



Foot & Practice

A foot health message from
Bayswater Allied Health

Aged care: podiatric treatment needs and strategies

Professional podiatric care is fundamental to good overall health for elderly patients, and regular podiatric assessments form an important element of every aged care programme. From check ups for treatment and injury prevention through to regular nail care, a podiatrist is an essential part of any aged care team and can keep aged care residents more mobile with less chance of serious infections that lead to falls, amputation and other debilitating issues affecting quality of life among this age group.

KEY TREATMENT STRATEGIES

Nail care: difficulties bending down, poor eyesight and diminished grip strength make nail care an impossibility for many patients. Ingrown nails are prone to infection and long nails can cause pain and injury to the feet, causing pain and limiting mobility.

Infection: the feet of elderly patients should be checked regularly for signs of infection so that any injuries can be treated as soon as possible to avoid serious complications. Elderly patients are more prone to peripheral neuropathy due to a higher incidence of other health issues, such as diabetes and heart disease, and may not be aware of podiatric injuries until serious infection has taken hold.

Joint problems: problems with bones and joints — the most prominent being arthritis — are common for patients in aged care and are exacerbated over time. Inflamed joints can cause chronic pain in patients >75 and can seriously diminish mobility, while increasing the risk for falls and depression through decreased quality of life. Orthotics should be prescribed to reduce the pressure on inflamed joints and ease associated pain. Anti-inflammatories can be prescribed along with pain medication to ease joint pain and encourage mobility.

Toe deformities: caused by bunions, arthritis or other injuries, toe deformities can alter gait as patients compensate for injuries and painful areas, having lasting effects on balance and stability. Medication to ease pain and reduce inflammation should be prescribed and surgery can improve quality of life for patients with toe deformities if their general health allows it. Orthotics can ease pressure on painful areas and may be invaluable to maintaining mobility in aged care patients.

Range of motion: flexibility of the ankle and toe joints have a key impact on stability and recovery from trips and stumbles to prevent serious falls. Range of motion can be decreased as a result of wear and tear and also conditions such as arthritis. Patients should be encouraged to exercise the joints to promote increased flexibility.

Muscle strength: diminished muscle strength has serious effects on stability and balance. Elderly patients are likely to have stretched ligaments and tendons due to overuse and muscle strength is key to maintaining stability. Patients should be given manageable exercises to maintain and increase muscle strength. The fitting of orthotics and other supports can also ease muscle burden and support weakened ligaments and tendons.



Podiatric problems are a significant concern for elderly patients and are a major cause of mortality due to association with amputation and falls in this age group. Clinical management of the aged care population is integral to fall and amputation prevention as well as to improve the quality of life for aged care patients.

Key points

- By the age of 80, the average person will have walked approximately 100,000 miles. That amount of wear and tear has a significant impact on the deterioration of podiatric health.
- According to the Australian Bureau of Statistics, the number of falls in patients >75 have increased by 400% in the past decade. Podiatric problems are a main cause of falls in the elderly and can be prevented through proper care and consultation with a podiatrist.
- With age, skin becomes increasingly fragile and feet are more prone to injury from altered gait, unstable biomechanics and ill-fitting shoes.
- Seemingly minor injuries such as cuts and blisters are more prone to infection in patients >75 than in the general population.
- As risk of injury is increased, immune response is decreased in elderly patients. Infections can rapidly get out of control, with the ability to turn a tiny blister into a dangerous abscess.



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