better ventilation of the wound.

Post operative instructions for the Cantharone:

1. Keep band aid on and dry for 24 hours, pain may occur after 2-3 hours and last for several days. Tylenol or Motrin can be taken for the pain.
2. After 24 hours, you have no restrictions.
3. A blister may form but this doesn't require special care, a band aid is all that is necessary.