FOOTPRINTS

AN INFORMATIONAL NEWSLETTER FOR PATIENTS OF APMA MEMBER PODIATRISTS

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FALL EDITION

REFLECT ON YOUR FEET

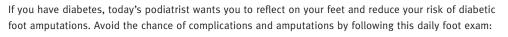


THEY SAY EYES ARE THE WINDOWS TO THE SOUL, BUT FOR PEOPLE WITH DIABETES, THEIR FEET CAN BE THE TRUEST TELL FOR ANY LOOMING HEALTH ISSUES.



People with diabetes can experience nerve damage called peripheral neuropathy, or damage of the peripheral nerves. When nerves are damaged, they don't function properly. People with peripheral neuropathy have decreased or abnormal sensation in their toes and fingers. This means people with diabetes may injure their foot and not know it. These injuries can become infected and lead to amputation.

Although foot amputations are a real possibility for patients with diabetes, seeing a podiatrist twice per year for foot care can reduce amputation rates by 45 to 85 percent. Podiatrists are trained to treat foot conditions that can be caused by diabetes, such as peripheral neuropathy, infection, and ulcers. Be sure you're seeing the most qualified health-care professional to treat your feet by looking for the letters "DPM" after his or her name.



- Check for loss of sensation in the feet, called neuropathy
- Examine skin for calluses, blisters, sores, excessively dry or cracked skin, or any other unusual conditions, especially between the toes
- Look for signs of decreased circulation such as thin, fragile, shiny skin with loss of hair
- Check the feet for extreme temperatures (excessive warmth or coldness)
- Inspect nails for thickening, ingrown corners, excessive length, and fungal infection
- Inspect socks or pantyhose for blood or any discharge
- **Examine footwear** for torn linings, foreign objects like rocks or small pebbles, improper fit, and irritating seams

IF YOU HAVE TROUBLE REACHING
YOUR FEET TO COMPLETE YOUR DAIL)
FOOT EXAM, PROP UP A MIRROR ON
THE FLOOR OR ASK A FRIEND OR
FAMILY MEMBER FOR HELP.





REFLECT ON FEET IN

- Remember to inspect your feet daily. Use the checklist above to prevent ulcers and amputations.
- **Wear thick, soft socks**. Avoid socks with seams, which could rub and cause blisters or other skin injuries.
- **Exercise.** Walking can keep weight down and improve circulation. Be sure to wear appropriate athletic shoes when exercising.
- Have new shoes properly measured and fitted. Foot size and shape may change over time. Shoes that fit properly are important to those with diabetes.
- **Don't go barefoot.** Don't go without shoes, even in your own home. The risk of cuts and infection is too great for those with diabetes.
- Never try to remove calluses, corns, or warts by yourself. Over-the-counter products can burn the skin and cause irreparable damage to the foot for people with diabetes.
- ▶ Look for the "DPM." See a podiatrist at least twice per year, and remember to look for the letters "DPM" after his or her name. Seeing your podiatrist regularly is the best way to ensure that your feet remain healthy.

FAST FACTS

- 1. Over 21 million people in the US have diabetes, and 60-70% of those will develop peripheral neuropathy¹
- 2. People ages 20 and older who are living with diabetes account for about 60 percent of non-traumatic lower-limb amputations²
- 3. Inclusion of care provided by podiatrists for those with diabetes will save our health-care system as much as \$3.5 billion per year³



YOUR FOUR STEP ACTION PLAN

- Step 1—Learn about diabetes. Ask your doctor, do some research, and talk with those who have diabetes. Numerous sources of information are available to help you learn as much as possible about the disease. Involve your family members in the learning process and implement a diabetes management team.
- Step 2—Know your diabetes ABC's and how they impact your health. A1C: This test measures your average blood glucose or sugar level over the last three months. The A1C goal for most people is below 7. Have it checked at least twice a year. Blood pressure: The goal for most people is 120/80. High blood pressure can sometimes lead to poor circulation in the feet of those with diabetes. Cholesterol: The LDL goal for most people is less than 100. The HDL goal for most people is above 40. Your cholesterol levels should be checked at least once a year.
- Step 3—Manage your diabetes & monitor your feet. (1) Stick to a diabetes meal plan. If you do not have one, ask your health care team about creating one. (2) Get 30-60 minutes of physical activity, such as walking, on most days of the week. (3) Ask for help if you feel down. (4) Stop smoking. (5) Take medication prescribed to you by your doctor, even when you feel good. (6) Brush and floss your teeth every day. (7) Report any changes in your eyesight to your doctor. (8) Check, wash, and dry your feet daily. Call your podiatrist immediately if there are sores or open wounds.
- Step 4—Get regular medical care. Daily: Check your blood glucose levels and feet. Once a year: Cholesterol test, triglyceride test, comprehensive foot exam, dental exam to check teeth and gums, dilated eye exam, flu shot, urine and blood for kidney problems, and pneumonia shot. Twice a year: Visit each member of your diabetes management team.

DOCTORS OF PODIATRIC MEDICINE ARE PODIATRIC PHYSICIANS AND SURGEONS, ALSO KNOWN AS PODIATRISTS, QUALIFIED BY THEIR EDUCATION, TRAINING, AND EXPERIENCE TO DIAGNOSE AND TREAT CONDITIONS AFFECTING THE FOOT, ANKLE, AND RELATED STRUCTURES OF THE LEG.



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