Prevalence of Podiatric pathology in a medical-rehabilitation ward: A pilot study
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Introduction
Foot pathologies may result from the process of aging and degeneration, complications of chronic diseases, injuries and alternation of foot structure and biomechanics. The etiologies of foot pathologies varies in individuals, however, in common they may lead to the reduction of ambulating ability, balance impairment, falls and increased risk of foot infection or amputation in particular disease groups. Currently, minimal studies have been conducted to determine the prevalence of foot pathologies in the hospital in-patient settings in Hong Kong. With the increasing demand of aging and chronic diseases populations, potential burden of foot complications associated with this population shall be determined.

Objectives
The primary aim of this pilot study is to determine the prevalence of foot pathologies in a medical-rehabilitation ward.

Methodology
During the period of May to November 2014, 11 sessions of Multidisciplinary Geriatric Assessment Round involving doctors, nurses, podiatrists and other allied health professionals were conducted. Clinical diagnosis of foot pathologies were made through feet examination conducted by the same podiatrist for every patients admitted to a designated medical-rehabilitation ward, podiatric treatment were provided when conditions indicated. Patient's data such as age, sex, medical history and diagnosis of foot pathologies were collected for descriptive statistic generation to determine the
prevalence of foot pathologies.

**Result**

A Total of 411 pairs of foot were examined, after the exclusion of duplicated patients and re-admitted patients, only 262 patients were included in the study (123 males:139 females). The mean age is 78. Of the 262 patients, the common foot pathologies identified were pathological nail conditions (34%) (onychomycosis 23.7%; onychauxis 9.9%; ingrown toenail 0.8%), hallux valgus (15.3%), lesser toe deformity (8%), callosities/corns(6.1%), foot and ankle cellulitis (1.5%). 15 cases of acute foot ulcerations (5.73%) and acute gouty attack within the foot and ankle(5.0%) were found during the Multidisciplinary Geriatric Assessment Round. On the other hand, 6.45% of the diabetic population developed ulcers, diabetic patients have a higher relative risk of having ulcerations (RR 1.35, P=0.7, OR 1.38 p=0.7) and onychauxis (RR 3.4, P<0.1, OR 3.4, P<0.1)) when comparing with the stroke patients.

Conclusions: Active podiatric examination shall be considered for newly admitted geriatric patients especially with chronic diseases. Prompt podiatric assessment and treatment, together with a multidisciplinary care approach is crucial to spot on acute foot pathologies, as to prevent further complications such as ulceration, infection or amputation and unnecessary prolonged hospitalization. The relationship of whether various foot pathologies are associated with a particular disease group or the risk of falls would require further evaluation or a larger scale study.