

“When a woman wants to be a mother, she can think of nothing else”

José Félix García España Director of the Assisted Reproduction Unit at El Ángel



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The son and grandson of gynaecologists and a waterpolo fan during his youth, for four years he has been working in a hospital in Malaga as the head of a unit which deals with fertility problems

There is probably no other type of consulting room in which a simple test can bring so much hope or despair as that of a fertility clinic. “A colleague even told me he had seen more women cry in the reproduction unit because their test was negative than in the oncology unit, where he had worked with breast cancer patients,” says José Félix García España.



Jose Félix García España, in his office at El Ángel hospital. :: FERNANDO GONZÁLEZ

Maybe that is why this specialist always leaves till last a patient who comes to him for the first time to seek help in becoming a mother. “You have to spend time with them, give

them a lot of information,” he says. Meticulous to the extreme about legality, this son and grandson of gynaecologists, who was a waterpolo fanatic in his youth, is clear in his

opinion: the principal problem of infertility today is that women are putting off having children. **–I imagine that couples who come to your unit are very anxious.**

–Always. Every woman who wants to become pregnant is anxious when she comes here and that is normal when something isn’t going right. They see their friends pushing prams, and people start to ask why they have no children. Or they may have been looking on the internet.

–**The notorious ‘Doctor Google’?**
–Yes. The information these patients pick up there makes them anxious. **–And when they are so anxious, how do you explain to them that everything might be alright, or it might not?**

–With a great deal of information, plenty of time and by putting them right about myths and misinformation. You explain all the steps that can be taken, all the tests that can be done. From artificial insemination to egg donation. However, you always have to prepare them for the fact that the answer may be ‘no’.

–**When does that ‘no’ happen?**
–At the moment the couple decides, with guidance from their doctor. Look, a woman suffers a great deal with each in vitro fertilisation. That is why, in extreme cases, after three or four unsuccessful attempts, many women decide enough is enough. **–It must be dreadfully frustrating and painful.**

ADVERTORIAL Dr. med. Petr Spurek of the FSC Marbella: «The role that our foot plays in the function of our body is generally under estimated!»

Hallux Valgus – the painful bunion deformity

Initially it appears to be a simple cosmetic problem when the great toe starts to move towards the other toes of the foot. However, the bunion deformity very soon becomes extremely painful and during its further evolution it has an influence on the lesser toes and results in a painful complex forefoot deformity. At this stage the only solution for the patient is a surgical correction of the forefoot.

The human foot is an impressive construction by nature. It consists of 26 bones, 33 joints, muscles, tendons and over 100 ligaments. We make an average of 15.000 steps per day with it. Our feet can absorb this tremendous impact only because the weight of our body is being distributed on a larger area with the help of muscles and the fat pad tissue on the sole of the foot. The construction of arches in the foot plays a key role in this process. The ankle joint connects the foot



with the lower limb and has therefore an important influence on the static mechanism of the entire body. Any malposition in the foot area can have a negative effect on the pelvis and the posture of the spine. The sole of the foot also works as a sensitive organ of touch, provided by a large net of sensitive nerves. During every step it continuously sends information to our brain.

The role that our foot plays in the function of our body is gene-

rally under estimated. Most of us only become aware of our feet after we begin to have problems with them. Any pain, limitation of movement, change of posture, skin characteristics or colour are signs of a disorder in the highly complex anatomical construction of the foot. The most frequent forefoot deformity is the bunion deformity, or in technical terms, Hallux Valgus. It requires a sensitive patient examination through a highly trained specialist to define in detail the cause and further consequences in the evolution of this deformity and the pain mechanism. A great part of pain caused by forefoot deformities can be positively influenced, or even completely treated, with the help of custom-made in-soles, change of footwear and correct physiotherapy. However, from a certain point on, especially when the lesser toes are already involved in the process of deformity,

only surgery can offer a definite solution.

TREATMENT

Exclusively in the forefoot area over 130 surgical techniques are described! This shows the importance of this area and how frequently this deformity occurs amongst the population. In modern foot surgery we prefer surgical procedures that maintain the existing joints, if possible, and due to the unlimited variety of fore foot deformities, every patient has to be treated with an ‘a la carte surgery’ to reconstruct the individual forefoot problem. The preferred Dr. med. Petr Spurek implant material is titanium and in the FSC Marbella we also have good experience with bioresorbable implants.

Post-surgical treatment obviously depends on the performed surgical procedures but, in general, the bone healing process takes six weeks. During this period we allow our



patients already partial weight bearing with the help of special shoes or orthotics. In our clinic we do not apply plaster any more, as we use only the latest more advanced material that has replaced it.

Usually after six weeks normal gait with full weight bearing in comfortable shoes is allowed and full sports activities can be performed three months after surgery.



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