

Amol Saxena Interview No. 24

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"...proving oneself was nothing new to me."



Amol Saxena lives by Gandhi's philosophy "Be the change you want to see in the world."

Amol's practice specializes in Sports Medicine and Foot & Ankle Surgery in Palo Alto, California. He has pioneered several surgical techniques (including Achilles procedures). He is an international and nationally recognized surgeon, speaker and author, and has published over 100 articles.

Dr. Saxena is the editor of "International Advances in Foot and Ankle Surgery" (Springer 2012). He serves on the editorial Board for Journal of Foot & Ankle Surgery and for Muscle, Ligament & Tendon (Italian). He is an instructor for the German

Association for Foot Surgery. In 2004 Amol was awarded Humanitarian of the year by the CPMA.

He currently has treated and operated on dozens of Olympians from around the world (including Gold Medalists and world record holders), and Olympic Trials qualifiers, numerous professional athletes including from the Nike Oregon Project, Golden State Warriors, San Francisco Giants and 49ers, and San Jose Earthquakes, and many top area high school athletic scholarship winners.

Dr. Saxena is board certified/Re-certified in Foot and Reconstructive Rear-foot/Ankle Surgery (American Board of Podiatric Surgery), Fellow American College of Foot & Ankle Surgeons, American Academy Podiatric Sports Medicine (which he was presented the Barnes Award for outstanding research in 2011) , and serves as section Chief of Podiatric Surgery at Stanford University Hospital.

He has competed in several Boston Marathons and Duathlon (run, bike, run) World Championships. He is married to Karen and has three children.

*I have known Amol for nearly 40 years and I have seen him become a star in his profession. I have seen him at work and his "home-town" style makes you feel comfortable. You know you are in capable hands. Over the years we have run several races together with good memories. I also make sure, if I am in town, to support and run their Juana 8k run in Palo Alto. Always a fun "home-town" type of an event. (**Interview by Bob Anderson**)*

1. You started running in 1972.

I was always an active kid, according to everyone around me I was running everywhere. I learned to count by running laps around my parents' coffee table, wearing out the rug when I was about 3. I remember the rug burn feeling on my feet as I got up to 100. I didn't formally take up running until age 10 after I watched the 1972 Olympics, in particular the distance races. After Frank Shorter won the marathon, my dad asked how far I thought I could run so I guessed three times around my neighborhood block in Princeton Junction, NJ, which turned out to be $\frac{3}{4}$ mile around. I started regularly running four laps (3 miles) that summer, and then bought running books to learn about training. I started coaching in 7th grade, because none of the PE coaches knew much about distance running back then as it was in its infancy. I remember selling Christmas cards door to door so I could buy my first pair of Nike's. I got called all kinds of things when I ventured beyond my block or people yelled "hip, two, three four" because running was a punishment and done by the military.



Photo: Amol running at the World Duathlon Championships in Scotland 2010.

2. Did you enjoy running from the start?

I liked it a lot. One PE teacher, Paul Glass used to have the whole class run around the outside school fields in 5th and 6th grade. He used to hold me back at the gym exit door like a hound dog by my sweatshirt, saying “wait, wait...go”. I liked trying to push myself, sometimes breaking multiple PRs in one day. Sixth grade spring break was 10 days long so I decided I try to run 100 miles. I got a slow start because the first weekend we were having guests over so my dad didn’t want me running “so long”, so the last few days I think I averaged over 15 miles!

3. How important was running fast races?

I was primarily a roadie. Since it was a marathon that got me out the door, that’s what I thought I’d be but really didn’t get around to it until my mid-30s (though I finished one as a frosh in high school and tried a couple of others in HS but had to drop out for various reasons). My favorite race of all-time was Wharf-to Wharf (Santa Cruz to Capitola Wharf in CA). It used to be 5.82 miles exactly but since the earthquake in 1989 it’s been longer. I ended up running 30:30 there which is a hilly course and equates to just over a 32:00 10K. My early races there (first one in 1980) helped get me into my undergrad Alma Mater Washington University in St. Louis because the Dean, Aaron Schatzman was a running geek. I also broke 1:12 in the half marathon and 4:30 in the mile. I ran 12 marathons between 2:40-50 including a few Boston’s in my mid- to late 30’s.



Photo: Amol running the 2004 Boston Marathon.

4. Do you have one race that you never will forget?

In 2003, I had my last (hopefully) knee arthroscopy by my colleague Don Bunce, MD. About a month later he died running on the beach of a heart attack. The week before one of my high school teammates died of a brain tumor. A few days later, another colleague died of cancer. Then, later that year, two other colleagues, both who had liked to run, also died.

By the summer of 2003 it was clear I had to severely ration my running from my usual 50-70 mi/wk to a whole lot less. I wanted to run one last Boston as a fundraiser for the various causes my friends died of. I trained 3-4 days a week about 30 mi/wk. The next yr, I ran Boston 2004 in 86 degree weather. Being under-trained and over-heated was nothing to what it was like to lose my friends and also know I wasn't going to be the same runner anymore.

5. You got interested in being a podiatrist because you were injured a lot?

I was in St. Louis at Wash U when one of my best friends, Sean Seley said I should see his DPM for my running injuries, Tony Helsinki. I had planned on going to med school, but thought since I was in to treating runners and running shoes, plus I had some bad feelings about being in hospitals due to my childhood with my mother's illness. In addition, the orthopedists who started our sports medicine department Fred Behling and Gordy Campbell were supportive of having their local patient (me) come back and practice with them as a podiatrist. If they were insecure orthopedists, I would have gone to med school.

6. Was your family supportive?

My wife who was my girlfriend at the time, is a cut-to the chase, engineer-type, and thought it would more efficient for me to be a podiatrist. I actually had the epiphany while staying at her parents' house. I got into med school but turned it down. In India, the feet is perceived as dirty and the worst part of the body, so my parents were less than thrilled I'd say. I think there was only one other Indian DPM in the US when I started. Now, like a lot of medical fields, there are a lot of DPMs of Indian origin. Funny thing was, when I was in high school under "goals" I put being a "renaissance man" on a college application and I ended up choosing to be an idiot savant.

7. How tough was it for you to become a podiatrist?

Being a runner, you have to prove yourself almost every day. You take the exact same courses to get into podiatry school, of which most all (eight) schools are affiliated with medical schools. The class-work in podiatry school is the same as med school with the exception that you also have the more focused courses because you already know what you will specialize in. In 1984, Post-graduate Medicine said Podiatry was the most efficient training programs and that's the year I started. There is still a stigma and prejudice against DPMs, but through research and being assimilated, we are documenting our value. I was always different, skinny, dark-skinned with foreign born parents, doing an unconventional sport, so proving oneself was nothing new to me.



Photo: Amol with Alberto Salazar and a running buddy Peter Goldmacher.

8. You worked at Runner's World for awhile.

Well, I had been running the Sunday Fun Runs at Foothill College going neck and neck with the owner and publisher! I needed a summer job after junior and senior year in high school so you kindly gave me one. I also helped in the winter time during National Running Week which was held in and around my hometown of Palo Alto. I worked on various pet projects for the company like the annual shoe survey and the Corporate Cup Relays. I met Alberto Salazar for the first time, little did I know we would end up friends 25 years later!

I have to say, even though I enjoyed working in the running world, I did not like the cubicle world, so it reinforced the fact I would not end up in one for a profession. It also taught me how to get along with people older than me. I think I was already pretty mature for my age. In addition, you showed me a lot of trust Bob, because at times I would be given a \$1000.00 cash and the company car, to go buy running shoes for the survey. My high school friends said I should have gone to Mexico. (I didn't speak Spanish). But seriously, that was a lot of money back in those days, almost what I made the whole summer. I also remember reading that there were only three people back then who were millionaires from running; I thought that would be a cool goal to be able to donate that amount to some cause.



Photo: The foot and ankle is very complex...

9. Why do you think some people never get injured and others all the time?

Part if not most, is genetics. We inherit our collagen which makes up our bones, muscles, cartilage and tendons. The other part is coaching, equipment, surface and desire. Training error is the most common. We get greedy, we want to improve. Peer pressure is a cause. Hard to do intervals in the AM when you are over 40! We are still learning. It is very frustrating when you think you are doing all the right things, yet still get injured. Another thing we are often in denial. Body parts wear out. Everything including what you need to run. When you are getting fit, you are sharpening a pencil. The point is easier to break.

10. You must know every trick in the book yet you still get injured, why?

I want to be as fit and improve if possible. I don't have that much natural talent so I need to stay fit on hard work which can break you down. I know I can't get faster with running. Combining cycling makes it harder to run. You get concentric (muscle shortening) with biking and eccentric (muscle lengthening) with running. These can be incompatible, so that's why if you bike more than a certain amount most cyclists drop the running. Hard for me to do that.

11. What do you think about the current barefoot running crazy?

Interesting question. There is a lot of research studies being thrown out. One thing for sure: east Africans grow up walking and running barefoot on soft surfaces. You never see them running barefoot on concrete. The other thing we see in long-term runners and even

cyclists, is that the padding on the balls of their feet wear out. I think it's OK to run barefoot a little on safe and soft surfaces, as a training exercise. I think running with less shoe makes you more efficient. The key point in Born to Run is on page 205. When a runner clipped a metronome to his shirt that he tried to match strides with at 90 beats/min, he felt less pain and ran faster. Most joggers run at 80 foot strikes/min or less. Elite runners run at more than 90 foot strikes/min. So working on turnover is the key, not necessarily the shoe or where you land on your foot.

12. How important has running been to your life?

Huge. Most, if not all my close friends are or were runners as is my wife. It probably was my Ritalin growing up, helped me handle stress, opened doors, and helped make a comfortable life for my family.

13. How much are you running now?

10-20 miles/wk, some of it on an Alter-G treadmill. I run less in the summer & more in the winter; I do about 100-150 mile/wk of biking, more in the summer.



Photo: Amol doing a bike time trial in 2009.

14. You do a lot of cycling. How did this develop?

My knees wore out! I used to do some commuting by bike, and distinctly remember trying to do my five mile ride to work in Martha's Vineyard faster than Alberto Salazar's WR! My wife started doing Tris in the late 90's after she had problems with her knees and back. She bikes 3+ times/wk and goes on all the typical peninsula rides with some other "former runners on bikes" or the BKBC (Bad Knee Bike Club) as I call them, so I started trying to bike with them in 2003-4. I then started trying to PR on every hill, making it unpleasant for them I'm sure! Then I had a major bike crash in 2004, breaking my shoulder badly. I no longer race downhill. Most of my biking, I do alone. I do workouts on a bike trainer because that makes you even fitter. I like doing bike time trials which is solo. You against the clock, similar to running. I don't like the socialistic aspect of bike races where everyone gets the same time, probably due to me be a runner at heart. I usually bike 3-6 x/wk. I take most Mondays and Fridays off, and lift weights/do core for 45 minutes twice/wk. I have some pretty intense workdays, so I am learning how that figures into my training efforts.

15. In fact you do a lot of duathlons?

I like to be able to do Duathlons but it's been tough being able to bike and run. When I see improvement with my biking, it gets tougher to run. Serious bicyclists train with a power meter (which measure power output in watts) and running slows down my cycling by about 5% when I run more than 15 mi/wk. So when I want to be fast on the bike, the running gets dropped. My wife has proven that with her DUs as well. I don't really bike enough to be a good cyclist but my power out is pretty high based on my training volume (about 4 Watts/kg; pros go 5+ W/kg). I've done three world duathlon championships (which is usually 10K run, 40K bike, 5K run) and I always cramp and have to walk that second run, though so do a lot of others. In fact, at my last World's at age 48 in Scotland, it had a very hilly bike course, and out of all the 1000+ age-group competitors, my bike split was 315th, while my first 10K (about 40') was 427th, so I am a better cyclist than a runner now.



Photo: Amol and wife Karen at the recent Juana 8k Run in Palo Alto they produce.

16. How did you and Karen meet?

We both coincidentally transferred to Washington University in St. Louis in 1982 and were on the cross country team that fall. She also lived in the dorm across the way so I would yell "Hey" out to her. She said "hey" is not my name, and I said "it is now". The name stuck. I never call her Karen. The single most life changing decision I made in my life was to transfer to that school.

17. She runs and rides too?

She runs and rides about the same total mileage as me, plus swims once a week. She has a big group on runners called the "Chipsters" (because they meet at the Stanford wood chip trail on Saturday AMs coached by Bill Clark (2nd at Boston 1968), and then has a bike group on Tues and Thurs AMs for 3-4 hr rides.



Photo: Amol getting the kids lined up to run one of the many races at the Juana Run. Photo by Catherine Cross Ujena Fit Club

18. How did the Juana 8k run come about?

We wanted to put on a road race in our neighborhood that would be a fund-raiser for the local schools. 100% of the profit is donated. Each year it raises about \$15-18K. We started in 1997. My wife does it all.

19. You have done some amazing things.

I tried to climb Mount Kilimanjaro but got high-altitude sickness at 16,000 ft (5K high). I was trying to get to the top too fast. I've run to the top of Half Dome and back (about 21 miles) in 3.5 hrs so I still am a slave to the clock.

So far, I seem to be OK with biking at altitude. One of my best bike rides was biking from Avon, CO to the top of Vail pass (7K to 10K feet high) in the summer of 2009 and that was no problem.

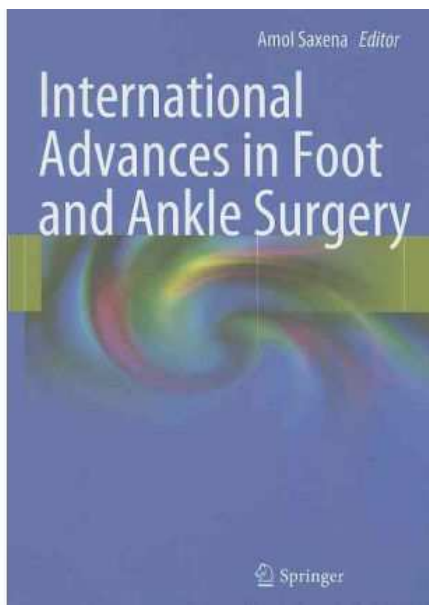
20. You have pretty much weighed the same forever. Do you do anything special with your diet?

Eat right, exercise and get plenty of stress! Actually I was just super skinny when you first knew me. Most of my relatives are a little to moderately overweight. I hover around 140 but have lost about an inch of height over the years. My family has literally

everything bad health-wise. My dad had his first MI at 53 and had stents at 56. My cholesterol was getting up there. In fact Indians in the US have 4x the incidence of heart disease than those in India so I really do have to watch it. I started eating a Mediterranean diet in 2007 and dropped my cholesterol by 70 pts. Need to reduce or remove almost everything white except for yogurt. With age it is creeping back up. I am also sensitive to salt; it jacks up my blood pressure but keeps me from cramping. It's a balance.

21. What is your typical day like?

During the week I am either in clinic or surgery. Surgery is every Weds AM, most Tues PMs, and alternating Mon and Fri PMs. Since I specialize in sports medicine, I see a lot of emergencies, fractures, sprains, tendon tears etc. On the weekend is when I get in ½ my week's training, biking about 35-60 miles and running 5-10 miles total in the two days. During the week evenings, I work on my research projects/writing and lecture presentations, and I am taking a German class. I try not to do any work stuff on the weekend. The schedule is more open on the weekends since I only have one high-schooler at home now. It was all much tougher when the kids were younger and we had to juggle training time, with no relatives to help.



22. Tell us about your new book "*International Advances in Foot and Ankle Surgery*."

I had been lecturing with two well-known international foot and ankle surgeons, Nicola Maffulli and Kai Olms. We thought we could get the world's experts to write on their preferred topics. There had never been such collaboration between US and other international orthopedists, podiatrists and trauma surgeons. It was all in the name of the science of foot and ankle surgery. It had 65 authors with 45 chapters of which I helped author 16 of them. It took 3.5 years. It's published by Springer and has been selling well. In fact they want to break it up into smaller volumes. It's designed for surgeons who want to "take it to the next level", not a basic book, though students and residents find that they are getting info they've never seen elsewhere.

23. At what point do you recommend surgery to a runner?

When you have pain with daily and recreational activities, despite all reasonable treatment attempts including rest, then you may wish to consider surgery. We do what will get you better as fast and safe as possible. There are risks with any surgery, but with many injuries, surgery is faster and more successful, most often with things like fractures and tendon tears. Most ankle ligament and plantar fascia tears would not need surgery. If your joint has a bone chip or cartilage damage, we would likely recommend surgery so it doesn't cause more damage like an unbalanced car tire. You need to find a surgeon who is sensitive and experienced on operating on runners. I have published a lot on many different surgeries I do and typical return to activity and outcomes, which is severely lacking for most procedures. Frustrating for the patient, so my goal was to document and change this. A lot of my data is now cited as the resource for many procedures and treatment algorithms. That will be my legacy.

24. You work with a lot of top athletes. Do you find their needs are any different than a 12 minute per mile jogger?

Well with elite athletes, we need to get them in quick, and use whatever we can to treat them as safe and fast as possible, often regardless of cost. We do treat everyone like a "pro" in our clinic, because even if you are a 4.5 hour marathoner, we want to help you run that marathon. Keep in mind, some of the reasons elites are elite is that they have better protoplasm, higher pain tolerance and sometimes, better resources.

25. What do you think is the biggest cause of foot injuries?

Getting greedy, too much too soon, improper shoes are the most common. Training error and running on poor surface are common too. But we really don't know what causes a lot of injuries that tend to be more chronic like plantar fasciitis or Achilles tendinitis for instance. Frustrating for doctors and patients alike.

26. When should a runner see a podiatrist?

Whenever they have a foot and ankle problem that they cannot walk, have pain accompanied by swelling, feel a "pop". They can start with their primary care doctor for more chronic or minor things. Unfortunately there is a lot of mis-information on the internet. My web site amolsaxena.com has a lot of updated info. There are some foot related injuries like runner's knee or shin splints (both very generic terms) that can be helped by seeing a podiatrist.

27. How much of your business time is taken up by non-medical type work?

I probably spend an average of 1-2 hours/day working on transcription (chart notes and info) and then messages, for my patients. I serve on some committees but spend very little time in meetings. No one ever said "you are great surgeon, you should go into administration". Once in awhile I'll need to speak with someone from an insurance company or write a special letter.



Photo: Amol's family...picture taken recently in Palo Alto.

28. Do your kids run?

My son did the triple jump in college and is a pretty good all-around athlete now. He was actually doing 200 meter repeats in under 26 seconds so he probably should have been an 800m runner. He now coaches college football and HS track and field. My older daughter runs cross-country and does the steeplechase for Occidental College. My youngest daughter is primarily a dancer, including ballet, but also high jumps 5'. All three went to my HS, Gunn, here in Palo Alto and they get to hear the stories from my HS coach Hal Daner. I actually nailed up the school's first league championship plaque and 15 years later made the first donation for an all-weather track in his honor, but the gals are the ones on the all-time lists.

29. Your father must be very proud of you?

I think he is. He had a very hard life. He came to Stanford on a boat with \$25 in his pocket, (though when I graduated from college I only had \$132 to my name). He's a very driven individual, so some of that is in me, but I have a different way of showing that and dealing with my kids. My HS coach once asked me if I ever worked because he always saw me at my kids' events. My parents never did that, and I do about 4-5 times the volume of a typical podiatrist, so I would say I definitely work, but I know what is important.

30. What challenges have you had to overcome?

What I alluded to above was that it was difficult being not only the first generation of immigrants, but also looking different, coming from a very foreign culture made it tougher. I also went to 10 different schools from age 4-22. I've experienced many things no kid nor adult should ever have to. There was also reverse discrimination to Indians. I

learned very early on life is not a meritocracy. I had a very stressful childhood, then funded my own podiatry school (my wife worked too) then set up solo private practice in one of the most expensive places to live when I already had one kid. We lived very frugally which is something everyone should have to do. Still to this day, we never buy what we don't have money for, a good quality to have ingrained in you.

There have been many battles, politically, etc, since being a podiatrist can have a whole host of inequalities, and as they say it's lonely on the top. When you take care of elite athletes, you sometimes get unrealistic expectations from other patients. When you see as many patients as I do (over 1300 new patients/yr), you have to deal with a lot of different situations and personality types. You cannot be 100%. But I am really glad how my practice turned out. I'm pretty sure no one sees more elite athletes than I, but more importantly, I am documenting treatment outcomes through real research. That's what's gotten me notoriety. It's good to be the king but the crown can be heavy too.

31. What is it like to run the Boston Marathon?

It is amazing. You are like a rock star whether you run 2:10 or 4:10. The fans are awesome. Everyone should try to do it once. I just wish I could run it on an Alter-G loaded on a truck along the way!

32. Is a sub two hour marathon possible?

Anything is possible with time and technology. Eventually it should happen.

33. Should a runner train in a heavier shoe than what they race in?

A lot of people think this will help, at least psychologically. Heavier shoes do increase your VO2 max demands but if you haven't run much in lightweight racing flats, you should ease into it.

34. What do you think about using sport tape to help solve a problem?

Tape helps with "proprioception" or position sense of a joint, but provides little if any support. Certain situations like ankle sprains and strains are benefited somewhat by tape.

35. Why do you think there are more women running races than men now?

Women tend to do sports in groups so as more groups partake in events, the more it multiplies. It's a good way to socialize and exercise for them, plus there are many charity organizations that benefit women. The "buy-in" is easier for them.

36. What's ahead for you?

I'm intrigued by the "second-born son" phenomenon. I may write a book about it. My father, father-in-law, Don Bunce, Buddy Teevens, you, me, and some of my closest friends, we are all so driven, being the # 2 male. JFK and Frank Shorter were, and a high percentage of WWII fighter pilots were also #2 males.

I'll still be cruising along practicing for another 2-3 years, then see how much I can cut back. I'd like to donate as much as possible to my alma mater's, so that's the main reason

I'm still working full time. Problem is, if I have more time to train, I may have more likelihood of getting injured! I may go back to some coaching since my wife does that.

I had a goal of getting a podiatrist part of the US Olympic team, or at least the Track & Field Team when I started practice, but that has become so political and frustrating, I'll let some group like the American Academy of Podiatric Sports Medicine fight for that. They are heavily involved with Special Olympics, but when it comes to mainstream sports, many egos and turf wars combine for a bad over-all athlete resource. Crazy, since we treat so many athletes and foot and ankle problems that are #1 or 2 cause of injury. I had over 30 patients in the last Olympic Trials and 14 made the team. Should be about the same this year.

37. Your family is obviously very important to you. How important is it to sit down as a family for dinner?

Those are priceless. That's when the kids let it all out and as a parent you can sit back and listen. You learn what is important to them. Now that two kids are away from home, we call them up on skype, usually Sunday evening and get caught up. Even though my youngest daughter can drive herself to dance practice (which unfortunately is always during dinner time during the week), I like to at least pick her up if my wife drops her off, so we can get caught up.

38. Do you live by any philosophy?

I live by a few philosophies like Steve Prefontaine's "Giving anything less than your best is sacrificing the gift." I also don't want anyone else to outwork me, meaning I leave no stone unturned and keep up on everything related to my profession, but also like to read the newspaper and current magazines. I also live by Gandhi's "Be the change you want to see in the world."

39. What do you think about my 350 mile challenge (50 races averaging under 7 minute per mile)I am doing in 2012 at age 64?

That is amazing and very fast. No way (sadly) I'd be able to do that.

40. Do you think I am going to achieve this goal?

Absolutely, just stay smart, use "rest" as a good "four-letter" word.

41. You have been running for 40 years, has it been a good ride?

It's been a great ride, brought me experiences and friendships beyond imagination. I just didn't think I'd be riding a bike so much now!