



# FOOT NOTES

From the office of Carlisle Foot & Ankle Specialists



## The Charcot Foot

The Charcot Foot is a entirely different entity than the neuromuscular disorder Charcot-Marie-Tooth Disease. A Charcot foot is a deformity stemming from the breakdown of the joints of the foot and ankle secondary to a hyperemic response. Although most common in Diabetic patients, it can be found in non-Diabetics as well. The common denominator is concomitant peripheral neuropathy. In it's earliest development a Charcot foot may be mistaken for a sprain or even an infection. A full blown, active Charcot foot is very swollen, red, and hot to the touch. It is difficult to distinguish between an active Charcot foot and osteomyelitis/abscess visually or even radiographically. Typically the Charcot patient will have a normal WBC and no fever and is a way to tell a difference. A bone biopsy is the gold standard for differentiation. One's initial treatment should always err on the side of treating an infection. Treatments include immobilization and strict non-weight bearing until the active stage is resolved. This may take 3 months or more. Bracing and custom shoes are often required to support the new structure of the foot. In some instances Charcot reconstructive surgery is required to recreate a more structurally sound and functional foot. Our patients need to know that with or without surgical intervention a Charcot foot is a LIMB THREATENING CONDITION.

For this reason, we have started a **Charcot Foot Clinic** as part of our practice to help save these limbs. We have 16 years experience treating the Charcot Foot and look forward to helping your patients.



For more information or to refer your Charcot foot patient for an appointment feel free to contact our office:

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