

ASK THE EXPERT

What's runner's knee? I'm training for the Chicago marathon and have pain around my kneecap.



Kathy Weber, MD

Kathy Weber, MD, sports medicine physician, Midwest Orthopaedics at Rush

Runner's knee, also known as patellofemoral syndrome, is a common condition seen in runners, but you don't have to be one to get it. Runner's knee can develop in any athlete when they experience a change in activity and/or intensity of exercise. It causes achiness in the front of the knee, around the kneecap, and is exacerbated during activities such as going up or down stairs, prolonged sitting or squatting. Treatment usually requires reducing activity and undergoing a patellofemoral rehabilitation program, including stretching and strengthening exercises. Any time you have pain, it's important to see your doctor.

My face has been breaking out and my physician suspects acute adult acne due to a 'hormonal change.' I didn't even have acne when I was a teen. How can I treat this?



Lauren Fine, MD

Milder cases can often be managed with topical medications. For more persistent or severe breakouts, a combination of topical treatments and oral medications may be needed. There are also very effective laser, light-based treatments and in-office procedures for acne and acne scarring that are often used alone or in combination with other therapies. For any acne regimen, it's very important to stick with a treatment plan for at least three months, and in most cases at least four to six months of treatment is recommended.

Lauren Fine, MD, Lakeview Dermatology

It's a misconception that acne is only a problem that affects teenagers. Recent evidence suggests that acne in women ages 25-50 is on the rise. Unlike typical teenage acne, adult acne can be affected by fluctuations in hormone levels and even stress. While many of the same treatments we use for typical teenage acne can work well for adult women, there are some different treatment options available so it's important to be evaluated by a dermatologist.

Are flip-flops really that bad for my feet?



Michael E. Ladewski, DO

When you wear flip-flops, you actively grip your toes to keep the shoes on your feet. That can lead to stress fractures in your feet, heavy strain on your calf muscles and even pinched nerves in your hips and back. Flip-flops provide little to no arch support or shock absorption, so blisters and toe jams are also common. Bottom line: While probably fine for short distances, if you're planning to walk long distances, it's a good idea to wear more supportive shoes.

Michael E. Ladewski, DO, primary care sports medicine specialist, NorthShore University HealthSystem

I have two insurance plans and don't understand what Coordination of Benefits means. How do I know which plan is primary and which is secondary?

Coordination of Benefits determines the order in which benefits are paid when an individual is covered by multiple health plans. Generally, the plan that covers you as an employee is primary over



Opella Finley Ernest, MD

the plan that covers you as a dependent. If a child has health insurance through both parents' employers' plans, one plan is generally considered the primary benefit plan and pays first, and the benefit plan considered secondary reimburses after the primary plan pays.

Opella Finley Ernest, MD, chief medical officer, Blue Cross and Blue Shield of Illinois

I've had an embarrassing problem with excessive underarm sweating since my teens. It's so bad I can't wear anything but black or jackets due to the large sweat rings. What's the cause and is there anything to treat it?



Carolyn Jacob, MD

You aren't alone. About 21 percent of the population is bothered by excessive underarm sweat. Luckily, there are many treatments to help reduce sweating. Schedule an examination with a board certified dermatologist, since they're experts in the field of skin and sweat glands. They can determine whether an underlying medical illness or a medication is the cause.

Excessive sweating, known as hyperhidrosis, is defined as sweating greater than needed to cool the skin for more than six months. Patients also need two of six other criteria such as symmetrical sweating, a family history of hyperhidrosis, age of onset under 25 and sweating that affects daily functioning.

Some people have hyperhidrosis of the palms, soles, forehead, groin and back as well. Often, a dermatologist will prescribe a topical solution to decrease the sweating. This works well for some people; others need a pill that reduces sweat production on the entire body, especially if multiple areas are affected. This medication can sometimes lead to a dry mouth and eyes. Some patients choose an invasive surgery, which clamps or cuts the nerve on the spine above the chest line to stop sweating on the upper portion of the body and often leads to excessive sweating on the lower portion of the body.

There's also an FDA-approved, non-surgical way to permanently reduce sweat on the underarms. The device, called MiraDry, uses microwave technology to specifically heat and destroy the sweat glands on the underarms. The rest of the body will continue to sweat normally. The MiraDry treatment consists of two 40-minute treatments at your dermatologist's office. There's a slight amount of swelling afterward, so ice packs and ibuprofen are given. There is virtually no downtime and patients can resume normal exercise in three days. Sweat is typically reduced by 90 percent after the second treatment.

Carolyn Jacob, MD, founder/medical director, Chicago Cosmetic Surgery and Dermatology ■