

THE RIGHT FOOTING



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“Why did my doctor send me here to have my feet checked when there is nothing wrong with my feet?”

A similar thought ran through my head when I was sent to National University Hospital for training under orthopaedic surgeon Assoc Prof Abdul Aziz bin Mohd Nather from Department of Orthopaedic Surgery, Yong Loo Lin School of Medicine NUS. Thanks to him and his team of podiatrists, I had to eat humble pie. I thought I knew a lot, but I was wrong.

There are many lessons to be learnt on how to teach my diabetes patients to prevent complications, the DO's and the DON'TS of feet care, and how to test for minor neurological impairment and Diabetic Foot.

Diabetes patients do not often think that the circulation in their legs could be impaired and that their skin may be more prone to picking up certain bacterial and fungal infections. Long term complications

of the blood vessels may cause the skin to be excessively dry and more liable to cracks.

Diabetes patients can develop many complications especially if their sugar is not well controlled. One of the most dreaded complication of diabetes is foot problems like gangrene and ulcers.

While many people with peripheral artery disease have mild or no symptoms, some people may have muscle pain or cramping in their legs or arms that is triggered by activity.

If you have a history of diabetes, I advise you to make an appointment with DSS or their doctors to have your feet checked yearly.



DO THE FOLLOWING:

Dry your feet properly with a soft towel.

Use a mirror to inspect the soles and ask for help if your eyesight is poor.

Keep the skin supple by applying moisturising lotion or cream.

Inspect your feet daily in a well-lighted place for:

1. Breaks in skin
2. Cuts
3. Scratches
4. Blisters
5. Sores
6. Discolouration

Have proper foot wear and no high heels for the ladies.

Feet should feel warm throughout and not have spots, swelling or tenderness. For people with diabetes, even minor wounds take longer to heal and require more care.

One has to keep the feet clean and dry daily. Wash your feet thoroughly with lukewarm water using a mild soap.

DO NOT soak feet for more than five minutes and pay special attention to the skin between the toes.

The following are research findings by Medtronic International Ltd:

01

15-30% of patients with lower extremity arterial disease will progress from claudication to critical limb ischemia and lead to amputation.

02

25% of foot ulcers will get infected and 15% of those will require amputation.

03

Every 30 seconds a leg is lost due to diabetes.

04

Two-thirds of elderly patients undergoing amputation do not return to independent life.