

DERMO ADJUVANTS

SPECIFIFIC TREATMENT
FOR DIABETIC FEET



PIEDS DU

DIABETIQUE soin et prévention

AKILDIA BERMO-ADJUVANT

PODO-PROTECTRICE
Protective Cream
Schutz-Creme
Bischermende Creme
Creme Protectora





TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

DIABETES



- > A few figures
- What are the consequences for the feet?
- Preventive foot care for diabetics
- > Advice to give to diabetics on foot care





DIABETES



A few figures

DIABETES

- n 2003: 189 million diabetics in the world
- Type II diabetes: around 90 % of al cases

20 millions en Europe.

- > 1.7million in France.
- > 4.1 million in Germany.
- > 2.5 million recorded in Poland (9 % of the population)

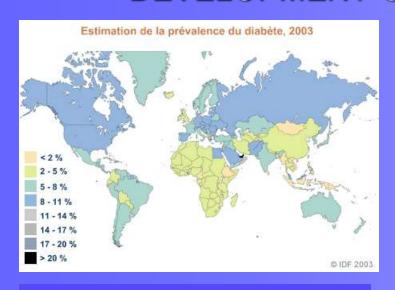
14 millions in the USA (20 millions in 2010).

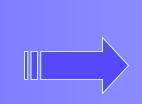
In 2025: 333 millions throughout the world

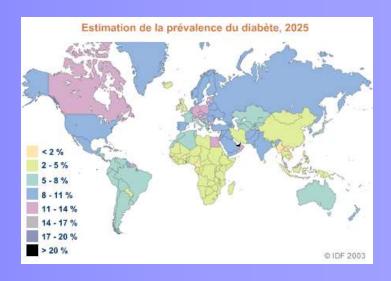




DEVELOPMENT OF DIABETES IN THE WORLD







Around 177 million In 2003 = 5.1%

Around 333 million in 2025 = 6.3%

Estimation des 10 pays comptant le plus grand nombre de personnes atteintes de diabète (tranche d'âge 20-79), 2003 et 2025

2003			2025		
	Pays	Personnes (millions)		Pays	Personnes (millions)
1	Inde	35,5	1	Inde	73,5
2	Chine	23,8	2	Chine	46,1
3	Etats-Unis	16,0	3	Etats-Unis	23,1
4	Russie	9,7	4	Pakistan	11,6
5	Japon	6,7	5	Russie	10,7
6	Allemagne	6,3	6	Brésil	10,7
7	Pakistan	6,2	7	Mexique	9,0
8	Brésil	5,7	8	Egypte	7,8
9	Mexique	4,4	9	Japon	7,1
10	Egypte	3,9	10	Allemagne	7,1
					© IDF 2003







DIABETES



What are the consequences for the feet?

CARE AND PREVENTION FOR THE FEET OF DIABETICS

CONSEQUENCES FOR THE FEET

- > NERVE AND ARTERY PROBLEMS IN THE LOWER LIMBS CAUSE TROPHIC SKIN PROBLEMS IN THE FEET.
- > THESE PATHOLOGIES <u>(neurological and vascular)</u> ARE OFTEN LINKED TO AND ARE WORSENED BY A RISK OF INFECTION.
- > THE FEET OF DIABETICS = A FRAGILE FOOT



FOOT INFECTION:

40 times higher in diabetics. It can be caused by a trauma or following trophic problems and fissural hyperkeratosis.



RISK OF GANGRENE:

17 times higher in diabetics.

50 % of lower limb amputations are performed on diabetics.
5 to 15 % of diabetics undergo the amputation of a toe, a foot or a leg.
25 % of hospitalisations of diabetics are due to a foot problem.

TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

"NEUROLOGICAL" FOOT

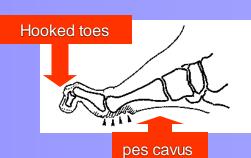
CONSEQUENCE OF NEUROPATHIA - CHARACTERISED BY:

- Total or partial loss of sensation
- Increased blood flow with opening of arterial and venal shunts
- osteoporosis (fractures)
- malformation of the foot
- reduction in perspiration: intense dehydration

Consequences for the skin:
very dry, hard skin with zones of hyperkeratosis.
Protective function disturbed: opening door to infections

Major risk:

Wound breaking through the sole of the foot Very high risk of over-infection and gangrene.



AKILDIA

PODO-PROTECTRICE







"VASCULAR" FOOT

CONSEQUENCE OF MACRO-ANGIOPATHIA OF THE LOWER LIMBS DIABETIC ARTERITIS IS CHARACTERISED BY:

- Nocturnal pains
- Intermittent claudication
- Pale, cold foot
- Weak pulse
- Absence of hair
- Hyperonychia
- Ischemic foot





Consequences for the skin:

Thin, fragile skin, atrophied skin tissue, skin healing problems due to a blood flow deficiency in the small blood vessels

Major risk: risk of ischemia - necrosis.

Very high risk of over-infection and gangrene.







Preventive care for the feet of diabetics

TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

Diabétiques, Hémophiles,

Artéritiques,

PODOLOGUE

■ GENERAL ADVICE FOR FOOT PROBLME RISKS:

CONSULT DOCTOR IMMEDIATELY

(strict control of the diabetes, treatment of superficial infections, antitetanus prophylaxis, prevention of ischemia.....)

■ PREVENTION:

- Checking the foot through consultation of a range of multidisciplinary specialists and education suited to the patient and their family.
- Screening for neuropathia and arteriopathia

- Monthly visits to a foot care specialist (ablation of hyperkeratoses, cutting of nails, orthoses to compensate for the foot statics)

- Daily foot examination
- Regular and vigorous foot hygiene regime
- Daily use of a foot product to:

 <u>hydrate the skin</u>
 <u>prevent the appearance of hyperkeratosis</u>
 <u>retain the protective role of the skin</u>





AKILDIA CREAM

DERMO ADJUVANTS

SPECIFIC FOOT CARE
FOR DIABETICS







SPECIFIC FOOT CARE
FOR DIABETICS

SPECIFIC FOOT HYGIENE FOR DIABETICS





® AKILDIA

SPECIFIC FOOT CARE FOR DIABETICS



*AKILDIA CREAM

FOOT PROTECTION CREAM

PRODUCT ADVANTAGES

- Keeps foot hydrated
- Restores the barrier function
- Helps the foot keep its softness for protection
- Prevention of hyperkeratosis
- Helps the skin tissue healing process

PRESCRIPTION AND USE ADVICE

Skin dryness and foot hyperkeratosis for diabetics

- > Formula designed to meet the needs of diabetics
- > From pluridisciplinary collaboration between diabetology specialists, chiropodists and pharmacists
 - > Recognised by the French **Diabetics Association**
 - > Used and recommended in hospitals



TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

CREME ®AKILDIA

FOOT PROTECTION CREAM



MOISTURISE AND RESTORE THE HYDRO-LIPIDIC BARRIER

Essential fatty acids and shea butter in a non-occlusive H/E emulsion



AKILDIA

HELP HEALING PROCESS AND ACT ON THE MICRO-CIRCULATION
Centella Asiatica



CALM AND MAINTAIN THE PHYSIOLOGICAL BALANCE OF THE SKIN Palmitoyl caseinic lipo-amino acid

HELP PREVENT HYPERKERATOSIS vitamin A palmitate



PROVEN EFFECTIVENESS IN SEVERAL CLINICAL CLINICAL STUDIES

In hospitals - Under dermatological control - In sports medicine - By chiropodists



CLINICAL STUDY ON THE EFFECTIVENESS OF THE AKILDIA CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS



DOUBLE BLIND CLINICAL STUDY USING A PLACEBO ON THE EFFECTIVENESS OF AKILDIA CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS



HEALING EFFECT ON FISSURAL HYPERKERATOSES ON THE SOLE OF THE FOOT



AKILDIA

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CLINICAL STUDY ON THE EFFECTIVENESS OF AKILDIA CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS

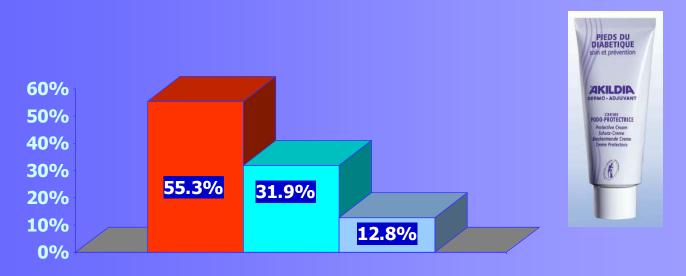
HOTEL DIEU at LE CREUSOT (France) DIABETOLOGY DEPARTMENT of DR. S.CL

STUDY CONDITIONS:

- 50 diabetic patients
- 100% neuropathia of the lower limbs
- 64% macro-angiopathia
- -60% serious foot problems (wounds breaking through the sole of the foot, necrosis of the toes, feet or legs, wounds of bedsores)
- 40% minor trophic skin problems
- 2 month treatment, 1 application per day.

RESULTS:

ASSESSMENT OF THE EFFECTIVENESS OF THE AKILDIA® CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS



- **Excellent effectiveness of Akildia® cream in 55.3% of subjects**
- Good effectiveness of Akildia® cream in 31.9% of subjects
- Average effectiveness of Akildia® cream in 12.8 % of subjects
- VERY HIGH LEVEL OF SKIN TOLERANCE WITH AKILDIA® CREAM (96 % of subjects)
- GOOD EFFECTIVENSS ON THE REDUCTION OF HYPERKERATOSIS, SKIN DRYNESS.
- IMPROVEMENT IN SOFTNESS AND ELASTICITY OF SKIN.



DOUBLE BLIND CLINICAL STUDY USING PLACEBO ON THE EFFECTIVENSS OF AKILDIA CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS

<u>SWEDEN DIABETOLOGY DEPARTMENT DR. SKARBERG</u>

STUDY CONDITIONS:

- 24 diabetic patients :
 - 70.8 %: neuropathia of lower limbs
 - 50 %: arteriopathia

Condition of skin before treatment:

- 91.7 %: skin dryness
- 75 %: hyperkeratosis
- 3-month treatment, 2 applications per day.

Right foot: AKILDIA® cream

Left foot: placebo





RESULTS:

ASSESSMENT OF THE EFFECTIVENESS OF THE AKILDIA® CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS





- GOOD EFFECTIVESS OF THE AKILDIA CREAM ON THE REDUCTION OF HYPERKERATOSIS AND SKIN DRYNESS.
- SIGNIFICANT DIFFERENCE WITH THE PLACEBO (which is nonetheless not without activity because it is made of the excipient of AKILDIA cream, which has a moisturising properties).



RESULTS:

ASSESSEMENT OF THE EFFECTIVENSS OF AKILDIA® CREAM ON THE IMPRROVEMENT OF SKIN SENSITIVITY (filament method)



IMPROVEMENT IN SENSE OF TOUCH % subjects ## 80% 60% 40% 20% 0% 17.6% 17.6%

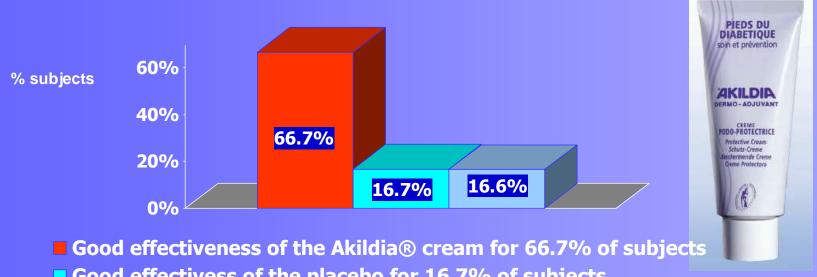
- Improvement in skin sensitivity for 70.6% of subjects treated with Akildia® cream
- Improvement in skin sensitivity for 17.6% of subjects treated with the placebo

- IMPROVEMENT OF THE SENSE OF TOUCH OF THE FOOT TREATED WITH AKILDIA CREAM
- SIGNIFICANT DIFFERENCE WITH THE PLACEBO



RESULTS:

GENERAL ASSESSMENT OF THE EFFECTIVENESS OF AKILDIA® CREAM FOR TREATEMENT OF THE FEET OF DIABETICS



- **■** Good effectivess of the placebo for 16.7% of subjects
- Identical effectivess of the Akildia® cream and the placebo in 16.6 % of subjects

- GOOD EFFECTIVESS OF THE AKILDIA CREAM FOR TREATMENT OF FEET OF DIABETICS
- SIGNIFICANT DIFFERENCE WITH THE PLACEBO (which is nonetheless not without activity because it is made of the excipient of AKILDIA cream, which has also has moisturising properties).



STUDY ON THE HEALING EFFECTOF AKILDIA CREAM ON FISSULAR HYPERKERATOSES ON THE SOLES OF FEET

TEST PERFORMED UNDER DERMATOLOGICAL CONTROL

STUDY CONDITIONS:

- 10 patients with fissural hyperkeratosis
- Two-week treatment.
- 2 applications per day.
- 1 foot treated, 1 foot as control.



TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

PIEDS DU DIABETIQUE

AKILDIA BERMO-ADJUVAN

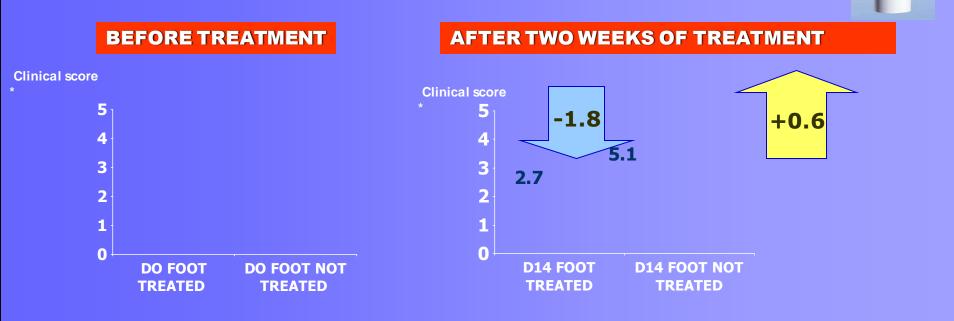
PODO-PROTECTRICE

RESULTS:

HEALING EFFECT OF AKILDIA® CREAM ON FISSULAR HYPERKERATOSIS ON THE SOLES OF THE FEET

VARIATION IN NUMBER OF FISSURES ON THE FOOT TREATED COMPARED WITH THE NON-TREATED FOOT

Score*: presence of fissures 0 = zero / 1 = slight / 2 = average/ 3 = significant/ 4 = very significant/ 5 = severe



- Significant reduction in the number of fissures on the foot treated. (-1.8)
- Increase in the number of fissures on the foot treated. (+0.6)

TREATMENT AND PREVENTATIVE CARE FOR THE FEET OF DIABETICS

PIEDS DU DIABETIQUE

AKILDIA

PODO-PROTECTRICE

RESULTS:

HEALING EFFECT OF AKILDIA® CREAM ON FISSULAR HYPERKERATOSIS ON THE SOLES OF THE FEET

VARIATION IN NUMBER OF HYPERKERATOSIS ON THE FOOT TREATED COMPARED WITH THE NON-TREATED FOOT

Score*: presence of hyperkeratosis 0 = zero / 1 = slight / 2 = average / 3 = significant / 4 = very significant / 5 = severe



- Significant reduction in hyperkeratosis on the foot treated. (-1.2)
- No significant variation of hyperkeratosis on the non-treated foot.(- 0.2)



STUDY ON THE USE OF AKILDIA CREAM FOR SPORT

EXPERIMENT IN THE SPORTING ENVIRONMENT ASSESSMENT AND RESEARCH DEPARTMENT OF CREPS DR GENSON

STUDY CONDITIONS:

- 10 walkers with diabetes
 - Fragile skin problems (ulcers...)

 - 80 % suffering from pain100 % with œdemas on the feet
- 3 month treatment
- 1 application per day
- Sporting activity kept up



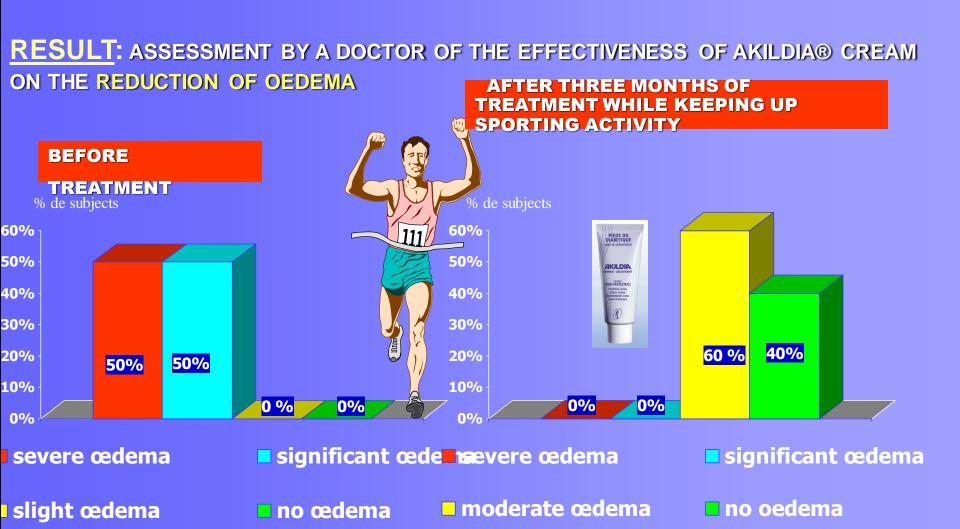


RESULT:



Good assessment of the overall effectiveness of the AKILDIA® cream for sporting activities.

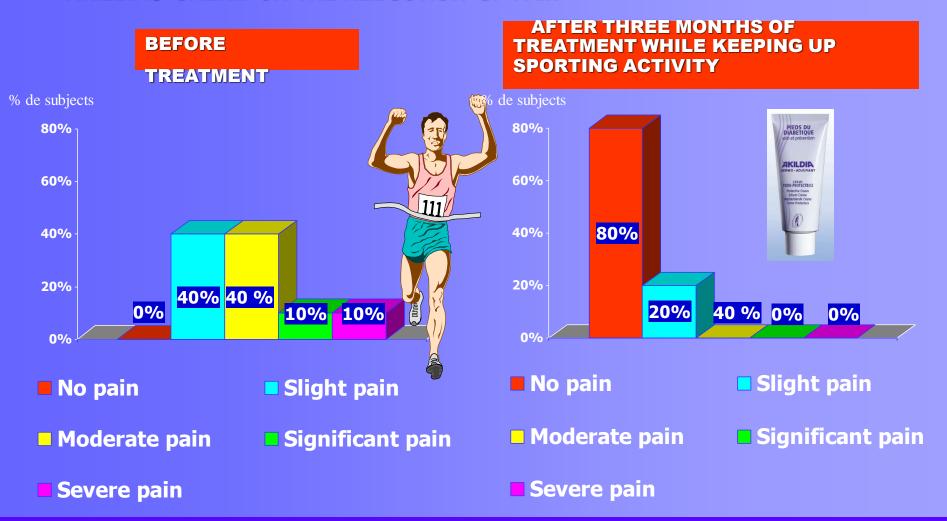




After 3 months of treatment, clear reduction in œdemas (100% slight to zero œdemas against 100 % of significant to severe œdema before treatment)

TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

RESULT: ASSESSMENT BY A DOCTOR OF THE EFFECTIVENESS OF AKILDIA® CREAM ON THE REDUCTION OF PAIN



After 3 months of treatment, clear reduction in pain (80 % of the subjects feel no pain, although all felt slight to severe pain before).





BATH OIL & TOILET LOTION «AKILDIA SPECIFIC HYGIENE OR THE FEET OF DIABETTICS





TREATMENT AND PREVENTATIVE CARE FOR THE FEET OF DIABETICS

TOILET LOTION

ADVANTAGES OF THE PRODUCT

- Practical: can be used without water, no rinsin
- Cleans and deodorises the feet
- Avoids maceration



- Essential oils of lemon, lavender, thyme and rosemary
- Vegetal glycerine
- RECOMMENDATIONS FOR USE

Use on a toilet glove, or a cotton cloth, to clean and deodorise the foot.

Do not rinse, and dry immediately











HYGIENE FOR FEET OF DIABETICS

ESSENTIAL OIL BATH ADVANTAGES OF THE PRODUCT

- Concentrated bath oil for feet
- Softens the skin (superfatting agent effect)
- Gives a feeling of well-being and relaxation
- Contains a complex of fungicidal and bacterial act that cleanse the skin

ITS ACTIVE SUBSTANCES

- Essential oils of lemon, lavender, thyme and rosemary
- Hydrosoluble coconut oil
- Fungistatic agent

RECOMMENDATIONS FOR USE

Dilute 1 cap in 5 litres of warm water (35 to 37 ° maximum)
Bathe the feet for 5 minutes (not more)
Dry the feet carefully without rubbing









DIABETES

Advice to be given to a diabetic patient regarding foot care

TREATMENT AND PREVENTIVE CARE FOR THE FEET OF DIABETICS

- Monthly pedicure (removal of hyperkeratoses, cutting of nails, ortheses to compensate for statics of the sole of the foot)
- Inform your chiropodist of your diabetes
- Examine your feet daily
- At the slightest injury or wound, consult your doctor urgently
- Regular and careful foot hygiene
- Be careful when taking a bath (temperature, length)
- Dry the feet well (maceration, mycosis)
- Do not use corn removers
- File your nails (do not use scissors)
- Wear appropriate shoes ...
- Do not use a hot water bottle, electric blanket...
- Never walk bare foot
- Use a foot care product daily to ensure the protective role of the skin

