The Charcot Foot

What is it?

Jean-Martin Charcot 1825-1893 (pronounced Shark-O) was a French doctor.

The Charcot foot is poorly understood. It occurs in neuropathic feet (often but not exclusively due to diabetes). The foot bones become inflamed and may fracture, disintegrate or change shape. If a patient continues to walk on their Charcot foot, it can become deformed.

The initiating event is often an unnoticed trivial injury or repetitive minor trauma.

Clinical Presentation

Acute: swollen, hot, painful foot ± history of trauma in a patient with neuropathy.
Differential diagnosis could be:
- simple fracture or sprain;
- infection: osteomyelitis, cellulitis;
- gout.

Chronic: insidious development of painless, deformed and unstable foot.

Please consider:
- temperature difference – a Charcot foot is often hot with no obvious infective cause (though both Charcot and infection can co-exist).
- neuropathy – a Charcot foot usually occurs in established neuropathic feet.

Treatment

If you suspect an acute Charcot foot refer urgently to the Diabetes Foot Clinic.

Advise the patient that before they are seen they must avoid weight-bearing on that foot as much as possible. Continuing to walk, or work, on an active Charcot foot is a recipe for permanent disability.