



Australian Podiatry Association (Vic)
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A Media Briefing Paper

Foot Health Week
Sunday 14th to Saturday 20th October 2007
Children's Feet
The First Steps to Foot Health

About Podiatry

Podiatrists provide comprehensive foot care, diagnosing, treating and preventing foot and ankle problems. They are qualified to treat problems with all parts of the foot and ankle, including toes, heels, balls, nails, skin, veins, nerves and bones and joints, and to deal with foot problems caused by injury, infection, disease, footwear and the environment as well as structural problems and biomechanical disorders.

Podiatrists also perform foot surgery. All podiatrists are qualified to perform minor foot surgery, such as nail surgery. Some podiatrists do further study to qualify as podiatric surgeons, undertaking more complex foot surgeries in a hospital setting.

Along with the treatment of painful and debilitating foot problems, podiatrists are valued members of the health care team, conducting targeted screening and risk assessment, providing preventative and invasive treatment strategies which may delay or avoid hospitalisation and devising therapeutic care plans which facilitate mobility and activity.

Qualifications

In all States of Australia and the Australian Capital Territory, podiatry is a registered health profession and is defined by the various Registration Acts. To become a podiatrist, a practitioner must complete a Bachelor of Podiatry and be registered to practice in the appropriate state. In some states, additional qualifications are legislatively recognised, allowing prescription and supply of a range of S4 medications.

Podiatry attracts student applicants of a high calibre, as it requires a Tertiary Entrance Ranking (TER) of at least 80. The course is offered at just nine universities across Australia and New Zealand.

Podiatrists are committed to ongoing professional development through the Accredited Podiatrist Program, administered by the Australasian Podiatry Council, and increasing numbers of podiatry graduates are undertaking post-graduate education.



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Post-graduate studies, including Graduate Diploma, Masters and Doctorate, are available to podiatrists at several Australian Universities.

Most podiatrists work in private practice although some work in the public health sector, in hospitals, community health centres and in nursing homes.

Research

For a small profession, around 3,202 registered practitioners in Australia and New Zealand, podiatry has a strong research profile. The profession has its own body –the Australian Podiatry Education and Research Foundation– which was established to fund and promote research into foot conditions and to ensure that there is a substantial evidence base to underpin clinical practice.

In addition, podiatrists have been forging ahead in the area of medical and scientific research, successfully attaining many high profile competitive research grants and awards, such as National Health and Medical Research Fund (NHMRC) grants.

Demand

Studies of the general population suggest the prevalence of general foot problems to be around 40 per cent. In addition, research by the Australian Institute of Health & Welfare (AIHW)¹ shows there is a strong demand for podiatry services, which is set to increase in the future. Demand for podiatry services is being driven by the ageing population and by the increase in the incidence of diabetes, an increased focus on sports medicine and a shift towards multidisciplinary care that includes allied health services.

Diabetes

Foot problems are one of the leading causes of hospitalisation for people with diabetes due to complications arising from the associated loss of circulation and sensation. An estimated 10 per cent of people with diabetes develop peripheral circulatory disease, whilst the figure for neuropathy (loss of protective sensation) ranges from 10 to 80 per cent, increasing the risk that complications, including infection, ulceration, and lower limb amputation, will arise from simple problems such as corns or ingrown toenails.

¹ Australian Institute of Health and Welfare (1999) Podiatry Labour Force 1999. Canberra



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Podiatrists play an important role in maintaining the health and mobility of people with diabetes, and research has shown an outpatient focus on the treatment and management of diabetes-related foot complications by podiatrists saves money and leads to improved outcomes.

International best practice guidelines recommend an annual foot assessment at minimum to prevent serious complications.

The average length of stay for people admitted for treatment of severe diabetic foot conditions is 7.1 days and the average cost of a total inpatient episode is \$80,698. By comparison research by the Victorian Diabetes Related Disease Service (DRFDS, February 2005) showed that the cost of maintaining a person with a severe diabetes related foot condition in the community is approximately \$2,000.

For the patient group studied over a 14-month period, they demonstrated improved wound healing, reduced amputation rates and a 24 per cent reduction in foot-related hospital admissions, despite an overall 18 per cent increase in general admissions reflecting worsening of the patients' overall complex conditions.

Ageing Australia

The risk of foot abnormality increases with age, including quantifiable peripheral nerve and vascular disease, which is coupled with an inability to adequately care for feet and increasingly inappropriate footwear choices. The need for podiatric care increases as a result, with estimates of up to 85 per cent of ambulatory and institutionalised older persons requiring intervention. ²Several studies indicate that despite the benefits of podiatry services, elderly people under-utilise this valuable service and less than half those with foot problems seek advice and treatment³.

The immediate benefit for the ambulant elderly receiving podiatry care is improved mobility and independence, with reduced likelihood of hospitalisation or institutionalisation⁴.

² Hefland A E, Cooke HL, Walinsky MD, Demp PH. (1998) *Foot problems in older patients: A focused podogeriatric study*, J Am Pod. Med Assoc. May: 88(5): 237-41 and Robinson J. (1989) *The Aldersgate Study*. Flinders Medical Centre

³ NSW Health Department. March 1991 *Podiatry Survey: Survey of Foot Problems in households and health institutions in New South Wales*. Podiatry Survey Steering Committee, Department of Health NSW (publication no. (CBD) 91-31) and Munro BJ, Steele JR. (1998) *Foot-care awareness: A survey of persons aged 65 years and older*. J AM Pod Med Assoc May: 88 (5) 242-8 and White EG, Mulley GP. (1998) *Footcare for very elderly people: a community study*. Age Ageing. Jul: 18(4): 276-8

⁴ Bowling A, Grundy E (1997) *Activities of daily living: changes in functional ability in three samples of elderly and very elderly people*. Age Ageing. Mar: 26(2): 107-14



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For some years now, returned servicemen have been able to access private podiatrists with benefits payable direct to the podiatrist by the Department of Veterans Affairs in Australia. Figures indicate the number of Veterans accessing podiatry services is increasing significantly, with the total number of Veterans increasing by 49% from 69,336 in 1994/95 to 103,540 in 1998/99.

This may reflect increased access for a broader proportion of the Veteran Community with altered eligibility criteria introduced in recent years, however it is also a direct reflection of the ageing demographic.⁵

Multidisciplinary care

A multidisciplinary approach to health care is now accepted as best practice and is especially important in treating complex and chronic conditions, many of which arise or worsen with age, such as arthritis and diabetes. Podiatrists work with other health professionals in many different ways.

For example, the recent changes to Medicare in Australia allow GPs scope to refer their patients to allied health professionals, such as podiatrists, for assistance with specific aspects of their care.

On a per capita basis, podiatry has significantly exceeded other allied health groups in terms of uptake and occasions of service since this program began in late 2004.

Sports medicine

Sports medicine is an increasingly sophisticated practice with research and technology yielding greater information about psychology, nutrition and biomechanics.

Podiatrists are increasingly involved with sports teams and assist sportspeople at a professional and amateur level to maintain foot health. As well as treating problems that arise, they can offer advice about training regimes and footwear.

At both the Sydney Olympics and the Commonwealth Games in Melbourne (2006) podiatrists were part of a multidisciplinary health care team caring for athletes and support teams.

⁵ Department of Veterans' Affairs. 2000 *Department of Veterans Affairs. DVA Annual reports: 1999-2000.*



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Claiming for podiatry

Patients can claim some podiatry costs through Medicare. A doctor must have referred them to the podiatrist and that doctor must have completed and lodged a GP Management Plan and a Team Care Arrangement claim with the Health Insurance Commission.

Some low-cost or no-cost services are available for eligible patients through community health centres and hospitals, the Department of Veterans' Affairs (Australia) and the Accident Compensation Commission (New Zealand). Some private insurance companies offer podiatry cover for an extra cost.

Where can I find a podiatrist?

Check www.findapodiatrist.org or www.feet.org.au or contact the Australian Podiatry Association (Victoria).

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