

Something's afoot

Diabetes results in a range of complications, including poor circulation, slow wound healing and nerve damage. The feet are particularly susceptible to these conditions.



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One of the major debilitating complications of poorly controlled diabetes — apart from heart disease, kidney failure and potential blindness — is amputation. In Singapore, diabetes-related gangrene is a major problem and contributes to the high rate of leg amputations. About four lower limbs are amputated at public hospitals each day. Foot ulcers precede around 85% of major amputations. Significantly, one in five diabetic patients who undergo amputation die within a year due to multiple complications.

Diabetes and the feet

There are two reasons why diabetes can cause problems with the feet.

One of these is diabetic neuropathy or nerve damage. This affects extremities, particularly in the legs and feet. This means diabetics might not be aware of cuts or sores, and the lack of first aid can increase the risk of infection. In addition, nerve damage results in loss of sensation and affects the muscles of the foot, resulting in malalignment. This creates excess pressure in isolated areas of the foot. Due to a lack of pain sensation, patients are unaware of the problem, and this results in foot ulcers and pressure sores. About one in 10 people with diabetes will develop foot problems and ulcers.

Adding to this problem is peripheral vascular disease, another complication of diabetes. This causes poor blood flow and poor wound healing — factors that increase the likelihood of ulcers or gangrene. Other common foot problems (athlete's foot, fungal

nail infection, calluses, corns, blisters, bunions) are also causes of concern because they may worsen the patient's condition and lead to other complications such as infections.

Essential management

The importance of foot care and foot hygiene as part of a holistic diabetes management plan cannot be overemphasised. Apart from managing your blood sugar levels, it is important to see your doctor every two to three months for checkups, even if you don't have a foot problem. This would involve a thorough check of your feet. Prevention is better than cure, and again, foot care and hygiene are extremely important in the management of diabetes.

Prudent foot care involves:

- Washing feet daily in warm water using a mild soap. Do not soak your feet. Dry them well afterwards, especially between the toes.
- Using a pumice stone to gently smooth corns and calluses while feet are still damp. Move the stone only in one direction.
- Moisturising well after washing. However, do not apply lotion between the toes.
- Doing a daily foot check for any sores, blisters, redness or calluses.
- Checking your toenails once a week and always trimming them straight across. Use a nail file to smooth out ragged edges. Do not trim your nails in a curved fashion.
- Seeing your doctor if you have a foot problem, especially a wound that won't heal. 

