footsteps

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President’s Message

It’s hard to believe that just over two months ago, the 2015 FIP Annual General Meeting took place. I was very pleased to see a good attendance at this year’s meeting, and I thank everyone who attended for taking time away from your family and practice to attend the meeting and represent your country.

This year’s AGM was very constructive – in addition to receiving reports from all of our FIP committees, we were able to move forward on some important bylaw and article changes. We also discussed applications from new countries, such as Romania, which was provided a probationary acceptance to enable them to provide additional information. We also received input on some key FIP initiatives, such as Podiatrist Day, and participated in good dialogue with many of our member associations.

We also conducted elections for two board positions. Dr. Brad Sonnema was re-elected and Jose Claverol Florit was elected as the Secretary General. It is very nice to have that position filled again.

I was also able to personally announce and hand out Certificates of Appreciation for two former FIP board members, Heidi Corcoran from Hong Kong and Mona Boysen from Norway. As well, we finalized that Hong Kong will host the 2018 FIP AGM.

On behalf of the FIP Board, I extend sincere thanks to the Hellenic Podiatry Association for their hospitality and friendship. We were very fortunate to be treated to a true Greek evening with authentic Greek food and entertainment.

Looking ahead, we have much to do and look forward to, such as the work of the ECP, the Academy and also the 2016 World Congress of Podiatry, which is approaching quickly.

Most importantly, we continue to find and use ways to promote podiatry and continuous communication with our FIP members and their associations. This includes our quarterly magazine, Footsteps; frequent eblasts to our member associations, who then share FIP news with their members; the FIP website; the FIP Facebook page; and more.

Communication is most effective when it is two-way. I encourage all FIP members to get in touch and stay in touch with the FIP, ask questions, volunteer for committees, explore the FIP website and more.

Sincerely,
Carine Haemels

MchS - MSc. Podiatry and Education & BSc. Occupational Therapy
FIP-IFP President
Guest Prof. University College of Ghent - ULB-UCL
Regional Advisor Special Olympics Fit Feet Europe/Eurasia
Scientific research manager Fit Feet Europe/Eurasia
On Saturday May 23, 2015 the FIP’s annual general meeting took place in Athens, Greece. This year, 22 countries were represented.

President Carine Haemels presided over the meeting and led the discussions and debates on many items. Once again she emphasized that her mandate is “communication and transparency”.

Highlights of the 2015 FIP AGM included:

• a presentation and discussion by the FIP Articles and Bylaws Committee about proposed revisions to some of the FIP Articles and Bylaws
• discussion about the FIP Recruitment Committee’s submission of applications from three countries
• elections for two FIP board positions – Secretary General and Treasurer

The FIP Board and FIP members that were in attendance at the meetings were treated to an authentic Greek dinner that was arranged by the Hellenic Podiatry Association (HPA). On behalf of the FIP Board, a sincere thank you goes out to the HPA for their excellent job in hosting the 2015 meeting.

Election Results from FIP Annual General Meeting

One of the orders of business at the recent AGM in Athens, Greece was to hold elections for two board positions.

Congratulations to Brad Sonnema (Canada) who was re-elected as Treasurer. Brad was first elected to his position as Treasurer at the 2012 FIP AGM in Glasgow.

Jose Claverol Florit (Spain) was nominated and elected as Secretary General. Welcome, Jose! We look forward to getting to know you better.

At the 2016 AGM in Montreal, Canada, the FIP will hold elections for the three other executive positions.
SAVE THE DATE
Montreal, Canada 2016

WORLD CONGRESS OF PODIATRY
MAY 26-28, 2016

www.fipworldcongress.org
World Congress Update

It’s Getting Closer…The Excitement is Building…Be a Part of It

5 Great Things to do in Montreal

• Stroll around Old Montreal (est. 1642)
• Eat like a local at the Atwater Public Market
• Tour Notre-Dame Basilica (1672)
• Visit the world-class Montreal Botanical Gardens
• Summit Mont Royal Park

Venturing Further Afield

If this will be your first visit to Canada, you may want to consider adding some time onto your visit and doing one or more of the following day trips from Montreal.

• Visit the historic heart of French Canada, Quebec City
• Rent a car and tour the Eastern Townships (a group of picturesque 18th and 19th century towns)
• Enjoy spectacular scenery in the nearby Laurentian Mountains
• Go to Canada’s national capitol, Ottawa
• Check out Mont Tremblant, a year-round, world-class, ski resort situated in one of Canada’s national parks

Every three years the FIP-IFP holds a World Congress of Podiatry. It’s an opportunity for more than 1000 podiatric professionals from 30 countries around the world to convene in one place to network and learn.

The 2016 World Congress of Podiatry (May 26 – 28) will be held in Montreal, Canada. Montreal is an approachable, world-class, historic city, commonly referred to as “the Paris of North America.” It’s a fitting description – not just because of its French-speaking residents, but because, like its counterpart in France, it’s full of culinary, historic, cultural, aesthetic, romantic and trend-setting attractions (see sidebar).

The Congress will be held in the stylish, state-of-the-art Palais des Congrès, conveniently located in the heart of Montreal and only 30 minutes from the airport.

The star of each congress is always the top-rate scientific program prepared for attending podiatrists. Every effort is made to include any and all matters that podiatrists are likely to encounter in their day-to-day practice. Dr. Vince Hetherington and Dr. Francois Allart, the World Congress education co-chairs, are overseeing the scientific program. The Call for Abstracts opens on August 10, 2015 and continues until November 17, 2015.

One of the other draws for attending the Congress is the opportunity to see the latest in podiatric technology, equipment, products and services. The large, airy exhibition hall in the Palais de Congrès provides space to accommodate everyone who’d like to showcase their products and services. Already, podiatric suppliers and sponsors are responding to the prospectus that was sent out, so if you’re a supplier and you’d like be part of the 2016 World Congress of Podiatry, check out the details at www.fipworldcongress.org

Early-bird registration for attendees opened on June 18. You can save $100 (CAD) by registering before December 31, 2015.

This is the first time Canada has hosted a World Congress. It’s an opportunity for you to see this magnificent, safe, friendly country and partake in a very special event. You can get even more information on Montreal and the 2016 World Congress by going to www.fipworldcongress.org
Executive Director’s Update

Saying Goodbye

As many of you may already know, I submitted my letter of resignation to the FIP Board on April 4, 2015. However, I agreed to continue with the FIP until they hire a new Executive Director, which will be happening soon.

As I look back at my eight years with the FIP, I have a lot of great memories and no regrets.

The FIP has grown tremendously and I am very proud to have played a part in the organization’s efforts. I have been very fortunate to work with so many wonderful people.

Together, we have revamped the corporate partner program, established an FIP Seal of Acceptance/Approval program and transformed the FIP website. More recently, the FIP established a Facebook presence too.

We also created Footsteps, the FIP’s quarterly magazine, which provides a way to showcase the activities of FIP member associations, highlight board initiatives, and provide clinical and practice management content for FIP members.

Another very significant change was the FIP’s decision to co-host the World Congress of Podiatry. This has enabled the event to rise to another level and celebrate the synergy that results when two groups work together effectively. I am very fortunate that the 2016 World Congress will be held in my country, Canada, which enables me to continue being involved with the preparations for the World Congress as the Executive Director of the Canadian Podiatric Medical Association.

Communication has always been a significant factor of the FIP and I feel very fortunate that, as Executive Director of the FIP, I was often the first point of contact for members, companies, organizations and the general public. My knowledge of podiatry and the world has grown tremendously as a result.

I leave this position proud of FIP’s accomplishments; certain there are even more to come.

Thank you for the opportunity to work with and for all of you.

Jayne Jeneroux
Belgium

Over the past six months the BVP/ABP has become the most important association for podiatrists in Belgium. This is thanks to the very dynamic leadership of our president, Carine Haemels; secretary, Paul Borgions; and its board members, in particular the new young members. Membership has been growing, as is the enthusiasm of the leaders.

The Belgian podiatrists are regulated under the Royal Act KB 78 from the ministry of the Health Service, called FOD Volksgezondheid. This act regulates all the medical and paramedical professions in our country according to the Napoleonic code. The Belgian authorities are reviewing and updating this act and all the professions concerned have to adapt to the new version before the end of 2016.

BVP/ABP has been accepted as a member in UNIZO, the biggest lobby group in Belgium, which defends the interests and rights of the independent liberal professions such as doctors, pharmacologists, physiotherapists, dentists, and speech therapists, but it also includes other professions like lawyers and notaries.

Through UNIZO we have access to the different offices of the FOD of the health service. We are now even able to discuss the possibility of reimbursement of our acts as podiatrists.

We are proud to announce that the director of the BORGINsole company, (the main sponsor of the BVP/ABP) Gratienne Sionck, director of a biomechanical laboratory which makes functional orthotics for podiatrists in Belgium, has won the national competition for the Womed (women managers) Award 2014. She received the prestigious award from our Queen Mathilde. As a result of the award and attention it receives, Gratienne Sonck has been widely interviewed on television and radio and written about in the newspapers.

BVP/ABP was invited to assist at the congrés of NVvP by its president, Peter Boelens. The president of BVP, Filip Cossement and José Roofthooft represented BVP/ABP and it was agreed that we will continue to meet and discuss issues of common interest for the profession. We also met with Dr. Margreet van Putten who informed us about the meeting in May in the Netherlands about the International Diabetic Foot Congres.

Canada

With less than a year to go, the Canadian Podiatric Medical Association is focused on its role as co-host of the 2016 World Congress of Podiatry. In addition to building awareness and excitement about the event across North America, we have many CPMA members involved in the planning of the event. This includes Dr. Francois Allart, from Quebec, who is working as co-chair of the 2016 FIP World Congress Scientific Program with Dr. Vince Hetherington, who was the chair of the 2013 World Congress Scientific Program. Dr. Robert Chelin (Ontario) and Jayne Jeneroux (Alberta) are once again working together with the conference planners on all aspects of the world congress. We are very fortunate that Dr. Hetherington, Dr. Chelin and Jayne already have considerable experience working on FIP conferences, including the 2013 World Congress of Podiatry in Rome, Italy.

The framework of the academic program has been established, and the Call for Abstracts starts on August 10, 2015. We also have a number of exhibit booths confirmed. We are excited about having the World Congress in Canada, and look forward to welcoming colleagues around the world to our country!

Other activities in Canadian podiatry include helping our members with issues and activities in their provinces. This includes providing advice and support regarding the Ontario government’s Health Professions Regulatory Advisory Committee in its review of the podiatry profession in that province and helping the newly-formed Quebec Podiatry Association develop as a strong advocate for podiatry in that province.

We also continue to build on our relationship with insurance companies across Canada and with other key organizations such as the Canadian Diabetes Association.

Dr. Joseph Stern
President
Canadian Podiatric Medical Association

Czech Republic

The annual elective conference of the Czech podiatrists took place in Prague on 17 – 18 April 2015, with special guest, Vice President of FIP, Dr. Matthew G. Garoufalis.

Marie Součková M.D. and Miroslav Havrda M.D. will remain in their positions as (respectively) the Czech FIP President and Vice President. The meeting was attended by a number of experts from Slovakia, Poland, Germany and Switzerland.
Lectures delivered at the conference covered the fields of chiropody, podiatry, prosthetics and podiatry care organization, as well as the need for life-long education in chiropody.

The first official state-guaranteed postgraduate education of podiatrists took place in the Czech Republic in the years 2014-2015, in which 23 doctors from the Czech Republic and one from Slovakia participated. The event was very successful and will be soon repeated. Postgraduate education for physiotherapists and the establishing of a non-medical podology branch are being prepared.

An integral part of the two-day conference was the exhibition of 20 field-related companies and a press conference about the development of podiatry in the Czech Republic.

France

We have secured the recognition of our profession in the draft ‘Act for Health.’ Under the category of “Diagnosis in Podiatry,” the necessary requirements to become a medical professional with determined competencies are outlined – and will come into force as soon as the law is definitely voted by next October.

Serge Coimbra
Federazione Nationale des Podologues

Germany

Verband Deutscher Podologen (VDP) is holding its 13th VDP Quality Conference on Saturday, September 19, 2015 at the Hilton Hotel in Nuremberg.

Topics include:
• From the practice for the practice
• Interdisciplinarity in podiatry
• Professional policy

For more information go to: http://www.verband-deutscher-podologen.de/submenu/quako2015.html or email to info@verband-deutscher-podologen.de

Italy

In March-May quarter, the Associazione Italiana Podologi (AIP) focused primarily on strengthening relations with the highest health institutions, on publishing regarding podiatry and on training.

With regard to strengthening relations, the President Mauro Montesi has met twice with the Minister of Health, Beatrice Lorenzin, who has shown great sensitivity to the role of podiatry in the national health system. Positive relations with the President of the Lazio Region, Nicola Zingaretti, have resulted in podiatry care being included in the organization of the Houses of Health, established in Lazio Region to strengthen the medicine of the territory.

As for publishing, AIP reported a large, widespread interest in the “Treaty of Podiatry,” presented for the first time at the World Congress held in Rome last October.

How many have had the opportunity to consult it, have recognized the great value of the work, which can be considered “unique” at the European level? In five pages of each of the two volumes every aspect of our profession was covered, from the history of our profession to the most important professional aspects, to the cultural cues that characterize our business.

The AIP held its XXVIII National Congress in Bolzano at Claudiana from 1 to 4 May. Time was spent on a plenary session and institutional relations, but the most valuable aspects were the podiatric workshops, which often included interacting with patients. This meant the instructor was able to better highlight the different aspects of diseases and how a podiatrist could help. Everyone enjoyed the workshops. Mariapia Garavaglia, former Minister of Health and a supporter of the role of the podiatrist, spoke at the closing of the Congress.
Malta
Congratulations to Dr. Cynthia Formosa! She is Malta’s first podiatrist to hold a Ph.D. Dr. Formosa is the head of the podiatry school at the University of Malta. She was recently awarded a doctorate degree by the University of Brighton. The title of her research was “Culture and management of diabetes in Malta.”

Peru
May was World Foot Health Awareness Month. Peru participated in the FIP’s campaign on this important topic using messages on the internet and by holding briefings with podiatrists and students to help inform the public of the importance of foot health. The special focus of this year “Fab Feet for Teens” was well received by podiatrists. We provided our members with ideas they could use to promote the profession in different media.

Through the program, posters were distributed to members emphasizing the importance of working together as a profession. While we continue this important work, the public will become more knowledgeable about the profession and consequently be better prepared to make use of its valuable services.

Seminar on Podiatry in Peru and Ecuador
Our association together with the School of podiatry JEVIAL took the opportunity to organize two seminars for podiatrists in Ecuador and Peru during the months of February and March in Lima and Quito. Pdgo. Carlos Banegas of Argentina provided lectures on the treatment of warts, mycosis and other fungal infections. During the seminars, workshops with patients were held, demonstrating techniques and the management of instruments and medicines. Participants readily showed their appreciation for the videos shown at each seminar.

Peru organized these seminars because we know the podiatric profession is growing rapidly in Ecuador and we want to support and collaborate with them as much as possible.

Next World Congress in Montreal
Members should set their calendars for the next World Congress to be held in Montreal, Canada on May 2016. Efforts are already underway to increase the participation of members from Peru and other South American countries. Our Association will use all the resources within its control to promote the meeting.

South Africa
A warm hello from a wintry South Africa.

We find ourselves now in winter, but we are fortunate to have temperatures ranging from 5-20 degree centigrade during the day.

June 2015 saw the 90th year celebration of the Comrades Marathon which is an ultra marathon run from either Durban (on our East coast of South Africa) to Pietermaritzburg being the up run – or from Pietermaritzburg to Durban the following year, being the down run. No matter which direction you’re heading the 89 kms make for a long day running. With the Comrades every year most podiatry practices are kept very busy in the months leading to the race which dies down during the winter months until the legs start getting moving in August again when the practices start getting busy with injuries. We are proud of our very own Brandon Maggen for completing his first Comrades this year!

14-16 August 2015 sees the Podiatry Association of South Africa also celebrating their 10th Biennial Podiatry conference. This year we’re at spectacular Stellenbosch! With three of the most influential podiatrists in the world, Howard Dananberg, Kevin Kirby and Simon Spooner, as guest speakers, I’m sure this conference is going to be fantastic. There is still availability for the conference on www.pasacongress.co.za and with exchange rates how they are, get a last minute ticket and enjoy a cheap holiday and an amazing three days, learning, connecting and playing!
United Kingdom

SOCIETY OF CHIROPODISTS AND PODIATRISTS UK

A general election took place in the United Kingdom in May. A majority Conservative government was elected, but the Scottish Nationalist Party won all but one seat in Scotland.

Health provision is already devolved to the parliaments of the four UK countries, and there are growing differences in the way that health services are commissioned, funded and provided.

The new government has pledged an additional £8 billion for the National Health Service in England. This is intended to pay for seven days per week working and an increased numbers of doctors and nurses. The Society will be campaigning to ensure that at least some of the money is used to train and employ more podiatrists to meet the needs of our ageing and diabetic population. One of the problems we face is that some of the Members of Parliament who were helpful to us have lost their seats, so we will have to build up a new cadre of supporters.

Public health (preventing illness and disease through healthy living) is a cornerstone of government policy, and we are increasingly promoting the role of podiatrists in public health. The Royal Society for Public Health recently published a report on the role of Allied Health Professionals (AHPs). This found that AHPs are confident about engaging in conversations with patients about physical activity, healthy eating and smoking, but are less confident about sexual health, domestic violence and substance misuse. The report recommends that AHP undergraduate courses should include modules on public health and that professional bodies should provide continuing professional development in these areas.

The College of Podiatry’s annual conference will take place on 19-21 November in Harrogate, Yorkshire on the theme of “Putting people first”. The call for papers has been published, with a deadline of 25 June for oral presentations and 7 September for poster presentations. International submissions are very welcome and can be made at www.podiatryconference.org

Joanna Brown

United States of America

APMA Among Top Workplaces in Washington, DC

The American Podiatric Medical Association (APMA) has been selected for the second year in a row as one of The Washington Post’s Top Workplaces. The Top Workplaces are determined based solely on results of an anonymous feedback survey completed by employees. APMA was one of the first 150 organizations awarded the distinction on the 2014 inaugural list, and was selected as number 40 from the more than 300 companies evaluated in the Washington, DC, area for the 2015 list.

“We’re doubly honored to be recognized as a Top Workplace for a second year,” said Glenn B. Gastwirth, DPM, executive director and CEO of APMA. “When a team wins the Super Bowl, everybody on the staff has contributed and everybody gets a Super Bowl ring. We think the same way—all of us play a role in APMA’s success, and though everybody’s contributions are different, we do things to make it clear we value them all.”

APMA leadership encourages employees to strike a positive balance between their home and professional lives. Employees enjoy generous paid vacation and sick leave, and the APMA offices close the week between Christmas and New Year’s. Flexible schedules allow employees to work while also pursuing advanced degrees, managing childcare responsibilities, attending family functions, and more.

The association offers regular professional development, staff participation in the development of policies through an internal management committee system, and opportunities for staff to provide input into the strategic planning process. APMA has placed a priority on cultivating a highly educated, expert staff, which creates an atmosphere of excellence.

JAPMA Recognized

APMA is pleased to announce that the Journal of the American Podiatric Medical Association (JAPMA) has won the Award of Excellence in the 2015 APEX Awards for Publication Excellence competition for the 13th consecutive year.

The awards are based on excellence in graphic design, editorial content, and overall communications effectiveness. This award is sponsored by Communications Concepts, Inc., a Springfield, VA-based company that provides consulting services to organizations in the communications field.
APMA Selects James R. Christina, DPM, as Next Executive Director and CEO

APMA is pleased to announce that James R. Christina, DPM, has been confirmed as its new executive director and CEO. Dr. Christina will succeed Glenn B. Gastwirth, DPM, who has held the position for more than 17 years and has been a member of the APMA staff for more than 29 years. Dr. Gastwirth last year announced his plans to retire in May 2016.

Dr. Christina has a long history with APMA including a decade-long tenure on staff as director of Scientific Affairs. Before joining APMA staff, he was in private practice for 20 years in Rockville, MD, and was chief of Podiatry at Suburban Hospital in Bethesda, MD. As an American Board of Foot and Ankle Surgery-certified podiatrist, he was instrumental in achieving an expansion of the Maryland scope of practice for podiatrists to include ankle privileges. Dr. Christina was president of the Maryland State Board of Podiatric Medical Examiners and a member of the National Board of Podiatric Medical Examiners. He is a member of the American Diabetes Association, the American Public Health Association, the American Society of Association Executives, and the American Society of Podiatric Surgeons.

Dr. Christina graduated magna cum laude from West Virginia University with a BA in Biology and received his doctor of podiatric medicine degree from the Pennsylvania College of Podiatric Medicine (now Temple University School of Podiatric Medicine). He completed residency training at Straith Memorial Hospital in Southfield, MI, and University of Maryland/Lutheran Hospital in Baltimore.

“I am excited to begin a new chapter in my service to APMA and my profession,” said Dr. Christina. “As CEO, I will work closely with the board, member volunteers, and staff to ensure that we continue our progress on the Pathway to Parity and achieve the goals of our membership.”

Dr. Gastwirth will remain with APMA during the transition, which is expected to begin this spring.

Spring Health Campaign Helps Athletes of All Ages Play it Safe

APMA created the Play It Safe campaign with this question in mind: Americans may be ready to resume walking, running, and other outdoor sports as the weather gets warmer, but are their feet ready?

The month-long Play It Safe campaign, which kicked off April 1, provided the general public with important information about sports injuries, prevention, proper footwear, and more during Foot Health Awareness Month. The campaign included a host of activities, with national media relations efforts, new print materials, online advertising, social media events, and more.

Many of these materials are customizable to allow podiatrists to provide the patients in their community with information most relevant to them. Learn more at www.apma.org/playitsafe.

Play It Safe Campaign Highlights

- 43 percent increase in Web traffic
- 3,000 tweets during our #PlayItSafe Twitter Party
- 1.8 million ad views on ESPN.com
- 63 percent increase in Facebook fans
- 448 radio stations aired DPM expert interviews
Instant relief and visible improvement in a few days only!

PROVEN EFFICACY IN 3 CLINICAL STUDIES!

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Effective on cracked heels as well as hands. Easy to apply thanks to canule tube.

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REDUCE. REUSE. RECYCLE. These are the bywords of making changes that can result in big savings, both for the environment and your practice. See how many of these ideas suggested by small business owners that might be possible to incorporate in your office.

POWER
• Turn off your PC’s power strip every night. Saves over $150 a year! To make this easier to do, screw the power strip under the outside edge of your desk. When you leave at night, just reach below your desk and flip the main switch on the power strip to shut down everything. No more crouching under desks!
• Pull out all power chargers that aren’t charging something and coffee makers that aren’t brewing. Phantom loads add up!
• Reduce unnecessary or seldom-used programs on your office computers. Extra programs on your system eat up and heat up your computer requiring more electricity and generating more heat into your office environment.

PAPERLESS
• Instead of printing a document and throwing it out after you’re done with it, re-use it to print on the blank side of the paper. It cuts paper costs dramatically. Or adjust your default print setup for double-sided prints.
• Put together a basic recycling program. Even if it’s only a special trash can for paper waste every little bit helps.
• Go electronic with all your monthly bills and statements.
• Buy a coffee mug and a water bottle for every employee, plus a few extras for guests. Stop buying paper cups, period.

PROTECT YOUR PLANET
• Purchase used and reconditioned office furniture or store fixtures – available through local firms – and donate furnishings when you remodel.
• Use Google Docs so that the people in your practice can access documents from anywhere without ever having to print something out.
• Use rechargeable batteries in your wireless mouse/keyboard. It prevents all those batteries from filling landfills.
Diabetes: More results support use of foot orthoses to significantly decrease plantar pressures

By Jordana Bieze Foster

Research from Sweden and Egypt provides more evidence that foot orthoses can significantly decrease plantar pressures in patients with diabetes, theoretically reducing the risk of foot ulcers and lower extremity amputation.

Investigators from the University of Gothenberg in Sweden found that both custom and prefabricated insoles significantly reduced in-shoe plantar pressures in patients at risk of ulceration, effects that were maintained after one year. And researchers from Ain Shams University in Cairo, Egypt, also documented significant plantar pressure reductions with the use of a custom-molded foot orthosis in diabetic patients who had previously undergone first ray amputation.

The Swedish team randomized 114 diabetic patients to receive one of three types of insoles: a custom device made from 35-shore ethylene vinyl acetate (EVA), a custom insole made from 55-shore EVA, or a prefabricated device with support in the medial arch, a metatarsal pad, and a 25-shore A Poron cover. Patients wore the designated insoles with their own standard walking shoes. The researchers did not track patient compliance with insole wear.

No patient had an active foot ulcer at baseline; one patient developed an ulcer in the first six months, but that one case was the only ulcer to occur in the 12-month study period. Although the study did not include a control group, the ulceration rate of .9% was lower than most rates reported in the literature.

All three types of orthoses were associated with peak plantar pressures of less than 272 kPa after one year. Peak plantar pressures for the custom orthoses were significantly lower than for the prefabricated orthoses in the heel region only, said Ulla Tang, CPO, a doctoral student at the University of Gothenburg’s Institute of Clinical Sciences and an orthotist-prosthetist at Sahlgrenska University Hospital, who presented the findings at the ISPO World Congress in Hyderabad, India.

“All three types of inserts effectively distribute pressure under the sole in order to minimize the risk of ulcers,” Tang said.

The Egyptian group created custom foot orthoses for 20 patients with first ray amputations secondary to diabetic foot ulcers—a particularly challenging population with regard to preventing ulcer recurrence.

“Every foot after an amputation is usually abnormally shaped,” said Rana El-Hilaly, MD, a lecturer in rheumatology and rehabilitation at Ain Shams University, who presented her group’s findings in Hyderabad.

“What I want is something that will fill in the defect and increase total contact area to better distribute the pressure. So I create the device for the foot as if it was a prosthetic socket, to capture the different shapes and bony prominences.”

Each custom orthosis included a 4-mm Pedillin base layer supplemented with Poron in high-pressure areas, topped with a layer of EVA and another layer of Pedillin.

El-Hilaly and colleagues assessed static and dynamic plantar pressures in the 20 patients using a pressure mat under three conditions: barefoot, with the custom orthoses, and with flat insoles. They found that, during walking, both insoles decreased peak plantar pressures in the midfoot, heel, and midmetatarsal regions, but the custom insoles decreased pressures more than the flat insoles. During standing, they found significant reduction of peak plantar pressures only with the custom insoles.

The findings were also e-published in December by The Foot.

Sources:
Remember the iconic words from a secret agent show of TV and movie fame; “Your mission Jim, should you decide to accept it...” can easily apply to our practices today. Poke around the internet and check out some medical office websites. Most practice websites have a mission statement right on their homepage. If you find that many of the statements are identical, almost word-for-word, it’s likely because it is a generic one that was built into the website package… and the practice kept it out of convenience. This is fine as long as adopting this language as your own means you intend to live it! Because, although it IS just a static statement, it has a purpose and that purpose is to define why your practice exists, not someone else’s. Some argue that the lack of a mission statement does not signify the end of the world. True enough. There are far more critical things to focus on. Still, their purpose is not to be diminished.

Your office ‘proclamation’ can be a pretty revealing organizational tool. Mission statements, together with values and vision, serve as guidelines for practice decisions, organizational weaknesses, customer service, risk management issues, ethics and professionalism to name a few. For these reasons and because having them in place helps improve communication, cooperation and policy enforcement, it is essential that doctors and staff are aligned with their office philosophy. Sadly, this is not always the case. Go ahead; test it for yourself. Doctors, ask your staff this question. “Does our practice have a mission statement?” and if they say yes, ask them to repeat it. Now, turn the tables. Staff, ask the same of your doctor(s). Really… try it. OK, how did that exercise work out? Chances are each party will likely get a lot of shoulder shrugs, some guesswork, embarrassing giggles, blank stares or all of the above. I know that is generally the response I get.

Having knowledge of the basic philosophy of the practice suggests everyone is moving in the same direction. Without that, it becomes a multi-directional path. Picture the chaos of a soccer team unaware of where the goal is, the sidelines, rules of the game. When all I get are vague responses, I begin to understand why conflict and discord exist in their otherwise very successful practice. It’s why I use the same inquiry process (as above) to better understand the cohesiveness of the teams I work with.

It’s never too late to write your own mission statement. It starts with knowing how your practice is different from all the rest and then answering a couple of key questions, i.e., what is your purpose? – What do you hope to accomplish in your practice? How can your practice help others? – What are the standards and values that you’d like your business to be associated with? It’s meaningful to incorporate your vision and values into your mission to give your statement a bigger impact. Think of it this way. Your mission statement describes to patients what your practice intends; your vision will describe how you plan to get there, and your values will identify just what you are willing to do (or not do) to make your mission happen.

This article started out suggesting you read other mission statements. Do it and you’ll get a feel for all the many different models out there - which ones project well; which sound a little phony. You’ll also get some pretty good ideas and concepts to include and exclude in crafting your own declarations. When you finally write the perfect statement that describes your mission, vision and values, blow it up, frame it and proudly hang it in your reception room. It’s a statement that offers meaning to your patients. It should be visible. Use it to replace that useless sign that reads, “Payment is expected at the time of service” because regardless of your expectations, the message itself rarely (if ever) motivates patients to pay and (with insurance companies the primary payers) hardly ever enforced!

Finally, just be sure your statement honestly defines your practice and high principles, so that they are NOT just static words, but ones that you and your staff have vowed to live up to. After all, if you’re going to talk the talk; you best be ready to walk the walk!

Ms. Homisak, President of SOS Healthcare Management Solutions, has a Certificate in Human Resource Studies from Cornell University School of Industry and Labor Relations. She is the 2010 recipient of Podiatry Management’s Lifetime Achievement Award and the sixth non-podiatrist to be inducted into the PM Hall of Fame. Lynn is also an Editorial Advisor for Podiatry Management Magazine and recognized nationwide as a speaker, writer and expert in staff and human resource management & training.
The Academy of Podiatric Medical Educators (APME) is currently being restructured to increase its effectiveness at the next AGM. Part of this restructuring includes the identification of a contact person for each member country to allow for better communication between the Academy and the member countries.

The mission is the Academy is to provide educational expertise and support to the FIP, FIP member countries and educational institutions.

The purpose of the Academy is to:

1. Serve as a resource to the FIP and FIP committees on specific educational issues.
2. Consult with educational countries and their educational institutions as requested.
3. Assist the FIP in developing a World Congress educational program.

We are still trying to gain acceptance of a definition of PODIATRIST acceptable to all member countries.

The Academy is actively preparing to assist with the 2016 World Congress including overseeing the abstract submission and review process.

The email address for the Academy is: iapme.fip@gmail.com
Friday, May 2, 2015 was the first-ever World Podiatrist Day. The idea originated from a conversation among the executive of the FIP-IFP, talking about how many professions declare a specific date to celebrate their work. After doing some research, the FIP-IFP determined that a specially designated day to recognize podiatrists and the care provided to patients could help raise the profile of podiatrists, and educate people about the world-wide availability of podiatric services.

**World Podiatrist Day**

Once the day was decided, the FIP-IFP assisted in preparations to celebrate World Podiatrist Day by suggesting ways podiatrists could mark the day in their practices, developing and posting a down-loadable poster and an article that FIP members could submit to their local newspaper on the FIP-IFP website – and by sending out a news release.

A very respectable start. But if World Podiatrist Day was to have traction it would be because of work at the individual and local level. Provided below are a few examples of what some FIP member countries did to celebrate the event:

- In Belgium a sticker was created and distributed to every Belgian podiatrist. The idea was to place it in a visible location (this initiative built upon the poster – and was great one).
- In Canada and in the Netherlands articles and information were sent out nation-wide in the respective podiatric newsletters, *Podiatry Canada* and *Podosofia*.
- France and Barbados took a different approach using radio spots and interviews to talk about the day.

Hopefully FIP members are encouraged to increase the global nature of next year’s World Podiatrist Day with even more countries embracing World Podiatrist Day in 2016.

**Think about:**

- Marking the day on your calendar for 2016, so you stay aware that it’s coming up.
- Keeping track of events in your area/country that you may be able to sponsor or participate in on May 2 (i.e. 10k run, foot clinic, picnic, etc.)
- Consider what individual actions you could take in either your practice (free coffee for patients) or your community to promote World Podiatrist Day.

If you know of any World Podiatrist Day activities we haven’t mentioned, please email us at jjener@gmail.com. We want to keep track of how this special day grows. We’d also like to hear if you have suggestions about how the IFP-FIP can support you next year in celebrating World Podiatrist Day.
Many FIP members know that the FIP has a World Foot Health Awareness Month Committee, the Special Olympics International Committee and the European Council of Podiatrists Committee. These three committees generate most of the attention. But did you know that the FIP has six additional committees doing important work to keep our organization operating smoothly and effectively?

Provided is a brief description of the FIP committees, along with information about who is currently serving on each one.

**Articles of Association Committee (AAC)**

**Purpose:** To develop appropriate amendments to the Articles and Bylaws to be voted on at the Annual General Meeting of the Council each year.

**Chair:** FIP Member at Large Christian Jerome

**Current members:** Joanna Brown, Carmel Devine, Margret Jonsdottir, Robert Chelin

**Budget and Finance Committee (B&FC)**

**Purpose:** To establish and review the budget and budgetary projections of all FIP accounts. To take responsibility for all financial matters of FIP including banking, remittances, payments and expenses.

**Chair:** FIP President Carine Haemels

**Current members:** FIP Treasurer Brad Sonnema

**Corporate & Economic Development Committee (CEDC)**

**Purpose:** Established in 2010 to secure a stable, continuing source of non-dues income to allow the FIP-IFP to grow and prosper as well as provide more benefits to its membership and partners. Non-dues income can come from the FIP’s Corporate Partner Program, Seal of Approval/Acceptance Program, unrestricted educational grants, sponsorship programs and the FIP World Congress.

**Chair:** Dr. Kathleen Stone

**Current members:** Dr. Robert Chelin

**European Council of Podiatrists (ECP)**

**Purpose:** To represent the FIP in the Conseil European Des Professions Liberales (CEPLIS), the sole representative voice for podiatry with the European Commission, European Parliament and European Council. To assist, through representation, in the recognition of professional training, skills and competencies within the European Union (EU).

**Chair:** Neil Simmonite

**Current members:** Pauline Wilson, Minna Stolt, Serge Coimbra, Peter Boelens, Christian Jerome
GET INVOLVED! If you would like to be more involved with the FIP, being part of a committee is a good start. The first step is to email one of the members of the executive board and let them know that you’re interested.

International Academy of Podiatric Medical Educators (IAPME)
Purpose: Enhance podiatric medical education worldwide by stimulating growth in podiatric programs while strengthening the teaching skills of faculty worldwide.
Chair: Dr. Vince Hetherington
Current members: Stuart Baird, Elena Regalado, Fatima Cassim, Heidi Corcoran, Gabriel Dominguez Maldonado
Active participants include Christine Wiese and Margreet Van Putten

International Recruiting Committee (IRC)
Purpose: Recruit new member countries and individuals into the FIP and to support doing that by developing strategies and promotional material for recruiting.
Chair: Dr. Sylvia Virbulis
Current members: Dr. Joseph Caporusso, Dr. Matt Garoufalis

Special Olympics International Committee (SOI)
Purpose: Ensure FIP’s participation in a multi-disciplinary worldwide network of volunteer healthcare professionals who support the national and international Special Olympics through Healthy Athletes clinics. Podiatrists participate specifically in “Fit Feet” screenings and advisory clinics.
Chair: Co-Chairs: Rob Conenello and Patrick Nunan (United States)
Current members: Carine Haemels

Website Committee (WSC)
Purpose: Maintain an attractive and functional website for the benefit and access of the FIP members, corporate partners and the general public.
Chair: Robert Chelin
Current members: Aldo Palomino, Jayne Jeneroux

World Foot Health Awareness Month Committee (WFHAMC)
Purpose: To develop and distribute resource material and a poster each year in support of the annual World Foot Health Awareness Month (May). World Foot Health Awareness Month was created by the FIP to increase the awareness of the importance of foot health among the general public and other health professionals, and of the podiatrist as the practitioner of first choice for foot and ankle care.
Chair: Andrew Clarke
Current members: Carine Haemels, Paula Goldea, Sylvia Virbulis, Margreet Van Putten
Oops!

Our sincere apologies go out to Andrew Clarke (South Africa), the new Chair of the FIP World Foot Health Awareness Month Committee. In the last issue of Footsteps, we mistakenly listed Christian Jerome (FIP Member at Large and former chair) in the article about the 2016 WFHAM campaign.

Andrew Clarke willingly stepped down as the new chairman when Dr. Kel Sherkin left his position, early this year, as Chairman of the WFHAM committee, after serving in that position for several years.

Andrew brought a new spark to the committee and the efforts to create a new campaign. We look forward to Andrew heading up the 2017 WFHAM committee, with a goal to produce the campaign materials and have them ready for FIP members early in the new year.

Dr. Deheer Presented with FIP Humanitarian Award

On July 23, 2015 at the American Podiatric Medical Association Annual Scientific Meeting in Orlando, Florida, FIP President Carine Haemels awarded Dr. Patrick Deheer the FIP Humanitarian Award.

Dr. Deheer resides and practices in Franklin, Indiana (USA). He received the award for establishing the comprehensive diabetic foot program at the Hospital Bernard Mevs Medishare clinic in Port-au-Prince, Haiti. The program at the clinic includes: diabetic wound care, surgical care of the diabetic foot, routine foot care, diabetic foot examination and risk classification, and a diabetic orthotic program. The ultimate goal is to reduce the high rate of amputations in Haiti, thereby reducing the subsequent high mortality rates. Once the clinic is fully established it will be expanded countrywide, with the original clinic serving as the referral source for the regional and local clinics.

Congratulations Dr. Deheer!
A Trip of a Lifetime

Podiatry Scientific Mission in Israel – November 15–24, 2015

Events and Sights:
- IDF Medical Corp Training Base
- Sea of Galilee
- Baha’i Gardens
- Diaspora Museum/Yad Vashem
- Tour of 3 Medical Centers
- Winery Tour & Tasting
- Bedouin Camp

Cities:
- Tel Aviv
- Jerusalem (Old and New City)
- Old Jaffa
- Tsfat (Safed)
- Be’er Sheva
- Acre (Acco)
- Caesarea

For more information on the podiatric mission go to www.apfmed.org/programs or email American Healthcare Professionals and Friends for Medicine in Israel at http://apfmed.org/programs/missions/
ECP update
By the ECP Committee

Strategy Document
European Council of Podiatrists 2015

INTRODUCTION
The members of the ECP committee met in Brussels in October with Conseil Europeen Des Professions Liberales (CEPLIS) and FIP-IFP Board members to discuss the strategy of the European Council of Podiatrists and its place within the wider FIP-IFP and CEPLIS.

This report is a summary of the topics discussed and plans made.

Plan 2015
The main strategies of the ECP over the coming 12 months are as follows:

COMMUNICATION
To improve communication between member states and the ECP committee by increasing the online presence of the ECP. The FIP assistance offered will be important support for the development of this as an important communication medium between the ECP and the European membership. The ECP also wish to improve communications between the FIP-IFP board and the International Academy of Podiatric Educators. There is also a need to improve the communication between the ECP and CEPLIS and their committees. Following the FIP-IFP Board’s endorsement of the ECP strategy during the AGM meetings in 2014 and budgetary re-alignment we are now able to input to CEPLIS committees more effectively and this in turn will contribute to a greater presence in CEPLIS and ensure Podiatry matters are represented at key meetings and forums.”

FINANCE
The ECP occupies a unique position within the FIP in relation to its financial position due to the EU levy of 60 cents per member from FIP which also pays for the CEPLIS subscription. This fund was a notional sum in order to start the process to identify and protect sums required to fulfil the ECP mission. The committee reflected on the huge increase in tasks required of it in line with the ECP mission statement and particularly with the relationship to European Legislation which continues to develop and grow. There exists a real danger that the failure to fund the ECP to an effective level in order to undertake the full duties required of it within the EU political arena will severely disadvantage the profession in the EU.

The ECP committee were unanimous in their desire to actively participate in EU politics through CEPLIS and indeed committed in their desire to support the committees of CEPLIS.

- A member of the ECP committee is funded to attend every meeting of CEPLIS.
- The ECP committee must be supported to participate actively in at least one committee of CEPLIS.
- The ECP committee requires one face-to-face strategy meeting per year in addition to the AGM in order to align and develop a Strategic Plan in line with their mandate. In addition the ECP AGM occurs at an acceptable time with adequate resources and time to fully engage with its member and further develop partnership working and understanding of the strategy and work involved.

- Full and appropriate funding for the ECP committee to attend the ECP/FIP AGM and the developmental meetings around the AGM.
- Translation fees to be identified and added to the resources of the ECP budget.

The ECP, as a committee of the FIP, is responsible for promoting the interests and general awareness of the podiatry profession to the European Commission, Parliament, and Council.
The ECP committee would like to have the full and active support of its entire membership in this requirement and actively seeks member’s direct votes or proxies to the ECP committee to achieve this much needed change.

COMMON TRAINING FRAMEWORK IN PODIATRY
The development of a common training framework is a document that replaces the scope of practice and the threshold qualifications document and needs to be fully representative of all podiatrists across EU member states. This document must represent a minimum of 80% of practising podiatrists across the EU. The ECP has become part of this important working group in CEPLIS. If we can complete this document and present it to the European Commission then it will have huge implications for the movement of podiatrists across member states as well as threshold training programmes across member states. This document and the support of the working group is one of the most important areas of work currently for the ECP and your support.

YOUR AD COULD BE HERE
If you have a product, service or equipment related to foot health or foot care, placing an ad in Footsteps is an economical way to showcase it to a targeted, international audience.

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