What other treatment will I get?

- You will need regular appointments with a member of the specialist diabetes foot service to check the temperature of your foot
- You will have an X-ray when needed
- You may need prescription footwear supplied or a podiatrist with specialist training in prescribing footwear.

Prescription footwear can reduce the risk of ulcers, but cannot remove the risk altogether.

How can I help my condition?

You should follow the medical advice you are given. You will need to keep your weight off your foot as much as possible, as Charcot foot can be very disabling, especially in the early stages, if it is not treated appropriately.

The following advice will help you manage your condition.

- Keep your diabetes under control by following the advice you have been given in the past
- Keep checking your other foot between appointments with your specialist foot service, following the care and advice you have been given about protecting this foot. Make sure you wear the correct footwear as there will be more pressure on your foot, which could cause a further problem.
- You can get advice from your specialist diabetes foot service about weight-bearing, and aids such as crutches, sticks and wheelchairs that can help keep the weight off your foot.

Your specialist diabetes foot service is here to support you, help you manage your Charcot foot, offer advice and answer any questions you may have.

When your condition has settled down

Even with the appropriate treatment there may be some changes in the shape of your foot. If you need prescription footwear and insoles, you will need to have regular check-ups with a podiatrist and maybe an orthotist with specialist training. If you smoke, you are strongly advised to stop. Smoking affects your circulation and can increase the risk of amputation.

If you discover any problems with your feet, contact your local Podiatry Department or GP for advice immediately. If they are not available, go to your nearest accident and emergency department. Remember, any delay in getting advice or treatment when you have a problem can lead to more serious problems.

Individual advice
Your next screening is due:
Month:
Local contact numbers Multi-Disciplinary Foot Care Team: Podiatry Department or Foot Protection Team:
GP clinic:
Based on the original leaflet produced by the Scottish Diabetes Group - Foot Action Group, with help from service users Owned by the College of Podiatry © Published date: July 2016 Review date: July 2019 We would welcome your feedback on this leaflet. Please send it to the College of Podiatry at footlit@scpod.org www.feetforlife.org/footcareleaflets



Diabetes information and advice to help your life and limbs

This leaflet is for all patients, including children over the age of 12, who are diagnosed with diabetes



Diabetes is a lifelong condition which can cause foot problems. Some of these problems can occur because the nerves and blood vessels are damaged.

Charcot foot (Charcot neuroarthropathy) What is Charcot foot?

The Charcot foot is a very serious complication of diabetes that can develop if you have nerve damage (peripheral neuropathy) in your feet.

Charcot foot can make the bones of your foot become fragile, which means that they may break or dislocate easily, even if you don't injure them badly. Most patients cannot recall injuring their feet at all. If you have peripheral neuropathy in your feet, you may still be able to walk on your foot after injuring it without feeling any pain. If this happens, your foot can become severely deformed. The shape of your foot will not return to normal, and this can make it very difficult to find shoes that fit properly. It is important that you notice any problem early and get professional help.

Note: Any change to the shape of the foot increases the risk of foot ulcers.

Serious risks linked to Charcot foot can occur with or without diabetic foot ulcers, which are breaks in the skin that struggle to heal. Charcot foot with or without ulcers is a very serious complication, as it is linked to an increased risk of heart attacks, strokes and foot amputation.

Controlling your diabetes, cholesterol and blood pressure, quitting smoking, increasing cardiovascular exercise and controlling weight helps to reduce the risk of these life- and limb-threatening problems.

People with Charcot foot will need to ask their Diabetes team about non-weight-bearing cardiovascular exercise, so as not to risk further harm to the damaged foot.

Note: You may be at further risk of cardiovascular problems if you have a family history of heart disease.

How will I know if I've got Charcot foot?

The early signs of Charcot foot are swelling and warmth in the affected area of the foot or ankle. There may be some redness, which is sometimes mistaken for infection. Usually there is no pain (because of nerve damage), but this is not always the case. In most cases only one foot is affected. However, in some rare cases people can develop Charcot foot in both feet, although not at the same time. Your foot may become deformed if you do not get appropriate treatment early enough and you continue to walk on it.

Who will treat my foot?

Ideally, your Charcot foot should be treated and managed by a specialist diabetes foot service. This may be made up of a variety of health-care professionals or an individual with experience in treating this condition.

Charcot foot can be a very serious condition and can be difficult to diagnose, treat and manage, so it is important that it is treated and managed by experienced health-care professionals.

What is the aim of my treatment?

There are two important aims of treating Charcot foot.

- Preventing a permanent change to the shape of your foot
- Preventing future problems

What will the treatment consist of?

The only treatment is to reduce the weight on the foot or affected joint and prevent it from moving. This is done with some form of cast (in the same way as if you had broken a bone). You will have to wear this cast up to three times longer than someone who does not have diabetes and who has suffered the same injury. The treatment you receive will depend on the method of treatment that your local specialist diabetes foot service prefers.

Treatment options

- A plaster cast that your health-care professional will regularly review and change when needed
- A cast walker with a prescription insole that your health-care professional will regularly review

Both of these methods of treating Charcot foot have been proven to be successful, but you will need to closely follow the advice you are given.





















