



GERIATRIC FOOT CARE — WALKING INTO OLD AGE

Understanding, Preventing & Managing Foot Disorders in the Elderly Population

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ELDERLY POPULATION
(60+ YRS)

14.7M
(2026)

90% of Elderly Have
≥1 Foot Condition

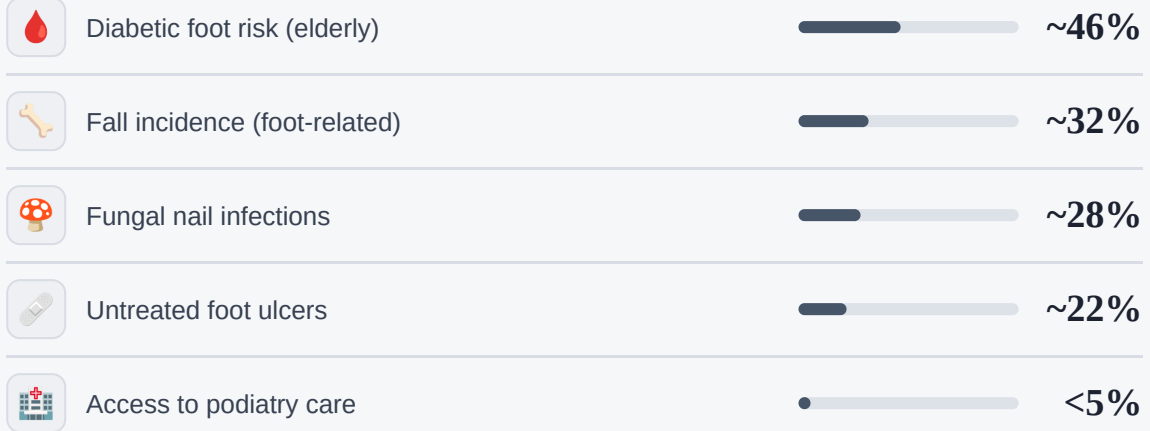
"Healthy feet help older adults maintain independence and quality of life — yet foot problems remain one of the most neglected aspects of geriatric care."

01 INTRODUCTION

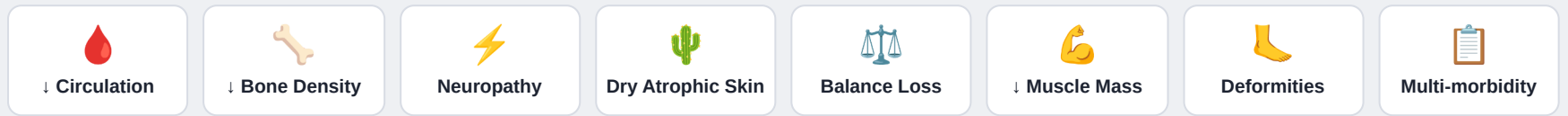
Foot health is a critical yet often overlooked component of geriatric care. An estimated **35–40%** of elderly patients visiting outpatient clinics present with foot-related complaints.

As individuals age, cumulative changes in skin, joints, vasculature, and neurology make feet increasingly vulnerable. Poor footcare directly contributes to falls, reduced mobility, and loss of independence.

02 FOOT HEALTH DATA



03 HOW AGING AFFECTS THE FOOT



04 COMMON FOOT PROBLEMS

- Diabetic Foot**
Neuropathic ulcers, delayed wound healing; leading cause of amputation
- Bunions (Hallux Valgus)**
Bony protrusion at MTP joint; worsened by narrow footwear
- Arthritis**
OA and RA cause joint stiffness, swelling, and reduced gait function
- Corns & Calluses**
Thickened skin from friction; painful if untreated
- Fungal Infections**
Tinea pedis & onychomycosis; prevalent due to open footwear
- Heel Pain (Plantar Fasciitis)**
Inflammation of plantar fascia; exacerbated by obesity & prolonged standing
- Nail Disorders**
Ingrown nails, thickened nails (onychauxis); risk for infection
- Dry & Cracked Skin**
Xerosis and heel fissures; entry point for infection; worsened by dehydration

05 RISK FACTORS

- Diabetes Mellitus**
World's 3rd highest diabetic population — ~35M adults
- Poor Circulation (PAD)**
Peripheral arterial disease reduces perfusion and tissue healing
- Neuropathy**
Loss of protective sensation; patients unaware of injuries and wounds
- Obesity**
Increases plantar pressure; accelerates joint degeneration and foot pain
- Improper Footwear**
Narrow, flat, or worn-out shoes; use of unpadded footwear
- Reduced Mobility**
Sedentary lifestyle leads to muscle atrophy, venous pooling and swelling
- Aging Changes**
Skin thinning, fat pad atrophy, nail thickening, reduced skin regeneration
- Poor Foot Hygiene**
Neglected nail care, barefoot walking outdoors; very common in rural areas

06 PREVENTION & FOOTCARE TIPS

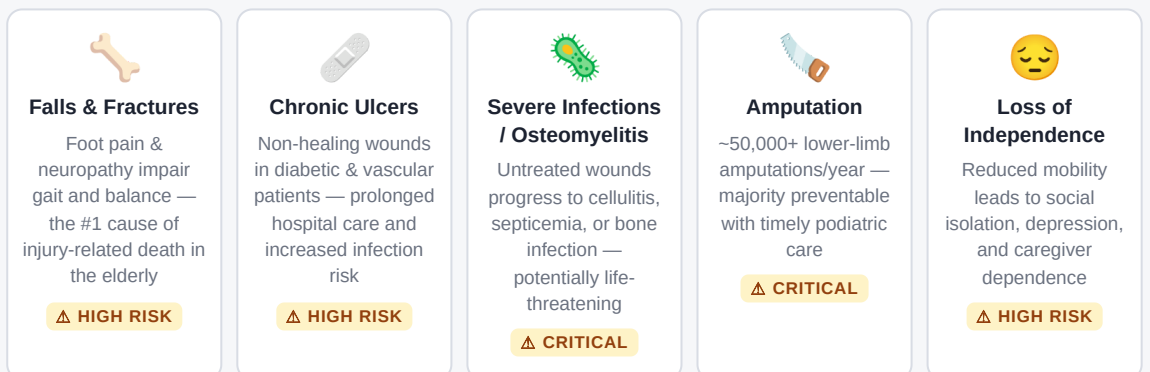
- Daily Foot Inspection**
Check for cuts, redness, blisters, swelling. Use a mirror for soles.
- Comfortable, Supportive Footwear**
Well-fitted shoes with arch support. Avoid chappals for prolonged use.
- Nail Care**
Trim nails straight across. Seek professional help if nails are thick or distorted.
- Moisturize Dry Skin**
Apply urea-based or emollient cream daily. Avoid application between toes.
- Regular Walking & Exercise**
30 min daily walks improve circulation, joint flexibility, and reduce fall risk.
- Routine Podiatry Checkups**
Annual or bi-annual assessments — crucial for diabetics & vascular patients.
- Blood Sugar & BP Control**
HbA1c <7% significantly reduces diabetic foot complications. Monitor systemic disease.

07 KEY CLINICAL FACTS

- 80% of foot amputations are diabetes-related and largely preventable
- Foot problems are a leading cause of hospitalization in adults over 65
- Regular podiatry visits reduce amputation risk by up to 85%
- Only 1 in 20 elderly patients receive adequate foot assessment
- Falls linked to foot pain cost billions in healthcare annually

08 COMPLICATIONS IF IGNORED

Neglecting foot health in the elderly can rapidly escalate from a minor complaint to a life-altering — or life-threatening — complication.



"Healthy Feet = Better Mobility & Independence in Old Age"

Every step counts — protect the foundation of your independence.

Walk Healthy
Live Independently
Age Gracefully