







of the components of running footwear The latest technology changes in materials







Shoe Anatomy-Last

Last Construction



Shoe Anatomy- Outsole

<u>Shoe Outsole</u>

Polyurethane · Non-marking, more dense · Not going to compress as easy Blown or Gum Rubber · Configuration dependent or manufacturer High Density Carbon Rubber

Decreased weight



Shoe Anatomy- Outsole

Shoe Outsole

Improved technology going into outsole • Very light-weight • Very responsive • No flat spots that allow the shoe to move with you (NB) Integrated midsole & outsole Midsole still present in others • Adidas • New Balance



Shoe Anatomy-Midsole

<u>Midsole Material</u>

E.V.A. (Most common)

- Made in different densities
- Sheet cut
- Lot of wasted material and more costly – not using much any more
- Compression molded
 Almost everything now
 More air in midsole to
 decreases weight



Shoe Anatomy- Midsole

Midsole Material

Polyurethane
Denser and heavier
than E.V.A.
Easier to shape
Feels better
No difference as far as
shock absorption
Better durability
Watch for fake



Shoe Anatomy- Midsole

Midsole Additions

Cushioning units · Air, Gel, Waves, Shocks, etc.. · Primarily marketing Stabilizing units · Different density midsole · Firmer under medial heel · Plastic "footbridge"



Shoe Anatomy-Midsole



Shoe Anatomy-Midsole







Shoe Anatomy-Midsole

 Axis that follows the normal COM of normal foot biomechanics
 More flexible More natural



Shoe Anatomy-Midsole

NIKE

Midsole: Lunar® Lunarlon compressed foam Changes in density medial and lateral To create a more dynamic response to amount of control needed Phylon foam Increased duramete Casing of midsole



Shoe Anatomy-Midsole

Midsole: Lunar® 2014 Lunarlon compressed foam Still have medial to lateral density changes Eliminated the Phylon foam casing



Shoe Anatomy- Midsole

NEW BALANCE

Midsole: RevLite® Light-weight foam (10% lighter than Lunar® Utilizes a ground contact EVA cradle Stability created by "pods" on both medial and lateral side



Shoe Anatomy- Midsole

NEW BALANCE

Midsole: Fresh Foam® Similar to Lunar® Change in responsiveness early vs. late in the race Utilizes convex (medial side) and concave (lateral side) technology to change support & weight



Shoe Anatomy-Midsole

BROOKS

Midsole: DNA and Super DNA® DNA encapsulated midsole Non-Newtonian liquid Reacts to the individual Liquid to solid properties

Midsole Geometry

LAST SHAPE

LAST PROFILE

More straight lasted vs. traditional sculpted Lighter without the need for stability (plastic) modules

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Through Geometry





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Shoe Anatomy- Upper

Toe Box Length

Width-Bunions, wide forefoot Depth – claw or hammertoes, thick All running shoe brands have all combinations Not all running shoe companies change the last width



Shoes that tend to run <u>wider</u> in toe box: New Balance; Brooks; Saucony

<u>Narrower</u>: Asics; Nike: Mizuno



Shoe Anatomy- Upper Nike Flynit® NB Fantom Fit® Saucony Flex Film®

Shoe Anatomy-Upper

<u>Vamp</u> Area where laces are placed Must be adequate for forefoot <u>Tongue</u> Only in laced shoes May be tethered by flexible straps on tongue May become irritant if tongue slides to side



Shoe Anatomy-Upper

Heel Counter

Pressed Cardboard

Holds shape of shoe
 Thermoplastic

traditional shoes

Internal or





Shoe Anatomy-Insole

<u>Insole</u>

of orthoses or other Function to protect foot from stitching ("sock









Traditional Shoe Categories <u>Cushion/Neutral Shoe</u> Sub-divided into Light, Medium and Heavy Cushion categories <u>Saucony ProGrid Ride</u>; Asics Cumulus; Brooks Ghost; Mizuno Wave Rider; Nike Pegasus





Traditional Shoe Categories

Straight-Lasted Cushion Shoe Saucony Echelon; Brooks Dyad; New Balance 840 Notes:

Single de



Traditional Shoe Categories

<u>Guidance (Mild Stability) Shoe</u> Saucony ProGrid Guide; Asics DS Trainer; Brooks Ravenna; Mizuno Elixin Nike Lunar Glide Notes

Dual density midsole to provide increased stability with a more semi-curved lasted sha





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Traditional Shoe Categories <u>Stability (Moderate) Shoe</u> <u>Saucony ProGrid Omni;</u> Asics 2170; Brooks Adrenaline; Nike Structure Notes: Dual density materials that incorporate more of the midsole to provide increased stability with a more semi-curved lasted shape









Traditional Shoe Categories

Racing Flat Saucony Grid Type A4 (3-5K) Notes: For Race ONLY. Will train in other shoes Can be dual density (marathons)





Traditional Shoe Categories

Trail Running Shoe Saucony Xodus 2.0 Notes: More tear resistant and more durable outsole designed for unstable surface accommodation



Traditional Shoe Calegories Minimal Running Shoe Saucony ProGrid Mirage; Brooks "Pure" Line; Altra; New Balance Minimus; Saucony Kinvara; Nike Lunar Fly Notes:





Traditional Shoe Categories





Traditional Shoe Categories

<u>Minimal/Barefoot Running</u> Merrell Glove Notes: No longer have to fit each toe into it's own compartment.

Almost every running shoe company now has there own version of a minimalist shoe



Traditional Shoe Categories



Shoe Recommendations

Based on plantar static foot type: Assigning shoe based on foot type does not decrease injury in Marine Corp Recruits (Knapik et al. 2010 Am J Sports Med)

Only one piec of the puzzle!!



Shoe Recommendations

The effect of three different levels of footwear stability on pain outcomes in women runners: a randomized control trial. (Byan et al. 2010 British Journ of Sports Med)

81 Women were categorized into 3 different foot posture types: neutral, pronated, highly pronated then randomly placed into 3 categories of shoe. (neutral, stability, or motion control)

RESULTS:

- 32% of the women missed training days over the course of the study.
- Motion control shoes "resulted in both a greater number of injured runners and missed training days than the other two shoe categories."
 Motion control shoes faired very poorly.
 - The stability shoe reported the fewest missed days (51) and the motion control shoe (79) the most.



Shoe Recommendations

When in Doubt???

If symptoms appear to be due to overstabilization = Less shoe than current If symptoms appear to be due to <u>under-stabilization</u> = More shoe than current

If not sure or symptom onset appears to due to worn-out shoes (ascertained through running hx.) = Same shoe and proceed with caution

Shoe Recommendations

When to Replace Running Shoes??

Mileage 15 years ago: 500-700 mile



Last 2 years: 300-400 miles
 Consumer wants lighter shoe!
 Symptom onset
 When their "pain" returns from a prior injury
 When the runner starts getting a little more sore than usual after a run

Shoe Recommendations

Other Considerations: Two "different" feet Flexible forefoot / poor midfoot locking ability Ankle Dorsiflexion ROM or Late pronators or delayed resupinators Shoes for training & shoes for gait retraining



You Will Make Mistakes!



