

# FOOTSTEPS

**NOVEMBER 14-16, 2019**  
**MIAMI, USA**

**World Congress of the**  
**International Federation of Podiatrists**  
*Global Voice of Podiatry*

# JOIN US!



A Congress for PODIATRISTS by PODIATRISTS  
[www.podiatry2019.org](http://www.podiatry2019.org)

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Executive director of the FIP-IFP: [info@fip-ifp.org](mailto:info@fip-ifp.org)*



## Message of the President - Autumn, 2019

As President of the International Federation of Podiatrists I would like to draw your attention to the importance of an event like a congress/conference, at national, European, or International level.

It is beside a moment for scientific learnings and clinical knowledge gathering, a moment of exchange on our profession. And our profession, it advances, it evolves and it professionalises.

As you know, the International Federation of Podiatrists works towards a better recognition in our area of expertise: podiatry.

Last year at the General Assembly Federation the 26 member association came to the definition and that unanimously of what is the heart of our profession. You will observe that we are talking about health sciences, that research comes first, followed by the prevention of diagnosis and treatment. All based on scientific and professional knowledge.

My colleagues French podiatrists are well placed in the range of skills that are recognized, like the right to diagnose and prescribe, making him/her potentially a

medical profession with defined skills more than a allied health profession. At the European and even worldwide level, some countries give podiatrists an even larger scope of skills and competences. In other countries, everything remains to be done.

I would simply insist that it is through education and research that our profession can build knowledge, and speak with a voice recognized by its peers. I am hopeful that the events organised in 2019 are of a scientific high-level that will encourage sharing even more at the international level. The World Congress of Podiatry, taking place in a few weeks supports this vision. I' m looking forward meeting you there!

Safe travels and see you in Miami!

**Christian JÉRÔME**  
President of the FIP-IFP

# International Symposium on the Diabetic Foot

*"This Symposium, held once every four years, is the largest and most prestigious meeting devoted to lower extremity problems in diabetes. It has accomplished this unique position by bringing together delegates from many specialties and the leading experts in various fields, both from all over the world. Participating in this event will give you the unique opportunity to communicate with members of your target groups and the experts-in-the field."*

Professor Nicolaas C. Schaper  
Chair of the ISDF2019



The International Federation of Podiatrists had the opportunity to promote the World Congress during ISDF. At this edition our friends from D-Foot International had the opportunity during a symposium to present their work. Of course the POINT Project received an important focus. Print outs of the project were distributed during the session as well as during the poster presentation of Mrs Pauline Wilson. It is a fact that at the 2023 edition the FIP-IFP will be more involved! We are already looking forward to it!

Do you wish to learn more? The abstract book is available for download:  
<https://diabeticfoot.nl/abstractsubmission/>

## International Podiatry for the third time @EWMA

The key sessions at EWMA 2019 include a mix of new topics that are important to the European wound community in general, in addition to topics that have had enormous appeal during previous EWMA conferences. The sessions deal with the advancement of education and research in relation to the epidemiology, pathology, diagnosis, prevention and management of wounds. Besides the key sessions other medical tracks are available for attendees. This year also the FIP-IFP was invited for a track. These were the presenters and the topics:

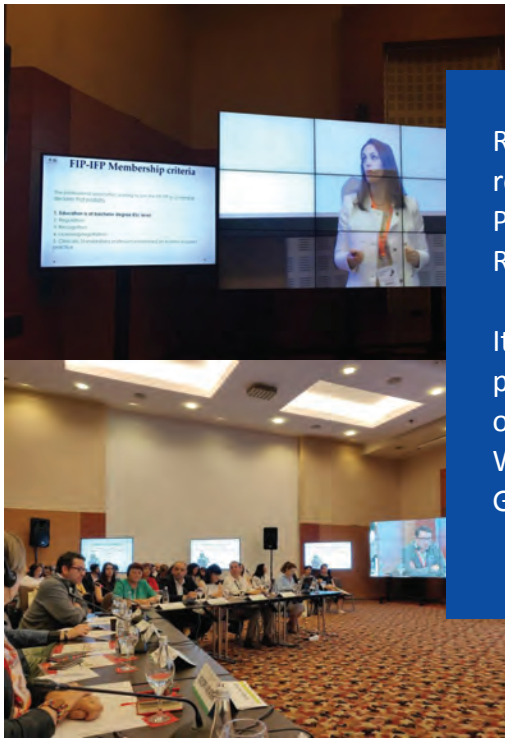
- The Value of Podiatry in the Diabetic Foot care and in the multidisciplinary teams around the diabetic foot by Minna Stolt
- A clinical example: Is the Plantar pressure analysis useful for Diabetic patients by Carlos Verges Salas
- Point project and its value for European countries by Pauline Wilson

Next year EWMA will be organised in London from 13-15 May 2020. We are already very much looking forward!





# The 3th National Congress of Podiatry in Romania



Romania is very active in establishing podiatry; In January 2019 they received the recognition by the government to protect the title of Podiatry and for the third time in June, the Association for Podiatry in Romania organized a congress with international participation.

It was a great event where FIP-IFP's Executive Director was invited to present a lecture on the Growth of Podiatry, past challenges and future opportunities. Other international speakers were invited like Pauline Wilson, Lee Rogers, Kristien Van Acker, Cynthia Formosa and Alfred Gatt to name just a few!

## Nordic Countries Meeting



In the margin of EWMA, the European Council of Podiatrists held a Nordic countries meeting. The ECP presented the FIP-IFP reshape suggestions to establish the future of European Podiatry. The discussion followed around "Moving towards a higher level of Podiatry – What does it mean/what does it imply". The day ended with a very interesting group discussion on the role the FIP-IFP could play in moving towards a higher level of Podiatry throughout the Nordic countries. All participants at the meeting made some good conclusions and takeaways to further build podiatry in the Nordic Countries.

# Message of the Executive Director

Every morning since a few weeks when I move back in front of my computer to check the latest news on the World Congress of Podiatry, I wonder why we organise this event? But then when I see the program taking shape, the registrations filling up and the companies who contact me at least once a week to show interest, I remember the many reasons why it is important as the International Federation of Podiatrists to organise the World Congress. It is one of the most widely recognised activities of the International Federation. Since its inception in 1966, this world class event serves to be the largest gathering of international podiatrists who will join together as colleagues from over 40 countries. Besides the place to showcase the latest trends in podiatry and bring scientific knowledge to the table, the congress is also the place where the world of Podiatry can gather, exchange knowledge and best practices and make worthwhile connections.

The diversity in scope of practice doesn't allow the Federation to offer CPD during the year, but at the World Congress the diversity of speakers and subjects allows to get an overview of what is happening in the world of Podiatry.

Moreover, the World Congress supports the community, a group of people that take care of each other and feel they belong together. A community has two unique elements: relationships and shared identity. This relationship is built during the congress and the social activities organised during the event and the shared identity by showing the scope of practice of podiatrists worldwide and inspire all podiatrists with good practices from around the world.

More than any (medical) profession in the world, podiatrists need to get together and speak out loud towards the need to strengthen the profession. This world congress will show again what amazing profession we are and the added value podiatrists bring to the patients.

So, every evening since a few weeks when I close down the computer, I'm happy that I can support the World Congress for taking place and create such a great event. I'm looking forward to seeing you in Miami and make this World Congress a congress to remember.



## See you in Miami. Caroline



## AGM & World Congress of Podiatry in less than 1 week

“The General Meeting meets once per year in the first six months or at the time of the FIP World Congress following approval by the prior General Meeting” Section XI – ANNUAL GENERAL MEETINGS FIP-IFP Articles. As decided by the FIP-IFP General Meeting last May 2018, the AGM will take place prior to the 2019 FIP World Congress. Two delegates per association are invited to join the meeting, others may be invited by the President. Each country is entitled to a single vote.

# Annual General Meeting

**November 13, 2019**  
**Hyatt Regency Hotel, Miami, USA**  
**Meeting Room: TBC**

## Programme

**8am - 11am:** European Council of Podiatrists - Open committee meeting

**11am - 2pm:** Executive Meeting with working lunch (**delegates only**)

**2pm - 4:15pm:** Annual General Meeting

**4:30pm - 5:30pm:** World Congress First-Attendee session

**5:30pm - 7:30pm:** Welcome Reception

**Information and registration:**  
**[www.fip-ifp.org/2019agm](http://www.fip-ifp.org/2019agm)**



Two delegates per association are invited to join the meetings. There is no delegate fee (this has been abolished by the Board in 2017). If an association would like to be present with more delegates, a participation fee will be asked of 30EUR pp. Associations can invite up to 3 additional persons.

To register to the AGM: [click here](#)

To access the document for the AGM: [click here](#)



*Global Voice of Podiatry*

# World Congress of Podiatry

November 14-16, 2019 • Miami – USA

## WEDNESDAY, NOV 13

17:30 - 19:30 | Riverfront Exhibit Hall

**Welcome Reception**

## THURSDAY, NOV 14

08:30 - 09:00 | Regency Ballroom

**Opening Address**

09:00 - 10:00 | Regency Ballroom

**Plenary Symposium 1**

Presenters: David Armstrong

10:00 - 16:00 - Riverfront Exhibit Hall

10:00 - 10:30 | Riverfront Exhibit Hall

**Coffee Break & Poster Viewing**

10:30 - 11:30 | Orchid B - C - D

**Track 1: Biomechanics / Sports Medicine**

Presenters: Howard Dananberg

10:30 - 11:30 | Hibiscus A

**Track 2: The Rheumatoid Foot**

Presenters: David Yeager, Margreet van Putten

10:30 - 11:30 | Hibiscus B

**Track 3: Podiatric Surgery, A Tale of Two Continents**

Presenters: José Luis Lázaro Martínez, Patrick DeHeer

10:30 - 11:30 | Jasmine Room

**Track 4: Podiatric Dermatology**

Presenters: Tracey Vlahovic

11:30 - 12:30 | Regency Ballroom

**State of The Art 1: Podiatric Management of High-Performance Athletes**

Presenters: Marc Retali

11:30 - 12:30 | Jasmine Room

**State of The Art 2: Technology for Prevention**

Presenters: David Armstrong

12:30 - 14:00 - Riverfront Exhibit Hall

**Lunch Break**

13:00 - 13:30 | Riverfront Exhibit Hall

**Learning Lounge**

Presenters: Pedro Abrantes

13:00 - 15:00 | Riverfront Exhibit Hall

**Meet the Expert**

Presenters: Pauline Wilson, David Dunning, Christian Jerome, Ekaterini Kalykakis

13:15 - 15:15 | Riverfront Exhibit Hall

**Camp Fire Sessions**

Presenters: Lee Rogers, Caroline Teugels

14:00 - 15:00 |

**Workshop 1: Total Contact Casting - Sponsored by:**





14:00 - 15:00 |

**Workshop 2: Point Project**

Presenters: Pauline Wilson, Matthew Garoufalos, José Luis Lazaro Martinez

14:00 - 15:00 |

**Workshop 3: Footwear Fitting**

14:00 - 15:00 |

**Workshop 4: Guidelines**

Presenters: David Armstrong

15:00 - 15:30 | Riverfront Exhibit Hall

**Coffee Break & Poster Viewing**

15:30 - 16:30 |

**Workshop 5: Quality Improvement Planning and Audit – How To?**

Presenters: Pauline Wilson

15:30 - 16:30 |

**Workshop 6: Biofilm**

15:30 - 16:30 |

**Workshop 7: Skin Including Dermatoscopy**

15:30 - 16:30 |

**Workshop 8: Vascular Assessment, Veins, And Compression Therapy (Actico Or Coban Or Profore L And R – 3m)**

16:30 - 18:00 | Riverwalk (outdoors)

**Sponsor & Exhibitor Networking Cocktail Reception (By Invitation Only)**

**FRIDAY, NOV 15**

08:30 - 09:30 | Regency Ballroom

**Plenary Symposium 2**

Presenters: David Dunning

09:30 - 10:30 | Regency Ballroom

**State of The Art 3: Patient Centered and Holistic; The Body and Mind Connection**

Presenters: Pauline Wilson

09:30 - 10:30 | Jasmine Room

**State of The Art 4: Wearable Technologies**

Presenters: Breanne Everett

10:00 - 16:00 - Exhibit - Riverfront Exhibit Hall

10:30 - 11:00 | Riverfront Exhibit Hall

**Coffee Break & Poster Viewing**

10:30 - 16:00 | Riverfront Exhibit Hall

**Camp Fire Sessions**

Presenters: David Dunning, Paul Borgions, Cynthia Formosa, Alfred Gatt, Caroline Teugels

10:30 - 16:00 | Riverfront Exhibit Hall

**Meet The Expert**

Presenters: Christian Jerome, Caroline Teugels

11:00 - 12:00 | Orchid B - C - D

**Track 1: Tendonopathy**

Presenters: Margreet Van Putten, David Dunning

11:00 - 12:00 | Hibiscus A

**Track 2: Plantar Foot Work**

Presenters: Marc Janin

11:00 - 12:00 | Hibiscus B

**Track 3: Biofilm**

Presenters: Matt Regulski

11:00 - 12:00 | Jasmine Room

**Track 4: Podiatric Dermatology & Onychomycosis**

Presenters: Ian Reilly

12:00 -13:00 – Riverfront Exhibit Hall

**Lunch Break**

12:30 -13:00 | Riverfront Exhibit Hall

**Learning Lounge**

13:00 - 14:00 |

**Workshop 9: Sponsored by:**



13:00 - 14:00 |

**Workshop 10: Verruca**

Presenters: Ian Reilly

13:00 - 14:00 |

**Workshop 11: Plantar Fasciitis**

Presenters: Marc Janin

13:00 - 14:00 |

**Workshop 12: American Board of Podiatric Medicine**

14:00 - 15:00 | Orchid B - C - D

**Oral Communication 1: Biomechanics**

Presenters: Iban Grau Garzon, Arnaud Foisy, Yves Lescure, Anette Thompson

14:00 - 15:00 | Hibiscus A

**Oral Communication 2: Diabetic Foot**

Presenters: Pauline Wilson, Alfred Gatt

14:00 - 15:00 | Hibiscus B

**Oral Communication 3**

Presenters: Gabriel Gijon-Nogueron, Alfred Gatt, Minna Stolt

14:00 - 15:00 | Jasmine Room

**Track 5: Podopaediatrics**

Presenters: Louis DeCaro, Patrick Agnew

15:00 - 15:30 | Riverfront Exhibit Hall

**Coffee Break & Poster Viewing**

15:30 - 16:30 |

**Workshop 13: Motivational Interviewing**

15:30 - 16:30 |

**Workshop 14: Debridement Techniques**

15:30 - 16:30 |

**Workshop 15: Podiatry Today**

Presenters: Matthew Garoufalos, Caroline Teugels, Christian Jerome

15:30 - 16:30 |

**Workshop 16: Life Long Learning, Reflective Practice. CPD/ CME**

19:00 - 23:30 | Riverwalk (outdoors)

**Congress Networking Dinner**



08:30 - 09:30 | Regency Ballroom

**Plenary Symposium 3**

Presenters: Benjamin Wallner, Norina Alinta Gavan

09:30 - 10:30 | Orchid B - C - D

**Track 1: Biomechanics /Sports Medicine**

Presenters: Edward S Glaser, Louis DeCaro

09:30 - 10:30 | Hibiscus A

**Track 2: Vascular Assessment of The Diabetic Foot**

Presenters: Matthew Garoufalis, Cynthia Formosa

09:30 - 10:30 | Hibiscus B

**Track 3: Management of The Plantarflexed First Ray**

Presenters: Andrew Belis, Paul Borgions

09:30 - 10:30 | Jasmine Room

**Track 4: Global Vision of Podiatry**

Presenters: Carles Verges Salas, Patricia Nicholas, James Fullwood

12:00 - 13:00 | Jasmine Room

**Track 5: Non-Surgical Management of Nail Pathologies**

Presenters: David Bacquart

10:30 - 11:00 | Riverfront Exhibit Hall

**Coffee Break & Poster Viewing**

10:30 - 13:00 | Riverfront Exhibit Hall

**Camp Fire Sessions**

Presenters: Alfred Gatt, Caroline Teugels, David Dunning, Meggin Van der Helst

10:30 - 13:00 | Riverfront Exhibit Hall

**Meet The Expert**

Presenters; Benjamin Wallner, Mathew Garoufalis, José Luis Lazaro Martinez

11:00 - 12:00 |

**Workshop 17: Student Corner – A Kick Start to Your Future**

11:00 - 12:00 |

**Workshop 18: Special Olympics International**

11:00 - 12:00 |

**Workshop 19: TBC**

11:00 - 12:00 |

**Workshop 20: Sponsored by:**

Presenter: Edward Glasser



12:00 - 13:00 | Orchid B - C - D

**Oral Communication 5: Diabetic Foot**

Presenters: Joe Abdo, Anke Wijlens, Gonzalez-Martin, Yvonne Midolo

12:00 - 13:00 | Hibiscus A

**Oral Communication 6: Biomechanics and Neurology**

Presenters: Sonja Kruenholz, Dimitri Terrasi, Jay Seidel, Alfred Gatt, Marc Janin, Gillard Eric, Sébastien Delacroix

12:00 - 13:00 | Hibiscus B

**Oral Communication 7: Technology and Innovation**

Presenters: Todd O'Brien, Katerina Grigoropoulos, Bharti Rajput

13:00 - 13:30 | Regency Ballroom

**Presidential Address & 2021 Presentation**

# Mark Your Calendar



7-8	Diabetic Foot Congress	Nov-19	Montpellier, France
13	FIP-IFP Annual General Meeting & Executive Session		Miami, USA
14-16	FIP World Congress of Podiatry		Miami, USA
2-6	IDF Congress 2019	Dec-19	Buson, Korea
14	Belgian National Congress of Podiatry		Brussels, Belgium
7-8	National Congress Quality (VDP)	Feb-20	Germany
13-15	EWMA Conference 2020	May-20	London, UK
23-24	4th Hellenic Conference of Podiatry		Athens, Greece
13-15	FIP-IFP 2019 Annual General Meeting	Jun-20	Strasbourg, France
-	National Podiatry Congress – Norway	Sep-20	Norway

# 2019 20



# Exciting opportunity for European Podiatrist

Mr. Paul Gabriel Scullion, FCPodS podiatric surgeon seeks a Podiatrist Associate / Partner, with view to full ownership for his large 36yr established 100% private practice in Dublin 15, Ireland.

*Annual turnover circa. €400,000.  
(based on 3 day work week)*

*Efficiently run multi room, fully computerised practice  
with clinical, secretarial and management support  
staff in place.*

Full or part-time roles can be considered. Profit sharing option available to assist in transfer of ownership over negotiated time frame, suitable for younger practitioners to reduce outlay.

Please send expressions of interest  
with CV to  
[gscullion32@gmail.com](mailto:gscullion32@gmail.com) or  
[Info@kirkfieldfootclinic.com](mailto:Info@kirkfieldfootclinic.com)

*Please feel free to send email if you need any further information.*

## POINT SURVEY -RESULTS

BY PAULINE WILSON

Earlier in 2019, the boards of both D-Foot International and International Federation of Podiatrists (FIP-IFP) invited all of their members to take part in a survey about the POINT project. The POINT project is the association's joint project promoting the inclusion of podiatry/podiatric skills in diabetic foot teams across the globe. The details of the project have been distributed widely via the Diabetic Foot Journal and Journal of Wound care with the links available on the websites of both organisations. In addition we have presented this at the D-Foot Implementation summit in Madrid, the FIP-IFP General Meeting in Hong Kong, EWMA, ISDF and others.



While we now have the document, implementation becomes the focus of the POINT Working Group of both organisations and before a strategy can be considered we needed to have an inventory of podiatric practice across our network and hence the reason for the survey.

The POINT team would like to thank the 123 people who took time to complete the survey about practice in their country. The survey was composed of 10 questions: the first and last were demographic based with responses received from all D-Foot regions and FIP-IFP members were also well represented.





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# THE RESPONSES

The second question related to the knowledge of the point document, 64% of respondents had read the document and felt that it would be of benefit to diabetic foot teams within their country. Concern was expressed about the amount of work needed in realising the implementation of such a project of this in the more specific comments.

Question 3 related to the definition of podiatry as stated by the FIP- IFP. 25% of respondents has podiatric practice according to this definition and recognised by the government of the country. Other responses showed that in some areas podiatrists exist but either are unable to train in the country or are not recognised by the government. Still further response showed that patients was be in receipt of "podiatric care" but this is not delivered by podiatrists. Overall, respondents identified the need for podiatrists where they do not currently exist.

The next question was about the funding of podiatric care and its availability to those suffering with active diabetic foot disease. 36% of responses showed that podiatric care was reimbursed either in full or in part by the government in the country. An additional 39% have access to podiatric care in the country but this care is not reimbursed. The remainder of respondents have no access to podiatric care.

Following this asked respondents were asked about access to preventative foot care either for prevention of first ulceration or for recurrent ulceration. Similar results showed that in 35% of responses such care was reimbursed either in full or part by government. **This leaves 65% of respondents whose countries do not have access to free preventative care.**

The next 3 questions were in relation to multidisciplinary foot teams and national organisation. **64% of respondents reported that such teams exist in their country.** The practice of direct referral between these teams and podiatrists was however only available to 14% of respondents. 74% of respondents reported the presence of some form of national diabetes working group although this varied from country to country.

Finally we asked countries to rate their practice against the POINT document and tell us who delivered the care. Only 12% of respondents reports podiatric care at level 4 provided by podiatrists. There is a wide variety of health care professionals providing care at varying levels, many are restricted by either training or resources. There also appears to be many different names for the profession delivering such care.

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# CONCLUSION

The results of this survey show for the first time the disparity among countries in the provision of care for diabetic foot disease. The results suggest many hard working individual practitioners and centres around the world who are providing outstanding care and need support to continue to deliver this care with more recognition.

The lack of support from national government and the absence of training programmes for podiatrists continues to be a problem for many respondents.

## THE 3 AIMS OF POINT ARE DESCRIBED AS:

1. A benchmarking tool for existing teams.
2. A road map for the skills needed for multidisciplinary diabetic foot teams where they don't yet exist.
3. An awareness document for local and national decision makers about the importance of the inclusion of podiatry in diabetic foot teams and the benefit of podiatrists in providing the plethora of foot care practices for their citizens.

The publication of the POINT document may be of use for some individuals to overcome some of these obstacles which were highlighted in the survey but further support is needed. The form of such support and where D-Foot and FIP-IFP can help is as yet unclear at the individual level of the demands of countries.

The results of the survey have highlighted the areas of challenge for countries in implementing podiatric skills. While the results of this survey may have identified many new challenges, respondents have shown overall support for the document and its use in practice.

These results were discussed by the joint POINT team and where the respondents wished to be included further they have been invited to apply for a POINT training programme at level 1. Some may feel there are a lot of criteria involved in making such an application, this is purely to ensure that the objectives of POINT are fully considered and that the resources are focused where they can be of most benefit for patients. This project is a work in progress and applications closed on 31st July. Currently the committee which is made up of equal representation of D-Foot and FIP-IFP are considering the applications.

We continue to walk together in collaboration to raise the profile of diabetic foot disease and the inclusion of podiatrists in multidisciplinary foot teams across the globe. Thank you for being a part of this project.



**The Diabetic Foot Journal:**  
Vol 21, No 2

[VIEW NOW](#)



# International Podiatry Day – Report

The second edition of International Podiatry Day (IPD) was held this year on October 8th to draw attention to foot health and Podiatry with the general public, other health professions and government health officials. This special day, organized by the International Federation of Podiatrists, provides the worldwide podiatric community an opportunity to recognize and celebrate the good work that is done in providing foot and ankle care by podiatrists.

## Objectives

The purpose of IPD is to create awareness and to reach as many people as possible. This year's campaign was launched in June with weekly posts of IPD on social media leading up to the day. On International Podiatry Day itself we created a big buzz around the podiatric community by having people using the IPD frame on Facebook and make a selfie at work, with colleagues or with their favorite instrument.

## Social community growth

Our social community more than tripled compared to this time last year. We focus on follower growth rather than fan growth, since followers choose to receive future updates whereas fans don't necessarily see future content.

The secretariat has made an impact report that will be shared with all the delegates from the International Federation of Podiatrists.

But to you all thank you for making this day such a success!

## Facebook figures on IPD



## Supporting partners

This wasn't possible without the support of our partners. Thank you so much!



## Letter to Editor

# Why Heel Pressure Injuries in Diabetic Patients are a Manifestation of Diabetic Foot Syndrome and should be managed by Diabetic Foot Units

## Commentaries on Rivolo and Marcadelli

(EWMA Journal 2018; 19(2), 15–21)

Diabetic foot is the most frequent, progressive and destructive complication of diabetes mellitus (DM), affecting some 25% of the patient population worldwide, with a tremendous morbidity and mortality that can be compared with that of many forms of cancer.<sup>1</sup>

More than this, disabilities related to the high frequency of major and minor amputations in these patients greatly reduces their quality of life and implies a consumption of resources that accounts for 40% of the total amount of expenditures for DM worldwide.<sup>2</sup>

In their paper entitled 'Heel pressure injuries: the need for a structured evidence-based approach for assessment and treatment. A preliminary literature review,' published in the last issue of the Journal of the European Wound Management Association, Rivolo and Marcadelli focused on the increasing prevalence of heel pressure injuries (HPI) in patients' feet related the increasing number of aged, multi-morbid people exposed at the risk of decubitus because of being bedridden or the frequency and duration of admissions due to chronic illness.<sup>3</sup>

The authors, after an exhaustive revision of the existing literature on HPI, identified three main areas of interest and intervention: adult HPI, paediatric HPI and diabetes-related HPI, for which they suggested an integrated therapeutic approach with the creation of a specifically dedicated multi-disciplinary service based on the model of diabetic foot units and called the 'interdisciplinary heel pressure ulcer service (IHPIS)'.

There are some critical aspects in this approach to the problem, both on the theoretical side and on the practical one, that are in contrast with this hypothesis.

An ulcer located in the heel of a patient with diabetes is a serious complication; in a larger cohort of foot ulcers, regardless of ulcer location, heel ulcers made up 10–15% of all foot ulcers.<sup>4</sup> Most studies of ulcers located in the heel of a patient with diabetes have small numbers, or only a selected category of patients.<sup>5</sup>

From a conceptual point of view, diabetes-related HPI cannot and should not be combined with non-diabetic ones, either in younger adults or geriatric patients, because their pathogenesis is by far more complex and has both systemic (i.e., peripheral and autonomic neuropathy, diabetic macroangiopathy) and systematic (i.e., immunopathy, chronic metabolic imbalance) components, together with local peculiar features (i.e., non-enzymatic glycation of the proteins of the connective tissue) that exert their role in the determining of HPI in diabetic patients, in adjunct to the traditional ones.<sup>6</sup>

The cluster of these components in the same patient creates a high-risk condition that is most often unnoticed by the patient and underestimated, when not ignored, by caregivers because of the masking activity of the peripheral neuropathy. There is also a dramatic tendency toward criticism for the contemporary presence of distal ischemia and infection, which puts the limb at risk



**Alberto Piaggese**  
MD, Director, Diabetic Foot Section, Department of Medicine, University of Pisa (I), Scientific Recorder and President-Elect of EWMA



**Jan Apelqvist**  
MD, Director, Diabetes Foot Centre Department of Endocrinology University Hospital of Skåne, Division for Clinical Sciences University of Lund, Sweden

**Correspondence:**  
alberto.piaggese@med.unipi.it

**Conflicts of Interest:**  
None



of amputation if not adequately and timely managed by specialists in the appropriate setting.<sup>7</sup>

Moreover, the pathogenetic pathways of HPI in diabetes are not confined to the condition of reduced motility: an ulcer located on the heel often has a decubitus origin, but it may also be caused by repetitive trauma and mechanical stress. A significant number of HPI in these patients are related to the conflicts with poorly fitting shoes in insensate neuropaths; these lesions, frequently involving the Achilles tendon, are extremely dangerous because of their tendency to progress proximally, leading to abscesses and fasciitis on the leg.<sup>8</sup>

These considerations lead to the second group of critical issues that relates to the practical and clinical aspects of the management of HPI in DM.

The authors correctly stated that such a localisation of diabetic foot ulcers (DFU) has not yet been adequately addressed, in terms of diagnosis and proper treatment, inside the current guidelines on DF, and that they should attract more attention within the organisational models of DF care because of their peculiar features.

The IHPIS model cannot be proposed as a solution of this situation, however, for many important reasons:

1. Classifications and diagnostic approaches to HPI adopted in non-diabetic people are not applicable to diabetics because of their reduced inflammatory response and their insensitivity, which make it difficult to stage the severity of the actual conditions. This might lead to a false negative objectivation and possible bad outcomes for the patients. The same is true for the vascular assessment; as the authors note, this is particularly tricky in diabetic patients, as, if not performed by skilled and extremely specialised personnel, it may again lead to a false sense of security.<sup>9</sup>
2. HPI in diabetic patients are not lesions with an independent pathogenetic mechanism, but a variant of the multidimensional complex pathology that has been recently identified as 'diabetic foot syndrome', a nosographic entity that refers to both local, systemic and systematic aspects of the disease to provide an integrated diagnostic workout and therapy according to the severity of the disease and its components.<sup>10</sup>
3. An approach focused on the lesion, instead of a global taking charge by the specialist team, is not only at risk of being ineffective, it may also delay adequate therapeutic measures and significantly increase the risk

of the patient developing complications such as sepsis or critical ischemia gangrene, which would lead to amputation and eventually death. It has been demonstrated how only the prompt referral to an experienced and adequately organised DF unit can change the prognoses of these patients, and how the insisted care of the local manifestation of the disease, when not accompanied by the necessary systemic measures, is the most frequent determinant of delayed referrals and dramatic consequences.<sup>11</sup>

4. Diabetic foot is a chronic progressive disease that recurs in a time-dependent way; HPI are thus to be considered a part of this complex clinical scenario and managed accordingly. Also, because they frequently occur in a patient admitted or treated for another lesion or acute manifestation of the disease, it would make no sense for him or her to be managed by two different teams<sup>1,12</sup>

These and other considerations eventually related to the long experience that DF units have accumulated in the last 30 years, and which is a strong added value for the patients, given that they are followed along their clinical progressive pathway by the same team, are strong motivations for maintaining HPI in diabetic patients under the responsibility of DF units.

A confirmation of the validity of this approach can be found in the paper by Orneholm et al, significantly titled 'Heel ulcers do heal in patients with diabetes'. In it, a large cohort of diabetic patients with heel ulcers with heterogeneous etiopathogenesis - pressure ulcers, neuroischemia/ischemic ulcers and ulcers caused by trauma and or cracked skin - was managed by an experienced foot clinic team with a healing rate of 74% and a median healing time of 17 weeks. In this study, like in the Eurodiale study, outcomes were predicted by precipitating factors and co-morbidity, infection, ischemia and the extent of tissue involvement at inclusion, indicating a need for a more extensive and multifactorial approach due to the complexity of the underlying disease.<sup>13</sup>

Nevertheless, the point raised by Rivolo and Marcadelli in their review of the existing literature on HPI is well taken, since the information is scarce and there are no dedicated guidelines for managing this pathology, especially in diabetic patients. Further, the guidance document by the International Working Group on Diabetic Foot, (IWGDF) the universal reference for those who manage the pathology, does not specifically focus on HPI, which is an increasing menace for our frail patients.<sup>14</sup> We recommend that HPI be addressed in the next revision of the guidance on DF, so to fill the existing gap. ■



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At the FIP-IFP we think that continuous professional development is key. We therefore want to include in our quarterly magazine articles that are worth to be read by the world wide podiatric community. If you have an interesting article to share, don't hesitate to contact [director@fip-ifp.org](mailto:director@fip-ifp.org) to include this in the next issue of Footsteps.



## NORWAY: Fotterapeutforbundet (FTF)

We have just finished our national Podiatry Congress with 273 participants. A lot of interesting professional lectures and social happenings. The evaluations are very good.

In November we will participate at the World Congress in Miami with one member from our board and our Norwegian ECP member.

The main item we work is to change the system in Norway, so that the diabetic patients can get refund for the podiatry treatment.

In April 2020 we are having our general meeting and in September 2020 we are having our national Podiatry Congress.

We are looking forward to meet you in Miami!

## GERMANY: Verband Deutscher Podologen

Great things are happening in the German podiatric world

First of all, podiatric state care have an improvement in their remuneration as of 1. July 2019. The executive board of the VDP have worked hard for this result. Also amendments in competences in all therapist professions. This means for us podiatrists more recognition in this great profession. The VDP has committed itself on the equality of the German Podiatry standards compared to our international Podiatry partners.

Therapists from all different occupational professions attending a discussion on strengthening the therapy professions from the German Health Minister Mr. Dr. Jens Spahn



VDP president Volker Pfersich and secretary Melanie Flemmig held talks with MdB (member of the German Bundestag) Mr. Dr. Roy Kühne, who is a trained physiotherapist. He is concerned with the legislation of podiatry and other therapy occupational professions too.

The VDP has also invited Dr. Roy Kühne in the next national congress Quality conference on 07./08. February 2020 to discuss on the changes and answer any question from fellow colleagues. Guests are welcome to attend. Save the date and click for more information: [www.verband-deutscher-podologen.de](http://www.verband-deutscher-podologen.de)

# SPAIN – Consejo General de Colegios Oficiales de Podólogos

## PODIATRY IN SPAIN – GLOBAL VISION

The podiatrist profession was born in 1959 and it is a profession with an independent university career since 1988. There are 7.404 practitioners in a population near to 47 million. There are 13 Spanish universities and 16 official masters. These are the skills and expertise of the podiatrists in Spain: podiatric surgery, sports podiatry, diabetic foot, pediatric podiatry, orthopodology, pharmacology and chiropody.

Podiatrists in Spain are able to diagnose, treat and prescribe medications by private receipt (as doctors and dentists). The main objective of the Consejo General de Colegios Oficiales de Podólogos of Spain is the integration of podiatry into the Spanish national health system and this is the main claim that from the Consejo will make to authorities during our 51 National Congress of Podiatry that will take place in Valencia from 22-24 October. You are invited to attend!



## CANADA – Canadian Podiatric Medical Association

A number of initiatives have been moving forward in Canada during this past quarter of 2019. At the moment, we are coordinating efforts to raise awareness on International Podiatry Day (October 8). We also recognized Foot Health month in May of each year.

We continue to work at advocacy and promotion of the profession within Canada, forging alliances with relevant associations and industry leaders. We are a founding member of the Pan Canadian Diabetic Foot Task Force, an alliance of medical, paramedical, governmental and other organizations working towards improving access to preventative diabetes foot care. We Our past President, Dr. Joseph Stern DPM, also presented on the topic of Innovations in Podiatry at the Canadian Life and Health Insurance Association (CLHIA) conference in Vancouver, BC during May, and we will be attending various provincial associations' conferences and meetings / AGMs in British Columbia, Manitoba, and Quebec in the Fall.

Additionally, we have made improvements to our member benefits including strengthening our health benefits and malpractice insurance.

We have embarked on a major initiative to establish a clear Pan-Canadian Competency Framework for podiatrists. The Canadian Podiatric profession is broken into two primary categories in practice: Podiatric Surgeons and General Podiatric Physicians. Arguably there is a third category of Chiropodists in clinical practice today, but their scope of practice overlaps with General Podiatric Physicians. The Profession's leadership has recognized this. The Canadian Podiatric Medical Association (CPMA) set out in its strategic plan to help clarify and define this. The College of Podiatric Physicians of Alberta (CPPA), led by Dr. Bradley Sonnema DPM, has taken the lead in defining a model framework that needs to be refined, validated and adopted. A competency framework will facilitate broader movement of clinicians across the country (labour mobility). The CPPA and CPMA are working together to advance this initiative and to drive towards a model for Podiatry in Canada that can be used as a benchmark and baseline for all Canadian provinces.

We look forward to the FIP World Congress in Miami. See you there.



## GREECE – Hellenic Society of Podiatrists

“Good health starts with good foot hygiene”, since healthy feet impact people’s overall quality of life and health. The partnership between RB Health and the Hellenic Society of Podiatrists has been announced and its main purpose is to make people aware of how important good foot health is, since foot health can be an indicator of general health. For this reason, a proper foot health routine should be a part of our daily routine’, said Mr Nikos Tsakalakis, Country Manager of RB Health.



‘One hundred years of foot care expertise make Scholl products the ideal partner to raise people’s awareness of the significance of foot health’, said Mr Manos Arvanitakis, President of the Hellenic Society of Podiatrists.

Scholl products and the Hellenic Society of Podiatrists strongly believe that this partnership will encourage Greek people to think about their feet and the importance of taking good care of their feet. Therefore, all foot hygiene Scholl products will be “Recommended by the Hellenic Society of Podiatrists”.



From the 23 to 24 May 2020 we’ll celebrate the Hellenic Conference of Podiatry in Athens Greece. You will find more information: [www.hellenicpodiatry.gr](http://www.hellenicpodiatry.gr)

## SWEDEN: Sveriges fotterapeuter



Sweden's Foot Therapists are renaming the website! [www.sverigesfotterapeuter.com](http://www.sverigesfotterapeuter.com)

Members have been given a new website where everyone has their own profile. All to appear better and to be the obvious choice when seeking help for various foot problems.

In April 2020, we will hold an annual general meeting in Malmö and will try to record the number of members coming.

See you in Miami.

# CZECH REPUBLIC – Czech Podiatry Association

Autumn in the Czech Republic in the colors of podiatry On 27 and 28 September two major podiatric events took place in the Czech Republic

## Healthy foot... or podiatrists for (non)podiatrists at the Institute for Clinical and Experimental Medicine in Prague

A symposium with lectures and workshops on topics from clinical podiatric practice was held in Prague on 27 September 2019. The event took place at the conference hall of the Institute for Clinical and Experimental Medicine (IKEM). The expert guarantors of the event were MUDr. Vladimíra Fejfarová, PhD. and MUDr. Miroslav Koliba, MBA – the President of the Czech Podiatry Association. The event was supported by numerous partners such as Novo nordisk, Worwag pharma, Aspironix s.r.o. G.P.S. Ofa s.r.o., Molnlycke Health Care s.r.o. and Florett GmbH/Varomed. The event was held under the auspices of the Czech Podiatry Association and was attended by 70 participants specialising in various fields, namely general practitioners, neurologists, podiatrists, diabetologists, but also nurses and pedicurists.



The agenda was divided into 4 sessions. Session I focused on the definition, pathogenesis and diagnosis of the diabetic foot syndrome. This topic was covered by MUDr. Bém in his introductory presentation. His lecture was followed by a lecture given by MUDr. Fejfarová on the diagnosis and therapy of peripheral vascular disease of lower extremities. The topic of diagnosis and treatment of diabetic neuropathy was elaborated on by Prof. Jirkovská. Later, it was again MUDr. Fejfarová who presented information on diabetic foot syndrome management by offloading.

Session II of the symposium was dedicated to diabetic foot syndrome prevention. How to introduce it into practice was explained by MUDr. Koliba, who also looked into the education and system of preventive care. The topic of professional pedicure was explored by Jana Výmolová, the Chairperson of the podiatry section of the Czech Podiatry Association. The case studies from clinical practice presented by the nurses H. Tibenská and J. Bieliková were very interesting. They included patients with recurrent diabetic ulceration, Charcot osteoarthropathy, thermal damage of lower limbs, and finally infectious complications of diabetic foot syndrome.

Extremely interesting and beneficial was the roundtable discussion over a cup of coffee attended by representatives of professional associations and expert shoemakers, payers and representatives of companies distributing preventive footwear. Also covered were the topics of preventive checks and procedures, professional podiatrists and also the expansion of prescription of preventive footwear.

Later on, workshops from clinical practice followed. A. Jirkovská focused on the diagnosis of diabetic neuropathy in practice. V. Fejfarová, on the other hand, explained the diagnosis of peripheral vascular disease of lower extremities which was thoroughly described in her morning lecture. MUDr. Koliba, MBA, introduced the participants in preventive footwear in podiatric practice. J. Výmolová focused on the specific aspects of podiatry in diabetic patients and provided a podiatry demonstration. Pedobarography in diabetic patients was the topic of workshop delivered by M. Součková. An equally important topic of rehabilitation of the sole of the foot was covered by E. Vrátná and R. Charvát. P. Piňhová and L. Krupová focused on compression therapy in diabetic patients. The last workshops led by MUDr. V. Fejfarová and J. Stryja focused on local dressing in clinical practice.

The symposium was truly interesting and useful for all the participants. Medical doctors, nurses and also podiatrists were introduced in the topic of diabetic foot syndrome. In November this symposium will be held also in Ostrava. It is expected to be just as interesting as the previous one held in Prague.

Cont...





On 28 September 2019 the Podiatry' Day of the Czech Podiatry Association was, as always, held at the exhibition grounds PVA EXPO in Prague – Letňany on the exhibition World of Beauty. The extremely high number of participants suggested that the lectures on the agenda were interesting again. The lectures concentrated on the topics of podiatry such as how to diagnose a corn and how to treat it. A quick course of non-professional first aid provision with a practical demonstration and resuscitation training took place.

Inspiring were the case studies shared by podiatrists on onychomycosis, application of ozone

cosmetics and the podiatrist's opinion on the practical training for non-medical professionals held at the Institute of Clinical and Experimental Medicine. The companies presented their new products and at the very end also new products from all over the world were presented by MUDr. Miroslav Koliba, MBA.

## BELGIUM: Belgian Association of Podiatrists



The Belgian Association of Podiatrists is organizing on December 14, 2019, their annual National Congress which will take place in Brussels, Belgium. The registrations are open and we are very excited and are looking forward to this day. We want to every Belgian podiatrist to join us at this event!

The central theme for this edition of the Belgian National Congress of Podiatry is pressure. The pressure will be examined in all its aspects, from plantar pressure and pressure measurement to pressure reduction and pressure distribution. All aspects of podiatry will therefore be addressed with a balance between biomechanics and treatment.

In addition, particular attention will be paid to the pressure of the society to health workers. The topic of burnout among independent caregivers will also be discussed at the congress.

This year, the congress will be the focus of particular attention, as the Belgian association celebrates its 60th anniversary.

It will be a very festive congress!

Also we are looking forward to the World Congress of Podiatry which is organised by the FIP-IFP. A group of Belgian Podiatrists will participate at the congress and of course we are very looking forward to this congress in November.





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