# Article information:

Comparison of foot orthoses made by podiatrists, pedorthists and orthotists regarding plantar pressure reduction in The Netherlands - PMC  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1326204/>

# Article summary:

1. This study compared the effectiveness of foot orthoses made by podiatrists, pedorthists, and orthotists in reducing plantar pressure and improving walking convenience for patients with metatarsalgia.

2. There was a significant variation in the construction of the orthoses and the achieved peak pressure reductions within each discipline.

3. Pedorthists and orthotists achieved greater maximal peak pressure reductions compared to podiatrists, indicating potential differences in the effectiveness of foot orthosis therapy between professional groups.

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

The article titled "Comparison of foot orthoses made by podiatrists, pedorthists and orthotists regarding plantar pressure reduction in The Netherlands" aims to evaluate the effectiveness of foot orthoses made by different healthcare professionals in reducing plantar pressure and improving walking convenience for patients with metatarsalgia. The study compares the outcomes achieved by podiatrists, pedorthists, and orthotists and explores the relationship between the importance of pressure reduction as stated by the therapist and the actual effect on peak pressure.

One potential bias in this article is the limited sample size. The study only included three patients with metatarsalgia, which may not be representative of the broader population. Additionally, the study only included therapists from the southern part of The Netherlands, which further limits its generalizability.

Another potential bias is the lack of blinding in the evaluation process. The therapists who constructed the foot orthoses also evaluated their effectiveness, which may introduce bias in their assessments. Blinding would have helped minimize this potential bias.

The article also lacks a discussion of potential confounding factors that could influence plantar pressure reduction. Factors such as shoe type, patient weight distribution, and gait patterns were not considered or controlled for in this study. These factors could significantly impact plantar pressure and should have been addressed to provide a more comprehensive analysis.

Furthermore, there is no mention of any potential risks or adverse effects associated with foot orthosis therapy. It is important to consider both the benefits and risks when evaluating treatment options. Without discussing possible risks, readers may not have a complete understanding of the implications of using foot orthoses.

The article also does not explore counterarguments or alternative treatment options for metatarsalgia. While it focuses on comparing different healthcare professionals' approaches to foot orthosis therapy, it fails to discuss other non-orthotic interventions or conservative management strategies that could be equally effective or even more beneficial for patients.

Additionally, the article does not provide sufficient evidence to support its claims. While it mentions that previous studies have shown the effectiveness of foot orthoses in reducing pressure, it does not cite specific studies or provide a comprehensive review of the existing literature. This lack of evidence weakens the overall credibility of the article.

Overall, this article has several limitations and biases that should be taken into consideration when interpreting its findings. The small sample size, lack of blinding, failure to address confounding factors, absence of risk assessment, and insufficient evidence all contribute to a less robust analysis. Further research with larger sample sizes and more comprehensive methodologies is needed to draw more reliable conclusions about the effectiveness of foot orthosis therapy for metatarsalgia.

# Topics for further research:

* Non-orthotic interventions for metatarsalgia
* Conservative management strategies for metatarsalgia
* Potential risks and adverse effects of foot orthosis therapy
* Impact of shoe type on plantar pressure reduction
* Influence of patient weight distribution on plantar pressure
* Gait patterns and their effect on plantar pressure reduction

# Report location:

<https://www.fullpicture.app/item/b786cf33071394a2b4fdd0ec5b99a639>