Monthly Newsletter The Footcare

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Foot Pain in Rheumatoid Arthritis

As many as 80-90% of people with rheumatoid arthritis will eventually experience problems with their foot joints. About 50-60% of patients have symptoms of foot and ankle pain within the first year of diagnosis.

Despite the high occurrence of foot problems in rheumatoid arthritis, unfortunately, they are often left unattended in patients with this condition.

Rheumatoid arthritis is an autoimmune, inflammatory condition that targets the joints. Autoimmune refers to a person's own immune system forming antibodies that attacks the own bodily tissues. The triggers are often not known.

In the case of rheumatoid arthritis, antibodies are formed against the tissue lining each joint called the synovial tissue.

The joint lining becomes inflamed and swollen after prolonged antibody attacks. Eventually, the joint and its surrounding ligaments and tissues become destroyed.

Rheumatoid arthritis is a disease typically depicted as affecting the small joints of the hand such as the fingers, wrists and thumbs. Like the hand, the feet are built from many tiny bones (26 in fact!), with each bone connected to the next with tiny joints. It is no wonder that rheumatoid arthritis also has an inclination for attacking the foot.

Foot pain, for example in the ball of the foot, is the most common foot symptom experienced by patients with rheumatoid arthritis.

Contact Your Podiatrists

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Oh No!!

In Jan, we had 10 patients that failed to attend their appointment!



Foot Pain in Rheumatoid Arthritis (Cont'd from previous page)

Corns and bunions may also develop. Bony deformities occur as the joints are affected by the disease, leading to claw toes or hammer toes. Weakened ligaments result in the bones of the foot shifting position as well as the arch of the foot collapsing, a condition known as flat feet.

As such, special shoes are necessary in patients with rheumatoid arthritis to ensure that foot deformities do not develop and to provide comfort in the case where the deformities are already present.

Custom prescribed orthotics can be helpful for those with foot pain and in the treatment of 'flat feet'. As such, regular podiatric visits should be part and parcel of managing rheumatoid arthritis.

In addition, having good control of the disease is a key factor in ensuring that these symptoms are minimized, as they are difficult to reverse once the damage has been done.

A rheumatologist will generally manage the overall disease. Among others, a group of medications called disease-modifying anti-rheumatic drugs (DMARD for short) are methods of treating rheumatoid arthritis. In addition, pain medication or steroid injections are effective in dealing with the debilitating pain associated with Rheumatoid Arthritis.



Latest Technology in Diabetic Wound Care

Diabetic wounds have the potential to cause tremendous decreases in quality of life. As such, the healthcare sector has been working hard to develop more advanced treatment methods to ease the burden of what it means to have a diabetic foot wound.

Skin ulcers in diabetic patients are notoriously difficult to heal. A major obstacle in diabetic

wounds is that diabetic patients intrinsically have a lesser capability of healing wounds compared to those that do not have diabetes.

The latest research is focused on methods that stimulate skin cell regrowth in diabetic foot ulcers.

Latest Technology in Diabetic Wound Care

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An innovative study by researchers from the U.S. has shown for the first time, that it is possible to induce skin cells to regenerate by themselves to heal the wound. The team first extracted skin cells from the wounds of diabetic patients and genetically reprogrammed them to turn into the cells called induced pluripotent stem cells (iPSCs).

Just like how we grew from just a few cells to become complex organisms, iPSCs have

properties of early life cells and can grow and mature into different kinds of cells in the body depending on its cellular environment.

Other avenues of stimulating skin cell regrowth have also been explored. One example is dermal regeneration matrices (Omnigraft ™). This plaster is made of shark cartilage, cow collagen and silicone. It serves dual functions as both a protective device and also to quicken healing when placed over the wound.



It was recently approved by the Food and Drug Administration of the United States early 2016 and hopefully will be more widely available in the coming years.

Scientists are also working on medications called growth factors that aim to promote healing in diabetic wounds. Amongst the substances that are currently being investigated are platelet-rich fibrin derived from the patient's own blood, recombinant human epidermal growth factor, vascular endothelial growth factor and many more.

Current standard of care of diabetic wounds encompass proper blood sugar control,

wound cleaning (debridement), adequate dressing and education on the prevention of diabetic wounds. Despite this, diabetics have a 34% chance of developing a second foot ulcer within a year of getting their first. Multiple ulcers lead to higher risk of complications such as infection and amputations.

Given the tremendous need for better forms of treatment, the wound management sector is set to skyrocket to a USD\$18.5 billion dollars market worldwide by 2021. We look forward to keeping our eye on emerging research.

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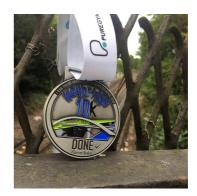


The Footcare Centre are official race time sponsors of the Weybridge 10K race again this year.

The event is taking place on Sunday 1st April 2018. A bigger & better race, in the heart of Surrey.

So far this year we have 817 runners expected to attend, the limit is 1200, so hurry and go to www.weybridgesports10k.co.uk to enter now.





Thanks for reading our newsletter; we hope you've gained valuable insights!

For any enquiries regarding foot care or injuries, do feel free to contact us (see details left).

Thanks for your support!

The Care,
Professionalism and
Time that your feet
deserve



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