



**Service Priorities and Programmes  
Electronic Presentations**

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**What it looks like is not what it is-Differential diagnosis of non-healing ulcers**

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Podiatry

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Malignancy

Melanoma

Skin cancer

Squamous cell carcinoma

**Introduction**

In the community podiatry clinic, we see patients with all kind of foot problems including non-healing ulcers. Although there are different factors which may affect wound healing, some of the factors are easily missed out, such as carcinoma. Through this case review, we would like to raise awareness of this potentially fatal differential diagnosis for non-healing ulcers.

**Objectives**

To raise the awareness of skin cancer on the foot to Health Care Professionals and the public.

**Methodology**

In this review, two cases with non-healing ulcer were reported. The medical, physical, social and psychological effects on the patients was reviewed.

**Result**

Both patients (F/96 and M/81) were referred from GOPC doctors for non-healing ulcerations. After excluding the medical reasons which delayed wound healing, and resolving other issues which prevent wound healing (i.e. pressure from footwear, hygiene, infection and wound care etc.), carcinoma was suspected. The condition of their skin lesions was discussed with the patients and their relatives taking into consideration the holistic health of the patients. Both patients were diagnosed with skin cancer after consulting the dermatologist. One of the patients was diagnosed with malignant melanoma and the other with squamous cell carcinoma. The patient with malignant melanoma elected for toe amputation and the surgical wound healed well. The patient with squamous cell carcinoma chose radiotherapy treatment for the condition (still under treatment). Conclusion: The foot is not commonly associated with the development of malignant lesions. It is an accepted fact that certain types of malignant melanoma such as Acral Lentiginous melanoma are more commonly found on the soles of the foot and toenail of ethnic groups such as Asian and Africa, and are

often subject to delay or incorrect diagnosis. With this delay in diagnosis, mortality rate from foot lesions are often higher when compared to lesions located elsewhere on the body. Therefore, it is essential for all clinicians involved in foot management thoroughly assess, monitor and record any unusual or suspect lesions and provide timely referral to Dermatologists or Podiatrist for second opinion whenever there is any doubt in differential diagnosis.