Legs Matter initiative: A foot perspective



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REFERENCES

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n 2017, while still Chair of Foot in Diabetes UK (FDUK), I was at a meeting in London with a L number of Tissue Viability Nurses. They were discussing a new campaign to raise awareness of lower limb conditions among the general public, as well as healthcare professionals. I asked the nurses if podiatrists were part of this initiative (now known as Legs Matter). They looked a bit 'sheepish' and replied that they weren't, as they were "thinking mainly about leg conditions". I immediately replied "but the foot is part of the lower limb." Afterwards, I contacted the members of the steering group to ensure that foot complications were recognised as a key part of the campaign. It may sound obvious, but we know that, in reality, the foot is often missed off when discussing the lower limb, or only gets token recognition. Soon after this discussion, I joined the College of Podiatry as the National Clinical Director. The College of Podiatry and FDUK were keen to ensure that the foot remained central to the campaign and joined the coalition at its inception.

THE IMPACT OF FOOT COMPLICATIONS

When we look at the facts and stats, much of them are focussed on foot complications in diabetes. For example, we know that a large subset of the £5.3 billion (Guest, 2015) spent on wound care in England, is composed of wounds associated with foot ulceration in diabetes. An NHS Digital report (2017) found that complications from diabetic foot disease are costing the NHS in England more than £1 billion a year, which is the equivalent of £1 in every £100 spent on health care in England. Delays in access to specialist foot care can lead to chronic non-healing ulcers, and ultimately to amputation. On average, each Clinical Commissioning Group currently spends around £5.7 million a year on diabetic foot problems, which is more than the combined cost of the four most common cancers. However, work by Ahmad et al (2019) in the Manchester Amputation Reduction Strategy (MARS) has also shown that:

Every hour, someone over 50 in England has a minor foot amputation

- ▶ Every 2 hours someone loses their whole leg
- The main causes are diabetes, peripheral arterial disease, venous disease and lymphoedema
- ▶ Up to half of these amputations are preventable
- ➤The current focus is preventing diabetic amputations — but importantly half of the amputees do not have diabetes
- ✤ In 2013/4, the NHS spent approximately £2 billion on foot and leg ulcer care.

And there are national inequalities:

- ➤ Amputation rates are 30% higher in the North compared with the South of England
- ➤ Amputation rates are three times higher in men than women
- More above-knee amputations are performed in Northern England compared with the South
- More above-knee amputations are performed in women compared than men
- ➤ Amputation rates in Black ethnic groups are 70% higher than in the White population
- ➢Foot amputations are falling in people with diabetes but rising in people without diabetes (Ahmad et al, 2019).

Therefore, the opportunity, to raise the profile of foot and lower leg problems, not just in people with diabetes but also other conditions, must not be ignored. During Leg Matter Awareness Week at the beginning of June, it was fantastic to see podiatrists and nurses working together at events across the country, which gained coverage from a variety of different media and showed the value of collaborative working.

Working within a coalition of organisations has been revolutionary in some respects: we discovered we have common goals and aims and are all striving to improve health care across the country. This new network has enabled us to make sure that all aspects of lower limb conditions are covered. But most importantly, it has been very enjoyable.