

- Attend regular check up appointments with podiatrist
- Present early with any new symptoms
- Take good care of your other foot

How to contact us:

If you have any questions or concerns please contact us.

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- Department of Diabetes and Endocrinology
- New Cross Hospital, Wolverhampton
- Tel no. 01902 695310
- Monday - Friday 9.00 am - 5.00pm
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- Access to services - if you have any personal access needs or require wheelchair access and wish to talk to a member of staff please call 01902 695310.

If you require this document in an alternative format e.g., larger print, different language etc., please inform one of the healthcare staff.

Punjabi

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Polish

Aby uzyskać niniejszy dokument w innym języku lub formacie, np. pisany dużą czcionką, itp., prosimy skontaktować się z przedstawicielem personelu medycznego.

Russian

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Lithuanian

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Kurdish

ئەگەر تۆم بەلگەنامە بە شێوازیکی دیکە دھخواییت بۆ نموونە چایی گۆرۆتر، ز مانئیکی دیکە هتد. تکلیه یەکیکە لە کارمەندانی سەرپرشتی تەندروستی ئاگادار بکەرۆ.



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Whenever you need health advice and information

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Diabetes

Charcot's Foot Diabetic Neuroathropathy



Dr. Hans Clean says "The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Wash your hands with soap and warm water and dry thoroughly. Use hand gel, if provided, in care facilities.
- If you have symptoms of diarrhoea and vomiting stay at home and do not visit relatives that are vulnerable in hospital or in residential care. You will spread the illness.
- Keep the environment clean and safe. Let's work together to keep it that way. Prevention is better than cure".

What is Charcot's foot and what causes it?

Charcot's foot is a rare but serious complication of neuropathy (nerve damage) usually seen in people with diabetes. Nerve damage leads to progressive weakness of muscles and bones of the affected foot (Figure 1 & 2). Due to these weaknesses the foot bones are prone to fracture or dislocate easily, even in the absence of any major injury. As the pain goes unnoticed from nerve damage, you could continue walking on the foot leading to severe deformities of the foot. As this can be very disabling, early diagnosis and treatment is vitally important. It is therefore important if you detect any changes in your feet that you seek professional help as soon as possible.



Figure 1 Appearance of a normal foot



Figure 2 Appearance of a Charcot's foot

What are the symptoms of Charcot's foot?

The early signs of Charcot's foot are warmth, swelling and redness in the area of the foot or ankle that is affected. These early symptoms may occur suddenly. You may not experience any pain, although deep pain maybe a feature in some cases. Only one foot is likely to be affected in the majority of cases.

Failure to seek help for these early signs of Charcot's can lead to the development of a severe skeletal foot deformity. Changes in the shape of the foot may cause calluses (areas of thickened skin) and foot ulcers to develop.

How is Charcot's foot managed?

Charcot foot is managed by a multidisciplinary team within a Specialist Diabetes Foot Service.

The main aims of treating Charcot's foot are to prevent further bone destruction and deformity.

The management of Charcot's foot is focused on resting, stabilising and immobilising the foot or affected joint. This is best performed by placing the foot in a plaster or a fibreglass cast ("total contact cast") which helps to reduce the pressure on the foot and prevent the development of any new malformations. The cast is regularly replaced in order to observe the affected foot and note the temperature difference between the two feet. The cast remains in place there until your specialist team feel that you are ready to weight bear. This process can take a few months.

Once the Charcot foot is resolved you should use specialised footwear and insoles to protect the foot. The specialist team will ensure you see orthotics to get these.

What other treatments are there available?

Drugs belonging to a group of agents called Bisphosphonates may occasionally be used as it has shown to be effective in some people. These drugs work by strengthening your bones; and multiple courses may be needed.

Surgery may be necessary for people who have severe foot deformities or repeated ulcerations. The aim of such surgery is to improve the shape of the foot and help stabilise the bony structures of the foot.

If you have Charcot's foot – what can you do to help yourself?

Work with your multidisciplinary team to ensure:

- Good control of your diabetes
- Closely follow medical advice
- Avoid weight bearing