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**The role of podiatry in supporting mental wellbeing / Rôl podiatreg wrth gefnogi llesiant meddwl**

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**The role of podiatry in supporting mental wellbeing**

**Introduction**

Over the last decade, there has been an increased focus on mental wellbeing in both policy and public discourse.

The Health and Social Care Act (2012), created a new legal responsibility for the NHS in England to deliver ‘parity of esteem’ between physical and mental health,[[1]](#footnote-1) with a similar commitment made in Scotland’s Mental Health Strategy (2017).[[2]](#footnote-2)

If Governments across the UK are to deliver on these commitments, it is vital that the role of various specialist professional groups in supporting mental wellbeing is understood, so that opportunities to improve the mental health and wellbeing of the population can be maximised. This paper is an introduction to the role of podiatry in this field and a discussion about some of the ways various podiatric interventions can support mental wellbeing.

**What is Podiatry?**

Podiatrists are degree-educated Allied Health Professionals who are regulated by the HCPC and work to HCPC standards of proficiency for podiatry.[[3]](#footnote-3) Podiatry is a highly specialist branch of medicine which supports people with a wide variety of foot and lower limb disorders, diseases, and complications. Strong podiatry networks support populations to remain healthy, mobile, and active, which prevents complications. Podiatrists working in multidisciplinary teams, for example within general practice, add system capacity; particularly as podiatrists have well developed skills in disease management and pharmacological management.

Podiatrists take a holistic approach to public health, understanding the needs and motivations of patients as individuals and as active and equal partners in their own healthcare. This is relevant to many areas of podiatry practice including supporting recovery from ulceration, as well cardiovascular modification including supported exercise, weight management and smoking cessation programmes.

**How does podiatry support improved mental health and wellbeing?**

Keeping people healthy, mobile and active

The aim of all podiatrists is to keep the population healthy, mobile and active. This is true at all stages of the life course however podiatric intervention is far more likely to support this outcome the earlier this takes place. Early intervention, prevention and early detection can prevent a multitude of complications and conditions from occurring, for example diabetic foot ulceration can be prevented, and peripheral arterial disease can be managed. Meanwhile falls cost the NHS more than £2.3bn a year.[[4]](#footnote-4)

It is important to recognise the impact that these complications and conditions have from a mental health perspective, as well as the physical and financial cost associated with them. To take one example, Podiatric intervention can support people to recover from acute MSK injuries which allow people to take part in group sport and individual exercise and activity, which can reduce social isolation, improve fitness, keep people in work and therefore increase positive mental health and wellbeing more generally.

**Patient case study** [[5]](#footnote-5)

Callum is 11 years old and enjoys playing rugby with his friends. He had heel pain for over 12 months which reduced his time on the pitch and ability to play with his friends. He was eventually referred to a podiatrist after unsuccessful attempts to treat his pain. On Callum’s first visit, the paediatric podiatrist explored what was causing pain and how to manage his pain. This included a discussion about how to keep active whilst he was vulnerable to injury. The podiatrist agreed an individualised home programme including rehabilitation strategies. His pain was well managed within 6 weeks and he was able to fully return to sport and his friendship group.

Supporting public health approaches (e.g. smoking cessation services, social prescribing programmes)

Podiatrists are trained to deliver their care and interventions through a public health lens. Many of the treatment options which podiatrists deliver have to be offered in a holistic way in order for them to be most effective. For example, a patient who is receiving treatment for a diabetic foot ulcer will be more likely to heal when their podiatric intervention is combined with other public health approaches, for example, access to smoking cessation services.

Social prescribing programmes such as access to exercise classes can be a very effective form of treatment for people suffering from MSK complications. Social prescribing of physical activity and sport activities for individuals is a critical part of delivering holistic and person-centred care, which can stimulate sustained participation in exercise, and improve overall health and wellbeing.[[6]](#footnote-6) Podiatrists report anecdotally that they receive very positive feedback from their patients who they have referred to sport and physical activity programmes in the community.[[7]](#footnote-7) Patients who are referred to such programmes have regular (depending on their individual need) follow up appointments as necessary until they are comfortable to self-manage.[[8]](#footnote-8)

Specialist podiatry services funded from mental health

The number of podiatrists who work in the NHS and are funded out of the mental health budget directly is still marginal, however, there are some encouraging examples from around the UK of where this arrangement works.

In NHS Tayside, podiatry services are funded from the NHS Board’s mental health budget to provide a range of preventative podiatric services to psychiatric patients. This supports physical health care, prevention and health promotion.

**Podiatrist case study** [[9]](#footnote-9)

Working within mental health it is important that the podiatrist has an understanding of mental health and can acknowledge the associated factors between mental health, physical health and foot health.

In 'Delivering for Mental Health' the mental health Delivery plan for Scotland (Scottish Executive, 2006) [[10]](#footnote-10) it states that "those who suffer from mental illness have greater risk of, and higher rates of heart disease, diabetes, respiratory disease and infections. They also have higher rates of smoking, alcohol consumption and drug misuse. They die younger and have a poorer quality of life. It is also recognised that people who have severe mental illness often experience difficulties accessing services appropriate to their physical health care, prevention and health promotion needs. Thus, different and targeted responses to treating this group’s physical health problems and promoting their overall health are needed."[[11]](#footnote-11)

Supporting dementia care

A key area of focus for podiatrists across the UK is supporting improved dementia care. Whilst podiatrists support people at all stages of the life cycle, a large proportion of people seeking podiatric interventions are amongst the older population.

Podiatrists have been proactive in establishing support networks to discuss how they can continue innovating to improve dementia care. In Wales, podiatrists work closely with the Royal College of Podiatry and Allied Health Professional Dementia Leads in Welsh Government, to ensure that podiatrists are linked into the various AHP dementia strategies. Support networks have been developed on the ground to ensure that podiatry teams across the country are up to date with CPD including working towards every podiatrist having a ‘skilled’ level of dementia training. These support networks include all podiatry sectors, including independent practice and Higher Education Institutions who are responsible for developing curricula for podiatry training programmes.

**How could podiatrists be supported to deliver enhanced mental health and wellbeing services?**

This paper has discussed how podiatrists are able to support positive mental health and improve the wellbeing of various population groups. However, there are a number of areas where podiatrists could be supported to deliver enhanced mental health and wellbeing support to people they interact with on a daily basis. This is perhaps most important when discussing issues around rehabilitation for patients undergoing amputation.

Five-year mortality after a major amputation ranges from 52% to 80%.[[12]](#footnote-12) Furthermore, quality of life after amputation is severely reduced, especially for living in areas of greatest socio-economic deprivation, with increased social isolation due to reduced mobility common.[[13]](#footnote-13)

It would be a positive step if podiatrists were able to link up with clinical psychology teams on the ground, both to access educational learning opportunities to support the above activity, and also to establish signposting and referral mechanisms for patients, particularly those undergoing life changing operations, who would benefit from their services. NICE guidance on management of the diabetic foot recommends that a psychologist is part of the multidisciplinary foot team.[[14]](#footnote-14)

**Conclusion**

This paper has outlined the depth and breath of mental health and wellbeing support which the podiatry profession offers. Whilst some podiatry activity is funded directly from the NHS mental health budget, the vast majority of these activities are funded directly from the podiatry budget.

There are particular areas that podiatry has a really good opportunity to support improved mental health and wellbeing, including keeping people healthy mobile and active, which can reduce social isolation and keep people in work. There are also opportunities to support people to recover from acute MSK injuries which support people to continue sport and exercise. This is especially key for children as it encourages them to grow into healthy adults. The paper also touched on the role of podiatrists in encouraging people to access smoking cessation and exercise support programmes, which improves overall health and wellbeing.

There are some areas where podiatrists would benefit from more training to support improved mental health and wellbeing, including in providing psychological support to patients who are about to undergo life changing surgery, for example, major amputations. This could be through delivering training for podiatrists to undertake in their own practice or providing referral and signpost mechanisms so that podiatry patients can access clinical psychology support when this is required.

**Contact**

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