

# Diabetic Foot Off-loading Algorithm<sup>®</sup>

## Patient with Diabetes

### NO ULCERATION

#### Risk 0 Foot at no risk

No LOPS<sup>1</sup>, no PAD<sup>2</sup> no Deformity

Regular shoes + YDA + Correct Education and annual examination of LOPS<sup>1</sup> and PAD<sup>2</sup>



#### Risk 1 Foot at risk / Risk 2 Foot at high risk

LOPS<sup>1</sup> and/or PAD<sup>2</sup> and/or foot deformity and/or pre ulcerative signs

YDA or MAC 1 (risk 1) or MAC 3 (risk 2) + customized plantar insole + GentleStep™ + customized plantar insole + Heelift® for immobility



#### Risk 3 Foot at very high risk

LOPS<sup>1</sup> and/or PAD<sup>2</sup> + Severe deformity and/or history of ulceration and/or minor/major amputation and/or end-stage renal disease

MAC 2 or MAC 3 + customized plantar insole + WCS® / WCS® Light + customized plantar insole + AllRound Shoe® + customized plantar insole



Customized shoes (in case of severe deformity) + customized plantar insole + Heelift® AFO for partial mobility



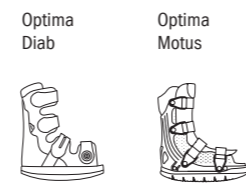
### ULCERATION: Plantar forefoot or midfoot

#### Neuropathic plantar forefoot or midfoot Ulcer

##### Recommendation Ia - Ib\*



##### Recommendation II\*



##### Recom. III\*



##### Recommendation IVa - IVb\*

###### Don't use standard or therapeutic shoes (IVa)

Optima Free + Monolayer insole or Puzzle Insole® + felted foam



Relief Dual® + PegAssist® Insole or PegContour® Insole + felted foam



Optima Europa + Monolayer insole or Puzzle Insole® + felted foam



WCS® + WCS® Insole + felted foam



AllRound Shoe® + PegContour® Insole + felted foam



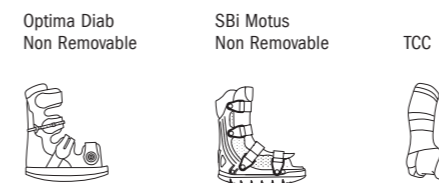
##### Recommendation V\* and Recommendation VI\*

In case of neuropathic metatarsal head or digital ulcer consider prophylactic surgery and curative surgery + post operative therapeutic walkers or shoes

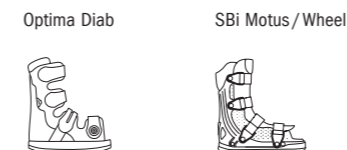


#### Ischemic and/or Infected plantar Ulcer Mild/Moderate/Severe

##### Recommendation VII a\* Mild Infection or Mild Ischemia

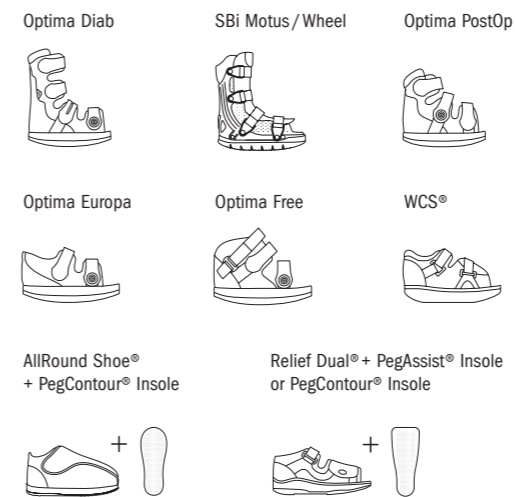


##### Recommendation VII b\* Mild Infection and Mild Ischemia



##### Recommendation VII c\* Moderate or Severe Infection and Moderate or Severe Ischemia

###### Only after Ischemia and Infection addressing



### ULCERATION: Heel and NON Plantar / MINOR AMPUTATION / CHARCOT FOOT

#### Neuropathic plantar Heel Ulceration

##### Recommendation VIII\*



#### Neuropathic NON plantar foot Ulcer



#### Minor amputation management

Toe I - V	Transmetatarsal	Lisfranc / Chopart / Syme
Optima PostOp + WCS®	Optima Diab + PLTM	Body Armor® Pro Term

#### Charcot foot

Acute phase	Conversion to chronic	Remission
Complete Off-bearing Rigid Cast + Wheelchair	SBI Motus	MAC 2 or customized shoes (in case of severe deformity) + customized plantar insole

Essential Bibliography: A. Piaggini et al. Foot & Ankle International, April 15, 2016, vol. 37, Issue 8, 2016 | A. Piaggini, Diabetes Care, March 2007, vol. 30, no. 3 586-590 | J. Donnelly, JWC, vol. 20, Number 7, July 2011 | R. Dahmen, Diabetes Care 24: 705-709, 2001 | E. Faglia, G. Clerici, Foot Ankle Int., 2013 Feb; 34 (2): 222-7 | D. G. Armstrong, Diabetes Care 24: 1019-1022, 2001 | C. Caravaggi, E. Faglia, Diabetes Care 23: 1746-1751, 2000 | D. Armstrong, Diabetes Care, March 2005, vol. 28, no. 3 551-554 | Stephanie C. Wu, Diabetes Care 31: 2118-2119, 2008 | Ira A. Katz, Diabetes Care, March 2005, vol. 28, no. 3 555-559

<sup>1</sup> LOPS: Loss of Protective Sensation <sup>2</sup> PAD: Peripheral artery disease

\* Internat. Guidelines of Diabetic Foot: <https://iwgdfguidelines.org/guidelines/guidelines/>

■ = Prevention ■ = Remission ■ = Acute