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Diabetic Foot: A Comprehensive Review of Pathophysiology, Assessment, and Multidisciplinary Management

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Abstract

The abstract highlights the multifactorial pathophysiology, including hyperglycemia-induced peripheral neuropathy, vascular changes, impaired wound healing, and increased infection susceptibility. Accurate assessment plays a crucial role in effective management, with clinical examinations and diagnostic tests evaluating neuropathy, peripheral pulses, skin integrity, and potential complications. Multidisciplinary management involving healthcare professionals from various specialties, such as endocrinologists, podiatrists, wound care specialists, and surgeons, is emphasized. The abstract discusses key components of management, including glycemic control, neuropathy management, vascular assessment and intervention, wound care, infection management, surgical interventions, and patient education. The importance of a proactive approach, regular foot examinations, patient education, and early intervention is underscored. The abstract concludes by emphasizing the need for ongoing research and collaboration to improve prevention and management strategies for diabetic foot, aiming to reduce complications and enhance the quality of life for individuals affected by this condition.

Keywords: Pathophysiology; Hyperglycemia; Podiatrists; Foot

Introduction

Diabetic foot is a debilitating complication that a ects individuals with diabetes mellitus, posing signi cant challenges in terms of morbidity, mortality, and healthcare costs. It encompasses a range of foot disorders, including peripheral neuropathy, peripheral vascular disease, foot ulcers, and infections. Diabetic foot requires a comprehensive understanding of its pathophysiology, accurate assessment methods, and a multidisciplinary approach to its management [1]. is article provides a comprehensive review of the pathophysiology, assessment, and multidisciplinary management of diabetic foot. e pathophysiology of diabetic foot is multifactorial and involves the interplay of several mechanisms. Prolonged hyperglycemia

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Page 2	of 3				
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