

Pedorthics

Blister Beware: Pedorthists urge special care for diabetic feet

For people living with diabetes, foot problems as seemingly insignificant as blisters, red marks or ingrown toenails can have serious consequences, say experts.

“You are at risk if you have diabetes and any problems with your feet,” says Canadian Certified Pedorthist Brian Scharfstein, C Ped (C).

The “risk” he refers to is amputation. “When I make this point to my clients, I always punctuate it with descriptions of potential complications such as open sores called ulcers, gangrene, and the possible need for amputation of the affected limb,” says Mr. Scharfstein.

Foot problems are the leading cause of hospitalization for Canadians with diabetes.

Approximately 80,000 – 200,000 Canadians currently living with diabetes will be affected by foot problems such as infections and ulcerations. And, of those 14 to 24 per cent will be at risk of losing a lower limb or foot through amputation.

Rudy Puttkammer, 56, has diabetes and was at high risk of amputation before starting pedorthic management with Mr. Scharfstein. Although Mr. Puttkammer was fully compliant with his diabetic healthcare regime, he could barely walk because his feet were progressively deteriorating from severe ulcers and neuropathy had set in as a complication from his diabetes.



Canadian Certified Pedorthist, Brian Scharfstein, C Ped (C) consults with Rudy Puttkammer on a customized pedorthic management program to help improve and maintain the health of his feet and lower limbs. PHOTO: INGRID MISNER

His physician Dr. John Embil, MD, FRCPC, FACP and co-ordinator of the Diabetic Foot and Complicated Wound Clinic at Winnipeg’s Health Sciences Centre, diagnosed Charcot foot, a change of consistency in the bones of the feet which led to multiple fractures and a change of morphology.

After performing the necessary wound care procedures to avoid amputation from this high-risk complication, Dr. Embil referred his patient to Mr. Scharfstein for hands-on pedorthic management to achieve the fine balance required to avoid infection.

When Mr. Puttkammer first consulted Mr. Scharfstein, they

set three main goals: first to heal the wounds, secondly to build the integrity of the feet to help prevent wounds from returning, and thirdly to help him get back to mainstream activities. Mr. Scharfstein off-loaded pressure points on Mr. Puttkammer’s feet to help heal the ulcers through ongoing adjustments to the total contact orthotics and footwear. Mr. Scharfstein also modified the footwear to meet the patient’s lifestyle needs. Additionally, he coaches Mr. Puttkammer on how to inspect his feet for infection and has frequently accompanied him to the Emergency Room for consultations and treatment with

his extended healthcare team.

“It’s essential to empower patients’ success by coaching them on how to look for and communicate changes in their condition,” says Mr. Scharfstein.

Over the past four years, Mr. Puttkammer’s pedorthic management has included ongoing assessment, education, shoe-fitting, shoe-modifications and orthotic adjustments in collaboration with his physicians and other specialized health care providers.

Today, although he is still at risk and requires ongoing treatment, Mr. Puttkammer’s wounds are healed, his feet have rebuilt some resilience

Pedorthic Pointers for Patients

For people with diabetes, A. Brian Stoodley, C Ped (C), C Ped Tech (C) and President of the Pedorthic Association of Canada, recommends the following footcare and shoe fitting tips:

- Check your feet daily by visually inspecting them. Be alert for redness, swelling, broken skin, sores or bleeding. See your doctor immediately if any of these problems arise.
- Always wear shoes around the home – as well as outdoors – to protect feet from injury.
- Wash your feet with soap and warm water every day, but do not soak them.
- Avoid seams over the toe area of your shoes. Seams resist stretching and create bumps that can rub against the skin and cause it to break down or ulcerate.
- Key features for footwear should include soft uppers with minimal seams, firm but cushioned soles, removable insoles, a strong heel and a rockered sole.
- With a prescribing physician's recommendation, pedorthists may also create custom orthotics to "offload" certain risk areas of the foot, or simply to increase cushioning to the soles of the feet.

For more information visit www.pedorthic.ca/diabetes

and he is back to his regular activities including his job as an inventory administrator / receiver.

"Some might think cases like Rudy's are rare but the truth is that these kind of severe conditions are more common than you think," adds Mr. Scharfstein.

According to Dr. Embil, neuropathy, which is the loss of sensation in the foot, is the key reason why persons with diabetes develop foot wounds which may progress to ulcerations. Dr Embil notes that "If some one can not feel an injury to the feet and they keep walking on the damaged tissues, this will lead to the formation of an ulcer. This breach in the skin can serve as the opening

through which infection can start and spread. Decreased circulation known as peripheral vascular disease can lead to delayed wound healing and further worsen the situation."

"A number of people with diabetes often miss the warning signs of possible infection or ulceration because they believe if they are not experiencing pain or discomfort that there isn't a problem," he adds. "Since they don't appreciate pain, injuries may go undetected resulting in a blister, ulcer or infection, ultimately leading to a serious infection."

Dr. Embil recommends that all persons with diabetes should either regularly personally inspect their feet or have their feet inspected by a

family member. In addition, he suggests that regular foot care and appropriately fitted footwear can help in preventing foot complications. Dr. Embil regularly prescribes pedorthic management for his patients as part of their overall diabetic healthcare regime.

Footwear and orthotic experts, Canadian Certified Pedorthists are one of the few healthcare professionals educated and tested in how to assess, modify, design and fit both footwear and foot orthotics.

Mr. Scharfstein says pedorthists work alongside physicians and other healthcare providers as part of a patient's overall health care team.

Among other things pedorthists are trained to trouble-

shoot shoe-fit issues for people with diabetes and help to reduce the risk of amputation by assessing structural features of the foot. Additionally, says Mr. Scharfstein, through orthotics and shoe modifications, pedorthists are able to help alleviate the effects of lower limb and foot abnormalities to help prevent foot problems before they begin.

"It's not just having my feet back again – it's having my life back again," says Mr. Puttkammer in describing his pedorthic treatment.

For more information about Pedorthics visit www.pedorthic.ca ■