Type 2 diabetes: Prevention and management of foot problems

National Institute for Clinical Excellence

Citation

Authors' objectives
This report provides guidelines on the prevention and management of foot problems in type 2 diabetes.

Authors' conclusions
Key priorities for implementation
- Effective care involves a partnership between patients and professionals, and all decision making should be shared.
- Arrange recall and annual review as part of ongoing care.
- As part of annual review, trained personnel should examine patients' feet to detect risk factors for ulceration.
- Examination of patients feet should include:
  - testing of foot sensation using a 10 g monofilament or vibration
  - palpation of foot pulses
  - inspection of any foot deformity and footwear.
- Classify foot risk as:
  - at low current risk
  - at increased risk
  - at high risk
  - ulcerated foot.
- Care of people at low current risk of foot ulcers (normal sensation, palpable pulses)
  - Agree a management plan including foot care education with each person.
- Care of people at increased risk of foot ulcers (neuropathy or absent pulses or other risk factor)
  - Arrange regular review, 36 monthly, by foot protection team.
  - At each review:
    - inspect patients feet
    - consider need for vascular assessment
    - evaluate foot care education.
- Care of people at high risk of foot ulcers (neuropathy or absent pulses plus deformity or skin changes or previous ulcer)
  - Arrange frequent review (13 monthly) by foot protection team.
  - At each review:
    - inspect patients feet
    - consider need for vascular assessment
    - evaluate and ensure the appropriate provision of:
      - intensified foot care education
      - specialist footwear and insoles
      - skin and nail care.
  - Ensure special arrangements for those people with disabilities or immobility.
- Care of people with foot care emergencies and foot ulcers
  - Foot care emergency (new ulceration, swelling, discolouration)
  - Expect that team, as a minimum, to:
    - investigate and treat vascular insufficiency
    - initiate and supervise wound management
    - use dressings and debridement as indicated
    - use systemic antibiotic therapy for cellulitis or bone infection as indicated
    - ensure an effective means of distributing foot pressures, including specialist footwear, orthotics and casts
    - try to achieve optimal glucose levels and control of risk factors for cardiovascular disease

Final publication URL

Indexing Status
Subject indexing assigned by CRD

MeSH
Diabetes Mellitus, Type 2 /complications; Diabetic Foot /prevention & control /therapy

Language Published
English

Country of organisation
England

English summary
An English language summary is available.

Address for correspondence
Health Technology Assessment (HTA) database
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AccessionNumber
32004000101

Date bibliographic record published
09/02/2004

Date abstract record published
09/02/2004