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# How What We Eat Effects Our Feet

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GENESYS

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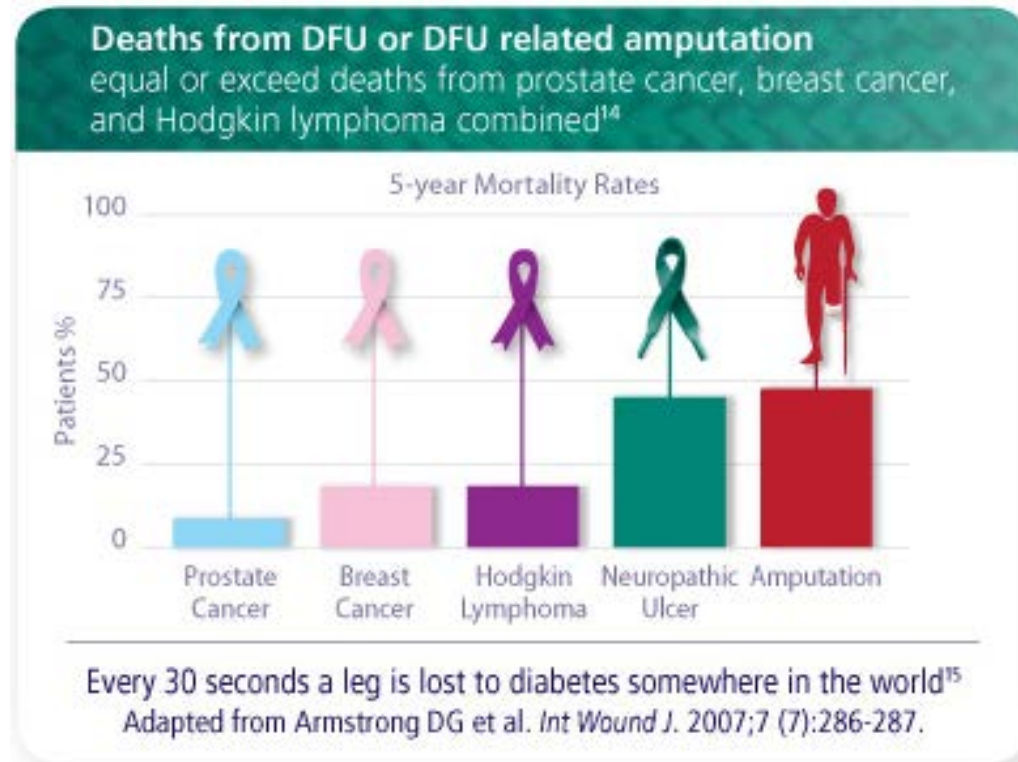
One Mission. One Integrated Ministry. One Ascension.



## Objectives

- Identify the connection between blood glucose levels and foot complications
- Be able to treat and further prevent foot wounds through nutrition education
- Acquire skills to ask patient focused questions to better assist them in controlling their blood glucose
- Gain experience through real patient case studies

## Why we are really here



## In the Know

- Uncontrolled Diabetes- Type I or II, resulting in severe highs and lows in ones blood glucose level, over a prolonged time period
- Non healing foot ulcer- If the wound does not heal within four weeks- aggressive treatment is needed

# Uncontrolled Diabetes = Foot Complications



## Wagner's Scale

- GRADE-0 HIGH RISK FOOT NO ULCERATION
- GRADE-1 SUPERFICIAL ULCER
- GRADE 2 DEEP ULCER (CELLULITIS)
- GRADE 3 OSTEOMYELITIS WITH ULCERATION OR ABCCESS
- GRADE 4 GRANGRENOUS PATCHES.
- GRADE 5 GRANGRENE OF FOOT

## Case Study I

- 68 yr old M
- Wagners III
- Osteomyelitis of Great toe
- Type 2 DM: A1C 11.2
- Wound for 2 months
- Improperly fitting shoes
- No documentation of BG checks







## Case Study I- Take Away

- Check feet on daily basis
- Blood sugar control
- Proper shoes
- Aggressive wound care
- Infection Control



## Case Study II

- 56 yr old M
- Wagners II
- Type 2 DM: A1C 10.4
- Wound for 4 months
- Pebble in shoe  
insensate foot
- Protein food choices:  
Jello and Cheetos





## Case Study II- Take Away

- Check shoe before wearing
- Daily foot checks
- Control blood sugars
- Diet education



## Case Study III

- 72yr old M
- Wagners IV and V
- Type 2 DM: A1C 12.2
- Wound for ? Months
- Was on see food diet  
(He saw it he ate it)





## Case Study III – Take Away

- Can't bring back the dead
- Wound care & diet education
- Blood sugar control
- Blood flow restored
- Transmetatarsal amputation



## Case Study IV

- 42 yr old F
- Wagners V
- Type 1 DM: A1C 12.4
- Wound for 4 months
- Didn't like doctors
- Did not take insulin
- Lost Insurance for several months



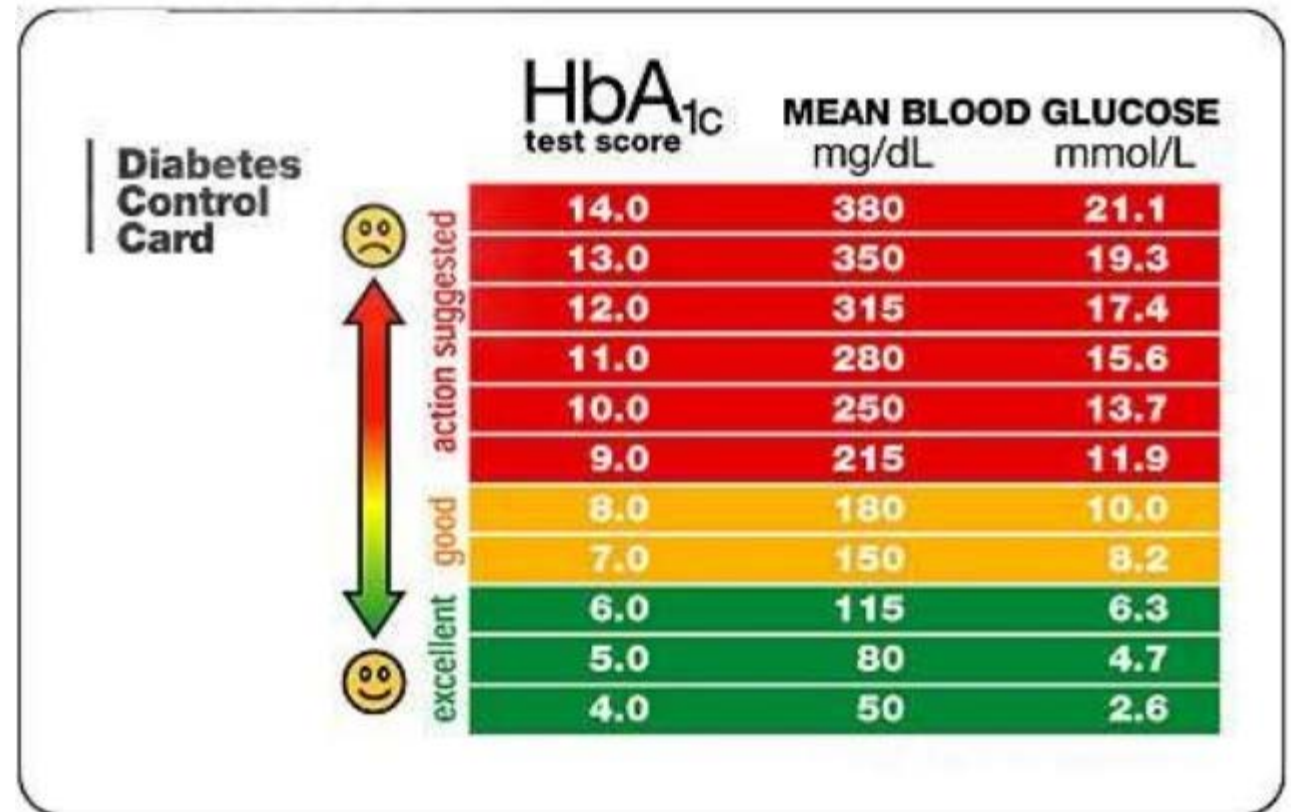




## Case Study IV Take away

- Blood sugar control
- Blood flow restored
- Ended in a above the knee amputation
- A1c- 12.0

What Should your A1c Level Be?



## Treatment

- Lab work
- Evaluate blood flow
- Localize wound care
- Debrided non viable tissue
- Off loading shoes
- Aggressive infection control
- Topical treatment





## Prevention- Blood Glucose Control

- Understanding the 4 M's:  
Move, Monitor, Meals,  
Meds
- Basic CHO counting-  
practice makes perfect &  
inspect what you expect
- Meal timing and sleep  
habits
- Why test my blood  
glucose?!
- Support system



## Prevention- Foot Care

- Daily Foot Checks
- Tight blood sugar control
- Diet
- Blood flow evaluations
- Off loading shoes
- Wash feet daily
- Moisturizers feet avoid webs of toes
- Toe nail care
- Do not remove own callous' or corns



## Get to know the whole patient- Not just the hole in the patient

- Home life/ Work life
- Hobbies
- Food Preferences
- PMH
- Small obtainable goals





## Get to know the whole patient- Not just the hole in the patient



## You are what you eat & you only have one set of feet

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## Thank you! Questions?



**“The red circles are your red blood cells.  
The white circles are your white blood cells.  
The brown circles are donuts. We need to talk.”**