

Frequency of foot disorders differs between African-Americans and whites

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Common foot disorders such as flat feet, corns and bunions are more prevalent among African Americans than in whites, a new study by University of North Carolina at Chapel Hill researchers has found.

African Americans in the study age 45 or older were three times more likely than whites of the same age to have corns or flat feet (medical name: pes planus). In people who were not obese, African Americans were twice as likely to have bunions (hallux valgus) and hammer toes than whites, said Yvonne M. Golightly, PT, PhD, lead author of the study, titled "Racial Differences in Foot Disorders: The Johnston County Osteoarthritis Project," and a post-doctoral fellow at UNC's Thurston Arthritis Research Center. There were no significant differences by race for bunions or hammer toes among obese participants.

"That suggests there is a real racial difference there, that it's not something where obesity is also playing a role," she said.

Tailor's bunions (inflammation of the joint at the base of the little toe) and high arches (medical name: pes cavus) were nearly five times more common among whites than African Americans.

Golightly will present these results of the study, based on data collected as part of UNC's long-running Johnston County Osteoarthritis Project, on Tuesday, Nov. 9, at the annual scientific meeting of the American College of Rheumatology/Association of Rheumatology Health Professionals in Atlanta.

In the study, 1,536 participants were clinically evaluated for foot disorders from 2006 to 2010. Golightly and study co-authors identified the most common foot disorders and used statistical analysis to compare each foot problem by race, controlling for age, [body mass index](#) (BMI) and gender.

"These foot disorders are very common among people age 45 and older, and can lead to more serious problems such as falls, decreased physical activity and decreased quality of life," Golightly said.

"The next step in our research is to determine the origin of these disorders," she said. "We're interested in looking at the influence of factors such as genetics, shoe wear, multi-joint osteoarthritis, and what type of work a person does."

Provided by University of North Carolina School of Medicine

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