



Preventing Diabetic Foot Disaster



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Q What is the problem with diabetic foot and what is known about it so far?

People with diabetes are at high risk for diabetic foot ulcers, which are painful sores that are slow to heal and often become deep and infected. High blood glucose levels, over time, can reduce blood flow needed to keep feet healthy, and diabetic nerve damage can limit a person's ability to feel a foot sore until it has become very serious. Left untreated, diabetic foot ulcers can lead to amputations. Diabetes is the leading cause of nontraumatic lower extremity

amputations in the United States, and approximately 14 to 24 percent of patients with diabetes who develop a foot ulcer have an amputation. Research, however, has shown that the development of a foot ulcer is preventable.

The American Diabetes Association recommends that people with diabetes take good care of their feet and check them daily for cracks or sores. In addition, people with diabetes should have a complete foot exam every year by a podiatrist.

Q Who Can Get a Diabetic Foot Ulcer?

Anyone who has diabetes can develop a foot ulcer. Native Americans, African Americans, Hispanics and older men are more likely to develop ulcers. People who use insulin are at a higher risk of developing a foot ulcer, as are patients with diabetes-related kidney, eye, and heart disease. Being overweight and using alcohol and tobacco also play a role in the development of foot ulcers.

Q How do Diabetic Foot Ulcers Form?

Ulcers form due to a combination of factors, such as lack of feeling in the foot, poor circulation, foot deformities,

irritation (such as friction or pressure), and trauma, as well as duration of diabetes. Patients who have diabetes for many years can develop neuropathy, a reduced or complete lack of



Diabetic foot ulcers are painful red sores that can appear on the bottom of the foot or on the toes of people with type 1 or type 2 diabetes.

feeling in the feet due to nerve damage caused by elevated blood glucose levels over time. The nerve damage often can occur without pain and one may not even be aware of the problem. Your podiatric physician can test feet for neuropathy with a simple and painless tool called a monofilament.

Vascular disease can complicate a foot ulcer, reducing the body's ability to heal and increasing the risk for an infection. Elevations in blood glucose can reduce the body's ability to fight off a potential infection and also retard healing.

How Can a Foot Ulcer be Prevented?

The best way to treat a diabetic foot ulcer is to prevent its development in the first place. Foot examination at least once a year must be performed by a podiatrist. Many insurance policies cover these services as well as nail cutting for those diabetics unable to safely cut their nails themselves. Some policies also cover shoes for diabetics. I offer these services in my office. As a podiatrist I am dedicated to determine if you are at high risk for developing a foot ulcer and implement strategies for prevention. I perform this routinely in my office and have been able to catch potential problems **BEFORE** they started.

Tightly controlling blood glucose is of the utmost importance during the treatment of a diabetic foot ulcer. Working closely with a medical doctor or endocrinologist to accomplish this will enhance healing and reduce the risk of complications.

You are at high risk if you:

- have neuropathy,
- have poor circulation,
- have a foot deformity (i.e. bunion, hammer toe),
- wear inappropriate shoes,
- have uncontrolled blood sugar.

are a safe bet because they provide good support, shock absorption and protection. If worn frequently they should be replaced every six months. Diabetics should **NEVER** walk barefoot because the slightest trauma could set off a disaster. Wearing the appropriate shoes and socks will go a long way in reducing risks. As a podiatric physician I can provide guidance in selecting the proper shoes.

Learning how to check your feet is crucial in noticing a potential problem as early as possible. Inspect your feet every day—especially between the toes and the sole—for cuts, bruises, cracks, blisters, redness, ulcers, and any sign of abnormality. Any problems that are discovered should be reported to your podiatrist as soon as possible, no matter how "simple" it may seem to you. The key is to nip these problems in the bud before they become an emergency.

The old saying, "an ounce of prevention is worth a pound of cure" was never as true as it is when preventing a diabetic foot disaster.

Please pass this on to all of your diabetic family members and friends to help them maintain happy, healthy feet.

Don't hesitate to contact us for a thorough diabetic foot exam!
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Reducing additional risk factors, such as smoking, drinking alcohol, high cholesterol are important in the prevention and treatment of a diabetic foot ulcer.

Shoes are very important for maintaining good foot health. Sneakers

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