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&  
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**Diabetes, Obesity & Heart**

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### Diabetic foot disease an innovation in treatment


A literature search from 2011 to date was conducted. An impact of diabetes on the peripheral circulation has been of a late stage occurrence. However, it is recognized as a significant complication due to further progression of the disease leading to an irreversible consequence e.g. amputation of the lower limb. As a treatment in earlier research Hyperbaric oxygen therapy was considered following a failure of antimicrobial treatment of foot ulcers. Later, a compromised circulation was identified as being responsible for the resistance in healing ulcers and subsequent antibacterial resistance. Finally, in literature, inconsistency in the diagnostic methods for peripheral arterial disease has been recognized. In our research, observations of clinical presentation e.g. the feeling of cold feet as a persistent occurrence, numbness, discoloration (pale green, blue) have been a common finding. Our research utilizing “Perivasc/Diab” (our own creation), since 2015, has been based on early identification of vascular compromise among poorly controlled diabetics. A topical application twice a day for 30 to 90 days, in a population of 30 patients has yielded reversal of vascular compromise and restoration to normally functioning limbs.

In Perivasc, active ingredients were responsible for a vasodilator effect. A continued application twice a day and by eliminating predisposing factors e.g. smoking and glycaemic control were essential to see optimum resolution. The active ingredients in the pilot study were also recognized as effective treatment measures in urological and cardio-vascular diseases. The study will be continued for a further review of these supplemental benefits. Through the course of the entire study no side effects have been observed.

#### Speaker Biography

Vinod Chandra Tawar has earned BSc Hons. and BSc Tech. Pharmaceuticals from University of Bombay. He was offered a teaching assistantship at the School of Pharmacy, University of Manitoba, Canada, where he achieved a Post-graduate (MSc) degree in Pharmacology followed by working as a Toxicologist at a University Hospital in Winnipeg for a duration of 10 years. In due course, he developed a Toxicology laboratory for patient management and Forensic purposes. This later became a reference laboratory for the Province of Manitoba. In 1981, he decided to study Medicine and graduated Medicine in 1985. Subsequently, he joined Douglas Hospital Research Centre at McGill University as a Psychiatry Research Consultant with participation in projects on depression, Alzheimer’s disease, alcoholism and schizophrenia. Currently he is working in King George Medical Clinic, Canada.

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