

## Summary

- *Decide with the patient that footwear is a problem for them.*
- *Check the current footwear provision*
- *Discuss with the patient what they consider to be necessary for a satisfactory shoe*
- *Does this match with your goals as a practitioner*
- *Outline to the patient what you hope the therapeutic footwear will achieve*
- *Ascertain whether the patient would wear therapeutic footwear if prescribed*
- *Discuss fastening types the patient requires such as laces, Velcro, buckles etc. which may be dependant on the patient's ability to bend over.*
- *Decide on sole types as these can be ridged for extra grip or smoother if necessary for ease of movement*
- *Do you want any special insoles inside the shoes?*
- *Provide as much information on the prescription to the Shoe Team as possible, so they can match the therapeutic footwear to the therapeutic goals you want the shoes to achieve.*

Other Leaflets in this series:

- “Buying Retail Shoes”
- “Advice for Low Risk Feet”
- “Advice for Increased Risk Feet”
- “Advice for High Risk Feet”

## References:

- Burns SL et al 2002  
“Older people and ill fitting shoes”  
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- MacFarlane DJ et al 2003  
“Factors in Diabetic Footwear Compliance”  
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# Chiro-pods

## Therapeutic Footwear for people with Diabetes



**This guide for NHS staff is part of a series dealing with issues affecting people with Diabetes**

**When is the right time to prescribe therapeutic footwear for people with diabetes?**

Web Site: <http://www.chiro-pods.co.uk>

## Assessing Footwear

Before deciding if Therapeutic Footwear is the answer, you need to ascertain whether in your opinion their present footwear is a problem for them. Firstly ask the patient whether they have problems finding shoes that fit or whether some or all of their current shoes cause foot lesions such as abrasions; blisters; corns; callus or even ulceration.

The patients' perception of good fit may be flawed due to neuropathy which may occur in 40% of people with diabetes (Mayfield et al 1998) and in one study 72% of people were wearing shoes that did not fit. (Burns et al 2002)

Prescribing footwear before the patient has acknowledged they have a problem with their shoes will only lead to the shoes being left in a wardrobe never to be worn. To be effective therapeutic shoes have to be worn for 60% of the time (MacFarlane 2003)

You need to decide whether you believe the patient's present footwear is causing the problem or whether they have now realised the previous shoes were causing the existing problem and are now wearing adequate footwear. If the latter is the case and you feel the current footwear is good, and then you may not need to proceed with a therapeutic footwear prescription.

### Testing whether footwear fits

The main measure a patient looks for in a shop would be length based on an English, American, or European sizing system (see leaflet "Buying Retail shoes") and if we are lucky they may have considered width. Generally the other main criteria are style, colour, heel type and what function the patient wants the shoe to perform. Do they wear shoes to increase their height? Do they wear them to look good? Do they wear them for certain activities such as rambling, dancing or any other sporting activity?

If a patient has neuropathy they may have bought shoes too small so they can "feel" the shoes are a "good" fit. In this way just asking the patient or looking from above whether the shoes fit is very misleading. Also it is best not to wait until a lesion develops before investigating if the shoes are too small.

### So in a busy clinic how can we quickly judge shoe fit?

If the shoe has a removable internal insole, remove it and place it on the floor. Place the patient's foot on the insole, lining it up with any distinctive wearmarks. Does the foot overlap the insole at any part?

Since the insole represents the internal dimensions of the shoe in terms of length and width, any overlap has to involve the foot being under pressure at that point. Do these overlaps match any lesion developments?

Alternatively draw around the foot onto thin card and cut out the template this can be slid inside the shoes and the fit assessed by reviewing how the template looks inside the shoe.



### Depth of the shoe

The depth of the foot can be quickly gauged by placing your forefinger on the dorsum of the highest toe and your thumb on the plantar aspect of the foot using a motion that tries to bring the tip of the forefinger and thumb together with the patient's foot between them. Try to keep them at that distance when you remove

them from the foot and indicate to the patient the gap between your finger and thumb as the height of their foot and then show the patient how this compares to their shoe.

### Inside the Shoe

Next feel inside the shoe to see if any rough stitching, seams or worn soles could be causing any problems. Again patients with neuropathy may not realise they have worn right through the inner sole and are standing on sharp ridges, staples or nails.

### Retail or NHS supplied Footwear?

Now if you decide the footwear is a problem, could it be solved if the patient bought appropriate retail shoes? If yes offer the "Buying shoes" leaflet.

Are the feet too wide or have too great a deformity to be fitted into shop bought shoes? Have the feet been graded as high risk due to previous ulceration or are currently ulcerated?

If yes then consider the provision of therapeutic footwear to help prevent further ulceration or lesion development.

The difference between retail shoes and diabetic specification footwear is that the therapeutic footwear has softer leather uppers, soft plush or leather linings and no rough internal seams. Also therapeutic footwear are made on a series of deeper and wider lasts than retail footwear or made to specially made lasts individual to that patient (Bespoke) and all therapeutic footwear can be provided with a variety of fastenings

Each consulting room has an Appliance form for referral to the Shoe Prescription Team: the Orthotist or the Diabetes Specialist Podiatrist with advanced training in therapeutic footwear prescription.

Please give as much information as to what you want the footwear to achieve therapeutically.