

# THE PODIATRIC PHYSICIAN AND CARDIOVASCULAR AILMENTS

**A**s a member of the health care team, your doctor of podiatric medicine (DPM) is vitally concerned about hypertension (high blood pressure) and vascular disease (heart and circulatory problems). There are several reasons for this concern. First, because you are a patient, your podiatric physician and surgeon is interested in all aspects of your health and your treatment program. Second, he or she supports the goals of high blood pressure detection, treatment, and control.

Your podiatric physician should know if you have any of the following cardiovascular or related conditions:

**Hypertension and/or cardiovascular disease** — Hypertension sometimes causes decreased circulation. A careful examination is required to determine if there is lower than normal temperature in any of the extremities, absence of normal skin color, or diminished pulse in the feet. The concern is that these are signs of arterial insufficiency (reduced blood flow). Increased or periodic swelling in the lower extremities is important



because it may mean that hypertension has contributed to heart disease.

**Rheumatic heart disease** — Persons who have had rheumatic heart disease must be protected with prophylactic antibiotics prior to any surgical intervention. If you take medication for this condition, tell your podiatric physician.

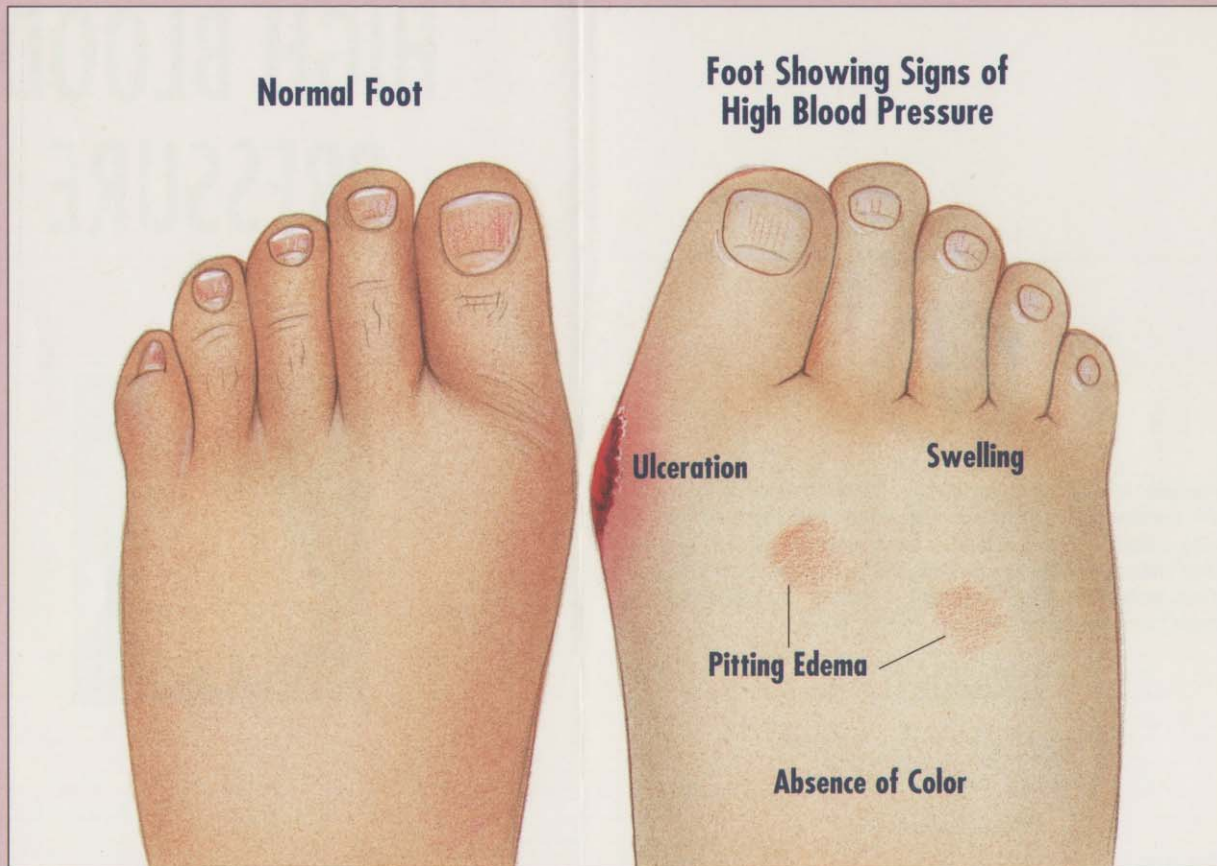
Any medication you may be taking for high blood pressure, a heart condition, or any other reason should be reported to the DPM to ensure that it does not conflict with medications that may be prescribed in the treatment of your feet.

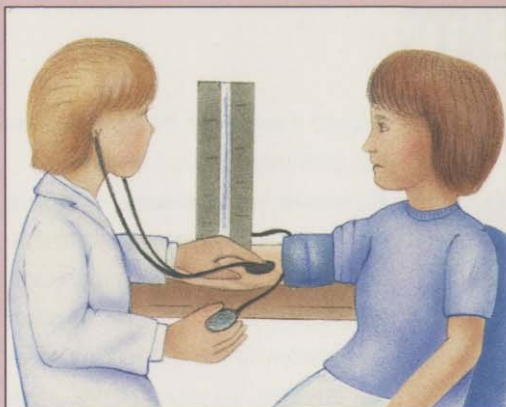
**Diabetes** — This condition frequently affects the smaller arteries, resulting in diminished circulation and decreased sensation in the extremities. Let your podiatric physician know if you have ever been told that you have diabetes, particularly if you are taking medication or insulin for this condition.

**Ulceration** — Open sores that do not heal, or heal very slowly, may be symptoms of certain anemias, including sickle cell disease. Or they may be due to hypertension or certain inflammatory conditions of the blood vessels. Your DPM is on the alert for such conditions, but be sure to mention if you have ever had this problem.

**Swollen feet** — Persistent swelling of one or both feet may be due to kidney, heart, or circulatory problems.

**Burning feet** — Although it can have a number of causes, a burning sensation of the feet is frequently caused by diminished circulation.





## Control of High Blood Pressure

High blood pressure is a major risk factor for cardiovascular disease. Uncontrolled high blood pressure can cause fatal strokes and heart disease. As a health care provider, your podiatric physician assists in controlling this public health problem. There are three major areas in which he or she provides this important public service:

**Detection** — Many podiatric physicians routinely take every patient's blood pressure and determine if it is elevated.

**Treatment** — After confirming that blood pressure is elevated and making this information part of each patient's record, the DPM refers all patients with elevated blood pressure to their primary care physicians for evaluation, diagnosis and treatment.

**Long-Term Control** — By encouraging patients in every visit to adhere to treatment, and by monitoring reductions in blood pressure, side effects of treatment, and referring for reevaluation as needed, the podiatric physician facilitates long-term control.



This pamphlet is one of a series produced by APMA that discusses several foot health conditions and concerns, including diabetes, foot health, arthritis, walking, athlete's foot, occupational foot health, warts, foot orthoses, aging, children's feet, surgery, Medicare coverage, injuries, heel pain, nail problems, footwear, women's feet, flying, fungal nails, and others. The pamphlets are available from many podiatrist members of APMA. Or call:

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YOUR  
PODIATRIC PHYSICIAN

TALKS ABOUT

# HIGH BLOOD PRESSURE

