Chat with Pat

An expert view on issues that matter to you.

Patricia Quigley,
PhD, APRN, CRRN,
FAAN, FAANP, FARN

Foot wear– shoes must be individualized

Foot problems, socks and improper shoes have long been known to contribute to gait and balance problems, falls and injuries.

Just published in 2019, Hatton and Rome completed an in-depth analysis of the evidence surrounding ill-fitting footwear and suboptimal footwear design that can lead to problems with balance, mobility and result in falls in older adults. While comfort is a major factor for footwear selection in older adults, their choice in slippers, such as slip-on slippers can increase fall risk.

Take a moment and answer this question:
Do you think it's safe and individualized care to place non-skid socks on all your patients?

It is suggested that multifactorial assessment prior to mobility be conducted, such as cognition, ability to follow commands, vital signs (esp. orthostasis), lower extremity muscle strength, range of motion, and reflexes. This assessment should include the feet: presence of foot problems such as deformities, edema, bunions, calluses, flat foot, pain, loss of sensation, etc. needed for selection of proper footwear.

Socks and Nonslip Socks:

In hospitals, nonslip socks are used as temporary footwear for older adults, but evidence of their effectiveness to improve patient safe mobility and prevent falls is conflicting. Nonslip socks with rubber tread are safer for ambulation than regular socks and slip-on slippers, because the tread provides traction to prevent feet from sliding. Nonslip socks can also increase risk of spreading infections in hospitalized older adults (Hartung & Lalonde, 2017).

But nonslip socks are not as safe to prevent fall or promote safe mobility as proper shoes.

Shoes:

Shoes that have a basic construct rubber sole with a soft canvas upper (e.g. athletic shoes) are suggested to pose the lowest risk for fall in older adults (Hatton, Sturnieks, Lord, et. al., 2013).

The evidence suggests that patients, esp. older adults, ***should wear their own, appropriate safe shoes*** (Hartung & Lalonde, 2017). The relationship between footwear designs and falls in aging adults that have metabolic disease, diabetes, inflammatory arthritis, and neurodegenerative such as Parkinson's Diseases, and is driving innovations in protective, accommodating footwear. These innovations support biomechanical function of the foot, ankle and lower limb – very exciting.

Have you *LIMITED* nonslip sock use and increased patient shoes in you fall and safe mobility programs?

Have you *STOPPED* putting nonslip socks on patients with Parkinson's Disease or shuffling gait and STARTED use of patient's shoes?

Have you *STARTED* assessing Diabetic Patients for status of lower extremity sensation perform initiating mobility?

References

Hartung, B., & Lalonde, M. (2017). The use of non-slip socks to prevent falls among hospitalized older adults. A literature review. *Geriatric Nursing, 38*(5): 412-6.

Hatton, A.L., Sturnieks, D.L., Lord, S.R., et al. (2013). Effects of nonslip socks on the gait patterns of older adults when walking on a slippery surface. *J. Am. Podiatric Med Assoc., 103*(6): 471-9.

Hatton, A.L., & Rome, K. (2019). Falls, footwear, and podiatric interventions in older adults. *Clinics in Geriatric Medicine, 35(*2): 161-71.