



Total contact cast (TCC)

Information for patients from the Plaster Room Team

This leaflet gives you advice about your total contact cast (TCC), which has been applied because you have diabetic foot ulcer / Charcot Foot. TCC is the recognised gold standard treatment for diabetic foot ulceration and Charcot Foot.

How does the cast work?

The cast is designed to take pressure away from your foot, and distribute it up your leg. The cast is made from layers of plaster of Paris and synthetic (artificial) material.

How soon after I have had the cast fitted can I walk on it?

Once you have had the cast applied, you will not be able to put any weight on your affected foot for 30 minutes. After this you can walk about on the cast; however the less walking you do in the cast the better. If you need crutches to help you get about, staff will arrange this for you.

What are the benefits of TCC?

- It is the best possible treatment for the type of ulcer that you have.
- It should help to heal your ulcer as quickly as possible.
- If you have Charcot Foot, it is the best way of keeping the bones in your foot supported.

What are the disadvantages of TCC?

- The cast may rub and cause other ulcerations on your foot or leg.
- You may need to be in the cast for many months, and in some cases over a year.
- You may have to come to the clinic every week to have the cast reapplied.
- You may have to be off work while you have the cast on.

- You will not be able to drive a manual car while you have the cast on. You may be able to drive an automatic car, but you will need to check this with your car insurance company.
- We do not recommend travelling abroad when you have a diabetic foot problem. You should speak with your airline for advice if you are planning to fly. Remember to tell your travel insurance company about your foot problem before you travel.

If you have any questions or concerns about the issues listed above, please speak to your practitioner; they are happy to answer your questions.

What will happen if I choose not to have a TCC?

If you decide not to use a TCC you will continue with your current treatment.

Instructions for patients

Do

- Rest your leg as much as possible.
- Wear the sandal you have been given at all times when you are walking.
- Check your cast every day for signs of damage. If you notice any damage, please contact the Plaster Room.
- Check the skin on both your legs for signs of the cast rubbing. To prevent the cast rubbing your other leg when in bed, you can use a large sock or pillow case to cover the cast.
- Keep a close check on your blood sugar levels.

Do not

- Try to remove the cast yourself.
- Poke anything down the cast, as this could damage your skin under the cast and cause an infection or further pressure sores.
- Get your cast wet. You can get a plastic cover for the cast, which will keep it dry while you shower.

What if I have any concerns?

Ring the Plaster Room immediately for advice if:

- You notice the cast has caused a rub or made any part of your foot bleed.
- You feel unwell, tired, hot, or shivery with flu like symptoms, as this might mean that you are developing an infection.
- You have pain or discomfort in your foot or leg.
- Your cast becomes loose, tight, stained, wet, soft, cracked, or starts to smell badly.
- There is anything about your cast that is worrying you.

The clinic is open from 8.30am to 4.30pm Monday to Friday.

If the cast is troubling you at the weekend, please go to the Emergency Department, and contact the Plaster Room on the next working day.

What are the possible complications?

A possible serious complication when wearing a cast is a developing a deep vein thrombosis (DVT) or pulmonary embolism (PE). These are blood clots in the leg (DVT) or lung (PE).

For more information, please ask a member of staff for a copy of the Trust's **DVT** or **PE** leaflet, or download a copy from the Trust web site (<https://www.ekhft.nhs.uk/information-for-patients/patient-information/?i=leaflets>).

Symptoms of a DVT or PE include:

- increased or renewed pain in your leg
- pain in your calf rather than over the ulcer site
- shortness of breath
- a sharp pain in your chest, which is worse when you breathe in
- coughing up blood.

If you have any of the above symptoms, you must get urgent medical help. Either return to the Plaster Room, go to your nearest Emergency Department, or dial 999.

Plaster Room contact details

The Plaster Rooms are open from 8.30am to 4.30pm Monday to Friday.

- Kent and Canterbury Hospital, Canterbury
Telephone: 01227 864301
- Queen Elizabeth The Queen Mother Hospital, Margate
Telephone: 01843 234316
- William Harvey Hospital, Ashford
Telephone: 01233 616235

Produced with grateful acknowledgement to the Diabetic Podiatry Team at the Norfolk and Norwich University Hospital.

This leaflet has been produced with and for patients.

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 783145 (tel://+441227783145), or email ekh-tr.pals@nhs.net (ekh-tr.pals@nhs.net)

Patients should not bring large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property has been handed into Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals website (<https://www.ekhuft.nhs.uk/information-for-patients/patient-information/>).

Reference number: Web 621

First published:
February 2023

Last reviewed:
February 2023

Next review date:
June 2026

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