

Chiropody, diabetes and World War II

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(War Issue) 6(36): 569–71
The *Chiropodist* (1940) The prevention of infection and gangrene of the lower extremities in diabetes mellitus. *The Chiropodist* 27(248): 257–60 (Reprinted from the Quarterly Bulletin of the Department of Health, City of New York, by “The Journal of the (U.S.) National Association of Chiropodists”
Todd I (1940a) Diabetes mellitus. *Chiropody Practitioner* (War Issue, No. 4) 6(8): 53–8

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It is not commonly known that Allied soldiers in World War II German prisoner of war (POW) camps could study for and sit examinations. This was facilitated by the British Red Cross and other organisations offering assistance in particular subjects. In the case of those wishing to study chiropody, this was the Chiropody Group Council.

There was a set list of texts, copies of which were supplied to candidates through the British Red Cross. Candidates were expected to take papers in anatomy and physiology, science and theory of chiropody. Some of the questions related to diabetes. The 1943 paper concerning anatomy, physiology and medicine posed several general questions relating to the arterial circulation in the leg and foot, as well as asking for a brief explanation of the role of hormones and enzymes in the body. However, more specifically, one question asked the candidates “to say what you know about the causation, symptoms and complications of diabetes mellitus” (Medical Auxillaries Board and Chiropody Group Council [MABCGC], 1943a). In addition, the first question on the corresponding theory of chiropody exam was: “What particular dangers are associated with the treatment of a patient suffering from Diabetes? What precautions must be observed by the chiropodist?” (MABCGC, 1943b).

The chiropody journals of the time also covered diabetes, particularly emphasising the need for strict foot care and preventative treatment (Todd, 1940a). In 1940, ‘The Chiropody Practitioner’ published a comprehensive article on diabetes, covering prevention, symptoms and treatment. The author, Irene Todd, emphasised the need for great care to be taken of the feet; not only to prevent infections but also to monitor problems with circulation. She advised a scrupulous foot hygiene regimen, as well as wearing the correct socks and footwear. For diabetic ulcers, Todd suggested the wound be cleaned and sterilised and then treated with Dakin’s solution (sodium hypochlorite). Todd concluded the article by saying: “The prevention of diabetic lesions of the feet should hold an important

place in treatment. Prophylaxis, prompt and energetic treatment of minor lesions, will prevent the serious and often fatal later stages” (Keyes and Thibodeau, 2020).

A further article in ‘The Chiropodist’ focused on the prevention of gangrene and infection in people with diabetes, in order to try and reduce the risk of amputation (The Chiropodist, 1940). Towards the end of the war ‘The Chiropody Journal’ printed an article entitled ‘Foot-care of diabetic cases’, which provides a general overview of the aetiology of the disease, but ended with a paragraph referring specifically to feet (Stiles, 1945). The author suggested signs of diabetes in the feet would include blanching, dryness, brittleness of the nails, increased acidity of the skin and the excretion of dextrose in sweat.

This was mirrored in contemporary documents for those in the forces. Much work had been done in World War I by the War Office and the Incorporated Society of Chiropodists, to provide a basic system of chiropody for the troops resulting in the publication of ‘Battalion Chiropody’ (Runting, 2018). During World War II, many orderlies in the Royal Army Medical Corps were trained in basic chiropody and, most importantly, in how to train soldiers to keep their feet in good condition.

Some of those wishing to undertake the chiropody examinations were already performing basic foot care in the POW camps. For those prisoners suffering with diabetes, coping with a restricted diet and shortage of medicines would have been extremely challenging. However, having colleagues who had some knowledge of foot hygiene and an awareness of the condition would have proved invaluable. ■

Medical Auxillaries Board and Chiropody Group Council (1943a) *Professional Examination (Prisoner of War Scheme)*. Physiology paper.

Medical Auxillaries Board and Chiropody Group Council (1943b) *First Professional Examination (Prisoner of War Scheme)*. Theory of Chiropody paper.

Keyes M, Thibodeau R (2020) Dakin Solution (Sodium Hypochlorite) . *StatPearls [Internet]*. Available at: <https://bit.ly/3hscBcd> (accessed 15.06.2020)

Runting EV (1918) *Battalion Chiropody*. London: Scientific Press

Stiles AA (1945) Foot-care of diabetic patients. *Chiropody Practitioner*