

Selvie Pather remembers people by their feet, not their face



Selvie Pather travelled to London from South Africa in 1974 to start her degree in psychology. Her intention was to work with disabled children after growing up with her brother who had a disability.

“I was asked to do some work experience by the principle at a local TAFE College. I realised quite quickly that it was one thing to care for my disabled brother, but another to spend a career with children who had such severe disabilities. Looking at all the children with Spina Bifida and Cerebral Palsy was so heartbreaking and I knew emotionally that I just wasn’t cut out for it,” Pather sighed.

Pather was then introduced to the School of Chiropody in Chelsea, London, and after applying, her enrolment application was accepted. “It came at the perfect time as I didn’t know what I was going to do with my future. I thoroughly enjoyed every moment of it,” Pather remarked.

Migrating to Australia from London in 1980, Pather starting working at Caulfield Hospital in Victoria as the Chief Podiatrist before going into private practice. “I was running my own department at the hospital and also doing some work for a private podiatrist in Caulfield South. He turned to me one day and told me he was selling his practice and asked if I wanted to buy it. I realised I had gone as far as I could professionally at the hospital, and decided to get a loan and buy the business,” expressed Pather.

Listening is one of the key skills you need in podiatry according to Pather as [in her case] it creates a sense of comfort when seeing new and existing patients. “When you listen, you have a better understanding of the issue before you act on solving the problem. I firmly believe the fact my patient’s feel relaxed and comfortable in my company, is why my they come back to see me regularly, and why I am always busy,” Pather maintained.

Reflecting back on all the cases she has treated throughout her career, Pather spoke about a patient who was recommended to her after being diagnosed with Multiple Sclerosis (MS). “The specialist had advised him that he had severe pains in his feet, radiating right up his leg, and that it was likely the result of neuropathic pain. He arrived at my clinic quite agitated, believing his symptoms were a result of the MS diagnosis and didn’t think it useful to be sitting in front of a podiatrist. As I inspected his feet, between his fourth and fifth toes on his right foot, I came across a very large corn caused by the Human Papilloma Virus. It was quite badly infected and I knew at that point his foot pain had nothing to do with the MS,” asserted Pather.

“It taught me a great lesson, and that was to check the simple things first before assuming the issues are far bigger and more complex,” she added.

Pather has been in the podiatry business for 45 years and recalls the best advice she was ever given was from her lecturer at University in London — to always remember a patient by their feet, not their face.