



Case of the Month

Your Charcot Arthropathy Specialist: A Tale of Two Patients

December 2015

Dear Physician,

Thank you very much for your referrals to our office. We love helping your patients restore their active lifestyles. This month's case concerns two patients with Charcot Arthropathy. It's very hard to diagnose and comes with serious consequences.

The History:

Recently, two patients referred into my office came for a 6 week follow-up after major reconstructive foot surgery. Both were diagnosed with Charcot foot with a fracture and dislocation of the medial midfoot. The navicular cuneiform joint and Lis franc's joint were fractured and dislocated on both patients. They both underwent fusions along the medial column. One patient had a fragmented navicular and so the fusions included the talonavicular joint on that patient. Both had Vitamin D deficiency and are being treated for that. Both recovered well for the first two or three weeks. After that, their paths diverged.

Patient A:

Patient A recovered well. After three weeks she felt no pain. Her foot was straight and had an arch for the first time in years. Patient A was so excited she decided to walk full-time, disregarding her post-operative instructions. On her next visit I noted that her foot was somewhat swollen and some of the screws were loose. Her bones fragmented and her arch construction is partially collapsed. She currently is using a bone stimulator to help salvage her foot and more surgery may be required.



Patient B:

Patient B was careful and did exactly as instructed. She actually had a more extensive surgery than Patient A. No weight was put on the foot for 7 weeks. The patient now has a solid fusion of the foot. She is returning to normal activity with a protective device. Her reconstruction is successful and she should have an intact foot for years to come.



If left untreated, Charcot foot, often ends in severe deformity, with a high risk of ulcer and frequent amputation. Continual and constant vigilance is needed to keep the skin intact in the face of the severe deformities associated with Charcot collapse. Often accommodation is impossible. If caught early and treated appropriately *with a compliant patient*, the foot can be restored to a more normal appearance and long term function restored.

So if you have a patient who is diabetic and you have noticed their foot collapsing or swelling without explanation get them off the foot completely and please refer them to us immediately. Call (830) 569-3338. This is a serious situation and needs immediate attention.

Yours in Good Health,
Darren J. Silvester

Untreated Charcot Foot

