

Chapter 89

Diabetic Foot



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What is the most etiology of diabetic foot ulcers?	Peripheral neuropathy
What test is more sensitive than light touch or two-point discrimination for determining loss of protective sensation?	Semmes-Weinstein 5.07 monofilament
What are some radiographic findings of Charcot foot?	Osteopenia, sclerosis, fragmentation, joint collapse, and destruction
What ABI is needed to ensure adequate vascular health for healing?	30–40 mmHg in toes and >70 mmHg at the ankle

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What classification system is used to grade ulcers?	Wagner: 0—At risk, skin intact; 1—Superficial; 2—Deep without infection; 3—Deep infection; 4—Gangrene distal to midfoot; 5—Proximal gangrene
What are the most common infectious organisms?	Staph and strep species
Why should anaerobic antibiotic coverage be considered?	1/3 of infected diabetic feet have positive anaerobic cultures
What is the primary treatment when no infection is present?	Total contact casting, frequent re-evaluation and skin checks
