

“My Feet are Killing Me”

As a foot and ankle specialist not a day goes by when a patient says to me or our staff, “my feet are killing me.” And no wonder, the average American walks 5,000 to 7,000 steps a day – nearly 100,000 miles in a lifetime. With each step, 1.5 times of your body weight pressure is applied to your foot so having one’s feet killing them makes perfect sense.

To the diabetic patient who also has a foot deformity, neuropathy, has poor circulation and neglects repetitive minor trauma to their feet literally draws reality to this phrase “my feet are killing me”.

So what is the connection with “my feet are killing me” and diabetes?

First of all, diabetes is currently the sixth leading cause of death and is associated with a higher frequency and intensity of conditions with the presence of large blood vessel diseases (heart attack, stroke, peripheral arterial disease (PAD)) and small blood vessel disease (blindness, kidney disease, nerve damage). Among these diabetic foot patients, 15% will develop a foot ulcer, and 12%-24% of those with a foot ulcer will require amputation. Unfortunately, not all diabetics have the normal ability to feel pain and should report to their physician any sore or blister that don’t immediately begin to heal. The five-year mortality rate after diabetes-related lower extremity amputation is nearly 50 percent. This is higher than many types of cancers and more than breast cancer and AIDS combined. Since diabetic foot ulcers are preventable and treatable, it’s more important than ever to confront this deadly epidemic head on.

Once a diabetic foot ulceration has occurred, it is important to seek out immediate medical care either by your PCP, your podiatrist or wound care professional. The good news is with early detection, targeted diagnostic testing and aggressive treatment; amputations maybe limited to those cases of life-threatening infection, untreatable blocked arteries or inability to correct a foot/ankle/leg deformity.

The best way to save lives and limbs or to minimize the more serious complications is to prevent the development of a foot ulcer in the first place. Recommended guidelines include seeing a podiatrist on a regular basis. Your podiatrist can determine if you are at high risk for developing a foot ulcer and implement strategies for prevention.

You are at high risk if you have or do the following:

- Neuropathy (nerve damage)
- Poor circulation
- A foot deformity such as bunions, hammer toes, or deformity that causes callous/corns
- Wear inappropriate shoes
- Uncontrolled blood sugar
- History of previous foot ulceration

- Previous amputation
- Kidney disease which requires dialysis

Reducing additional risk factors, such as smoking, drinking alcohol, high cholesterol, and elevated blood glucose, is also important in prevention and treatment of a diabetic foot ulcer as well.

So the next time you hear a friend or family member say, “My feet are killing me”, what if it is something more serious? Don’t let them dig their heels in, help them take action and preventative measures for a long life of happy feet.

If you believe you, or someone you know, may have a diabetic foot ulcer, you can receive a professional consultation with a wound care specialist through Washington Health System by calling 724-223-6903. For more information on diabetic foot ulcers, treatment and prevention, please go to whs.org and click on services, scroll and click on Wound & Skin Healing Center.

~ James A. Marks, DPM
Medical Director
Washington Health System Wound and Skin Healing Center

Dr. Marks and his partner, Dr. Nicholas Lowery who also specializes in Reconstructive Foot and Ankle Surgery and Fracture Care, are proud to have built a reputation for delivering quality foot and ankle care with sincere friendliness and compassion. To learn more about their practice, Washington Health System Foot and Ankle Specialists, located in Washington, PA, visit whsdocs.org. New patients are welcome ~ For appointments, call 724-222-5635.