

“Step Up For Foot Care”

**Addressing Podiatric Care Needs for the Homeless in San Francisco, CA
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Please visit www.stepupforfootcare.org for information and updates on the project.
Thank you for your interest on this important public health issue.

Learning Objectives

- Describe the public health implications of lower extremity pathologies in vulnerable populations
- List the pressing podiatric health needs of the homeless in a sample population
- Formulate an action plan to address the podiatric health needs of indigent populations

Background

- Homelessness is a major problem in the United States, especially in urban areas
- Health care disparity exists
 - Lack of health insurance
 - Difficulty accessing the few community health care clinics
 - Daily priorities often overtake intention to seek health care (e.g. waiting in line for a shelter bed)
- Importance of homeless health care
 - Control of infection
 - Studies have shown rise in Methicillin Resistant *Staphylococcus aureus* (MRSA) upwards of 77% per year
 - Health care cost burden
 - Lack of prevention and continual care leads to use of emergency room care
 - Prolonged hospital admissions
 - Better health improves chances someone is able to rise out of homelessness (i.e. able to work)
 - Lessen community support costs

Lower Extremity Health

- Studies have shown that homeless people are at high risk for lower extremity limb and potentially life-threatening pathologies
- Increase spread of infection and burden health care costs
- Articles and discussion on homeless health often emphasize foot problems
- Long periods of walking or standing in poor shoes and socks
 - Poor foot hygiene
 - Venous stasis from long period of standing
- Smoking prevalence may lead to peripheral vascular disease
- Poor diet may prevent or slow healing once problems have occurred
- Difficulty accessing care
- Culmination of risk factors make homeless more prone to limb and potentially life-threatening pathologies (e.g. infected ulcerations)
- Primary mode of transportation is walking
 - Lower extremity health is crucial to allow homeless to seek resources

Project Summary

- Community Service
 - Education of foot care and hygiene
 - Distribution of socks, shoes, and inserts
 - Referral to community foot care clinics

- Research
 - Foot hygiene
 - Self-reported lower extremity pathologies
 - Associated risk factors
 - Approved by Samuel Merritt University Institutional Review Board
- Idea was to promote future studies pertaining to foot care for the homeless
- Instigator and supportive data to start new community foot care clinics

Survey Collection

- 37 question survey
- 299 surveyed
- 7 months

Data Synthesis

- Fungal nails, calluses, athlete's foot most common pathologies
 - Not just a cosmetic concern
 - Important in the setting of risk factors (smoking, poor hygiene, access to care)
 - Predispose to ulcerations and infection
 - Could be contagious, such as MRSA skin infections
 - Limb and possibly life-threatening sequelae
- Good effort in proper foot hygiene
- Poor general health habits – smoking, alcohol
- On feet for long periods of time – prone to injury
- 56% experienced chronic foot pain
- Nearly a third have sought medical treatment for foot problems
- Good percentage reported previous foot injury or neuropathic symptoms
- Risk factors compounded with lack of resources illustrates vulnerability for serious lower extremity conditions

Limitations of Study

- Surveyed individuals were only those in shelters
- Comprehension of questions may be variable
- Survey bias – fill out what should be done instead what is actually done
- An objective foot examination by a licensed foot care professional may give more accurate data in terms of foot pathologies
- A comparison study with health assessment data from non-homeless populations would help assess the degree of disparity and need

Recommendations

- Encourage the homeless to:
 - Keep feet dry and take shoes and socks off at night.
 - Change to a fresh pair of socks or at least wash socks nightly and dry thoroughly
 - Wear sandals in public showers
 - Examine feet regularly
 - Urge patients to visit community clinics immediately if they have open foot sores or areas of redness
 - Identify community resources for free or discounted shoes and socks, and refer patients as needed
- Provide foot care products when possible (e.g., nail clippers, skin care lotions, corn cushions, lamb's wool, insoles)
- Sanitize public facilities to prevent skin infections, especially public showers
- When clinically appropriate, encourage patient to elevate legs to a level at or above their heart whenever possible to prevent/alleviate fluid stasis in lower extremities
- Refer patient to respite care if available for relief of foot conditions. Obtain bed rest order when necessary
- Allocate resources for homeless foot care including volunteer clinics and hygiene care

Conclusion

- Lower extremity health for the homeless is an important public health concern
- Lower community health care costs
- Reduce spread of infection
- Primary mode of transportation is walking
 - Improved foot care could potentially allow people to better access community health and social resources and ultimately be able to seek work

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