Foot Health and Diabetes



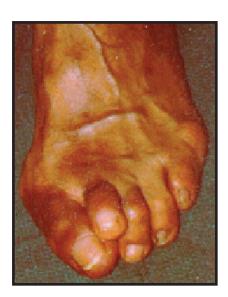
Gangrene
Severe infections may be present but undetected by patients with neuropathy who have difficulty examining their feet.



Ulceration of the great toe
This deceptively small lesion
seriously increases the risk for
amputation. Risk factors for
amputation include: peripheral
neuropathy, abnormal
biomechanics, peripheral
vascular disease, prior ulceration
and prior amputation.



Hammer toes
The loss of foot musculature
has led to abnormal foot
biomechanics with the toes
drawn up into a "hammer toe"
position. The increases the risk
of ulceration and amputation.



Peripheral neuropathy
Shiny skin, the inability to sweat and lack
of protective sensation compound the risk for
amputation in this patient with foot deformity
and overriding toes. Treatment includes special
footwear, patient education, and vigilant daily
foot hygiene and inspection.



Even large wounds can be painless in the face of neuropathy and patients may deny there is a problem. The patient with this lesion needs referral for a program of wound management and non weight-bearing rehabilitation.

Eye Health and Diabetes



This is what a person with normal vision sees.



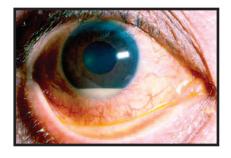
This is what a person with diabetic retinopathy sees.



This patient with ptosis (drooping lid) and double vision from an inability to turn the eye up, down, or inward has a Cranial Nerve III palsy. Cranial nerve palsy is not uncommon in diabetes; a person with this condition should be referred for an eye exam to rule out other serious conditions.



This patient with eye pain, light sensitivity, and a 2-mm white lesion has a corneal ulcer. People with diabetes may not complain of pain because of corneal neuropathy. Steroid or over-the-counter eye drops would be a serious mistake – this patent needs referral.



Hypopyon, white cells collecting in the anterior chamber of the eye, is a sign of serious intraocular infection and/or inflammation; this person should be referred immediately.



An irregular pupil can it be a sign of iritis or nerve palsy—a potential complication of diabetes or other conditions. Iritis can lead to pupillary block glaucoma, a sight threatening condition.
This patient needs referral.

Oral Health and Diabetes



Periodontal (gum) disease



Periodontal (gum) disease



Periodontal abscess



Periodontal abscess



Thrush (oral Candidiasis)



Healthy gums and teeth

Pharmacy and Diabetes



Over-the-counter medications can interact with prescription medications. Encourage patients to consult with the pharmacist.



Many medications need additional counseling on HOW to take themfor example, with meals or on an empty stomach, or whether "three times a day" means breakfast, lunch, and dinner or every eight hours.



Encourage patients to bring all bottles in to the pharmacist to review regularly.



Tools are available to help patients keep track of multiple medications.



Pharmacists can coach the family to help with diabetes control and the use of supplies.



Pharmacists can help obtain medicines less expensively.