Invited speaker presentation
A new team approach to the care of the diabetic foot
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Abstract
There has been considerable progress in the understanding of the diabetic foot as well as in its prevention and management. Multidisciplinary clinics that have enthusiastically incorporated these advances into their programmes have achieved a substantial decrease in major amputation rates. However, widespread reduction of amputations has not been achieved in Europe. The target of 50% reduction in the number of amputations set in the St Vincent Declaration has not been reached and worldwide, the numbers of amputations are rising.
As we begin the 21st century, we need a new approach to the diabetic foot. This entails a simple classification, a new staging system and a multidisciplinary management.

The classification is divided into the neuropathic and neuroischaemic foot. The natural history of the diabetic foot can be divided into the following stages.

Advances have been made in the understanding and treatment of all stages. Multidisciplinary management involves wound, mechanical, microbiological, vascular, metabolic and educational control.

Tight control of blood glucose, blood pressure and lipids is extremely important to preserve neurological and vascular function in Stage 1. In Stage 2, a large randomised controlled trial demonstrated that amputation rates among people at high risk of ulcers can be significantly reduced by a foot protection programme and is cost effective. Charcot deformity is important risk factor for foot ulceration and advances have been made in its pathophysiology and management.

In stage 3, advances have been made in the understanding of the pathophysiology of foot ulceration and in new therapies aimed at the mechanical and ischaemic aetiologies of foot ulceration. Novel technologies have been developed to accelerate wound healing.

In stages 4 and 5, major advances have taken place in the revascularisation and soft tissue reconstruction of limb salvage surgery, including those patients in end stage renal failure.

Exciting advances have taken place. These should lead to a universal reduction in the morbidity and mortality associated with diabetic foot disease in the 21st century.