# Lawrence A. Lavery, DPM, MPH

From classification to consensus—
he is the architect of diabetic foot science in modern podiatry.

**BY LEE C. ROGERS, DPM**

It is a privilege to write this biographical piece outlining the enormous professional impact of a mentor, a colleague, and a friend, Lawrence A. Lavery, DPM, MPH, for his induction in the *PM* Podiatric Hall of Fame. Over several decades, Professor Lavery has helped define the modern understanding of the diabetic foot, not only through extraordinary scientific productivity, but through his leadership in education, consensus development, and institutional advancement. Few individuals in the history of podiatric medicine have influenced so many dimensions of our specialty so profoundly.

Dr. Lavery

Dr. Lavery's career reflects a rare combination of clinical insight, methodological rigor, and academic persistence. He earned his Doctor of Podiatric Medicine degree from the Dr. William M. Scholl College of Podiatric Medicine and he was the first resident to complete a 3-year podiatric surgery residency at the University of Texas Health Science Center at San Antonio (UTHSCSA). He later completed a Master of Public Health at UTHSCSA. That public health training proved foundational. It positioned him early to approach diabetic foot disease not merely as a clinical problem, but as a population-level challenge requiring measurement, classification, prevention strategies, and systems-based solutions.

## Defining a Field Through Scholarship

Professor Lavery's publication record is exceptional by any standard, inside or outside podiatry. He has authored more than 420 peer-reviewed publications with approximately 50,800 citations and an H-index of 112. To put this in perspective, an H-index above 40 is considered outstanding in academic medicine; an H-index exceeding 100 places an investigator among the most influential clinician-scientists in the world, regardless of specialty. Dr. Lavery's work has not simply accumulated citations—it has shaped how diabetic foot disease is studied, classified, and treated.

Recent bibliometric analyses independently confirm his standing in the field. He has been identified as the second-most-published author in the world on diabetic foot ulcers, the fourth-most-published author globally in diabetic foot research overall, and the second-most-impactful author in diabetic foot osteomyelitis research, based on citation influence rather than publication volume alone. These rankings are particularly notable because they reflect sustained relevance across decades, evolving methodologies, and shifting clinical priorities.

What distinguishes Dr. Lavery's scholarship is not only its volume, but its translational impact. His work spans ulcer classification systems, infection risk stratification, osteomyelitis diagnostics, Charcot neuroarthropathy, offloading strategies, and limb-salvage outcomes—topics that sit squarely at the intersection of podiatric medicine, vascular surgery, orthopedics, infectious disease, neurology, and endocrinology. Many of these publications are now considered foundational references in both clinical practice and research design.

## Leadership in Consensus and Guidelines

Beyond original research, Professor Lavery has played a critical role in shaping consensus statements and clinical guidance that influence care worldwide. He has been a contributor to major international efforts, including work aligned with the International Working Group on the Diabetic Foot (IWGDF), whose guidelines form the backbone of modern diabetic foot prevention, classification, and treatment strategies across multiple continents. He served as Chair of the

*Continued on page 62*

*Dr. Lavery (from page 61)*

Foot Care Council for the American Diabetes Association (now the Foot Interest Group) two decades ago and is the first person to return as chair twice, starting in 2025.

Earlier in his career, Dr. Lavery was instrumental in developing and validating diabetic wound classification systems that brought clarity and standardization to a field that once lacked common language. These classification frameworks enabled more meaningful clinical trials, improved communication across disciplines, and ultimately improved patient care. Their continued citation decades later is evidence of their durability and relevance.

Dr. Lavery's contributions have been repeatedly recognized through numerous awards and invited lectureships, including the Karel Bakker Diabetic Foot Award, the Roger Pecoraro Lecture, the Edward James Olmos Award for Advocacy in Amputation Prevention, and multiple national and international research honors.

**Dr. Lavery has served as a course director, fellowship director, residency faculty, and mentor across multiple institutions.**

**Advancing Institutions Through Productivity**

One of the less visible, but deeply important, aspects of Dr. Lavery's career has been the way his productivity elevates the institutions around him. His academic appointments at UTHSCSA, Scott & White Healthcare (Baylor Scott & White Health), Loyola University Medical Center, UT Southwestern Medical Center, and most recently returning to the University of Texas at San Antonio (formerly known as UTHSCSA), reflect a career spent building research-intensive environments wherever he worked, serving as vice chair of research in the Department of Plastic Surgery at UTSW and now at UTSA.

Importantly, bibliometric studies now list the University of Texas System, UT Southwestern Medical Center, Baylor Scott & White Health, and UT Health San Antonio among the most impactful institutions globally in diabetic foot research. This is not coincidence. It is the predictable result of sustained scholarship, collaborative mentorship, and a culture of inquiry that Dr. Lavery has consistently fostered.

**"Larry Lavery's impact on the profession of podiatric medicine has been profound."—Harkless**

**An Enduring Commitment to Education**

If scientific output defines one dimension of Dr. Lavery's legacy, education defines another. Over the course of his career, he has trained and mentored an extraordinary number of medical students, podiatric students, residents, fellows, post-doctoral researchers, and PhD candidates. His influence extends not only to those early in training, but also to established clinicians and academic peers who have sought his guidance.

Dr. Lavery has served as a course director, fellowship director, residency faculty, and mentor across multiple institutions. Many of his former trainees now hold leadership positions in limb-salvage programs, academic departments, and professional organizations. Through them, his impact continues to propagate across generations of practitioners and investigators.

**An Industry Catalyst**

Beyond its academic impact, Dr. Lavery's research has repeatedly served as a catalyst for innovation in wound care and diabetic foot management. His early work in the 1990s contributed to the clinical validation and adoption of negative pressure wound therapy, including pivotal research conducted in collaboration with KCI that helped establish the Wound VAC as a transformative technology in wound healing. In the early 2000s, his investigations into skin temperature asymmetry as a marker of inflammation and ulcer risk laid the scientific foundation for remote monitoring approaches, work that directly informed the development of temperature-monitoring technologies and led to the formation of at least three companies. The genesis of Dr. Lavery's career has enabled the creation of tools, products, and companies that extend evidence-based care beyond the research lab and into hospitals, clinics, and homes.

**A Hall of Fame Career**

The *PM* Podiatry Hall of Fame exists to recognize individuals whose careers have permanently shaped the profession. Lawrence A. Lavery exemplifies this standard. His work has advanced scientific understanding, informed global guidelines, elevated academic institutions, trained generations of clinicians and scientists, and—most importantly—improved outcomes for patients at risk of limb loss.

It would be impossible to write about Larry's productivity without acknowledging his wife, Karen, who has graciously tolerated, and even supported, a work ethic that most of us would find unsustainable. Her encouragement, patience, and good humor allowed Larry to pursue ideas long after most would have called it a day. Many of his achievements are, in no small way, a shared accomplishment.

If I could summarize Dr. Lavery's impact on podiatry, I would say that it is difficult to imagine the modern diabetic foot literature, or the evolution of amputation prevention within podiatric medicine, without his contributions. For these reasons, I believe Professor Lavery is not only deserving of inclusion in the *PM* Podiatric

*Continued on page 64*

*Dr. Lavery (from page 62)*

Hall of Fame, but represents the very ideals it was created to honor.

**Tributes**

***Lawrence B. Harkless, DPM,***
*UT Health San Antonio*

Larry Lavery's impact on the profession of podiatric medicine has been profound. After graduating from the UTHSCSA residency program in 1990, Lavery joined a private practice in Kokomo, Indiana. He would write me letters almost weekly about studies we should pursue. UT Weekly grand rounds provided the venue where we covered every clinical problem on the foot and ankle. Topic discussion would always create questions with no evidence in the literature for answers, hence research was needed. The mission of a health science center is education, research, and service.

The podiatry program's goals were purpose driven to earn the respect of all disciplines and be treated similarly. To accomplish this, research was imperative. I asked him to return to UTHSCSA to join the faculty and obtain the necessary training to lead research in the Podiatry Division in the Department of Orthopaedics. Upon his return, he became our inaugural 3rd year resident obtaining a master's in public health

(MPH) with mentoring in research. The University supported him in a summer program at Tufts University for 9 hours of basic course work epidemiological research. While at Tufts he met several Dutch medical students. Lavery created a pipeline of students from the Netherlands, providing manpower and brainpower in the development of UT podiatry research. As a result of Larry's initiatives, Edgar Peters and William Van Houtom are leaders today in Infectious Disease and Endocrinology in the Netherlands and worldwide.

Larry is known for his research in diabetic amputation prevention. His focus included the research of puncture wounds, offloading, risk factors, wound classification, foot infection, and osteomyelitis. His H-index is 112 and his work has been cited more than 50,000 times. It takes a team to be successful in life and academic medicine is no exception. Dr. Lavery informed and inspired me in all aspects of research study design and critical appraisal, allowing me to become my best in teaching research and service.

Congratulations, Dr. Lavery! Well-deserved!

sites in Texas, many years at UTSW in Dallas, and now is back as a professor in San Antonio.

In my view, he is probably the most talented original podiatrist researcher in the USA. He has had numerous grants, including several from the NIH and the ADA. It has been a pleasure to be a co-investigator with him on at least two, one of

**"His induction into the *PM* Hall of Fame isn't just an honor for him; it is a validation of the work he has championed for decades."—Armstrong**

***David G. Armstrong, DPM, MD, PhD,*** *USC Keck School of Medicine*

I first met Larry Lavery in 1995 at the UT Health Science Center at San Antonio. I was a young, perhaps overly-confident diabetic foot fellow who arrived thinking I was going to teach the "local yokels" a thing or two about surgery and research. It didn't take long for reality to set in. I quickly discovered that Larry—then a young Assistant Professor—had likely already forgotten more than I knew. It turns out that my initial assessment was wrong, but my respect for him was instantly right.

Larry didn't just teach me; he taught a generation. His relentless curiosity and scientific rigor helped transform what we do from a job into a true specialty. There are few people who have done more to define the diabetic foot as a discipline than Lawrence Lavery. His induction into the *PM* Hall of Fame isn't just an honor for him; it is a validation of the work he has championed for decades. Congratulations, my friend.

***Andrew J.M. Boulton, MD,***
*University of Manchester, UK*

It is been a pleasure to know Larry Lavery as a friend, colleague, and collaborator for almost 35 years. If I remember correctly, I first met him at one of Larry Harkless's diabetic foot meetings in San Antonio when he was a resident under the guidance of Dr. Harkless. Since then, I followed his career with great interest; and of course he has worked in 3 different

which was joint with the Diabetes UK. The latter was looking at diabetic patients with foot ulcers on hemodialysis, which resulted in a number of seminal papers, most of which were published in *Diabetes Care*. During his career, he has published >350 original papers, many of which are in high impact factor journals, particularly *Diabetes Care.*

One of his most important contributions came from an NIH grant together with our friend David Armstrong, which confirmed that home skin temperature monitoring can significantly reduce the incidence of recurrent diabetic neuropathic foot ulcers. Again this was published in *Diabetes Care* back in 2008. There is no doubt that he deserves this lifetime achievement award and induction into the *PM* Podiatric Hall of Fame.

***Jeff Tredwell, DPM***
*Founder, Diabetes Amputation Prevention Specialists (DAPS Health)*

The *PM* Lifetime Achievement award is a testament to his care, high regard for his patients, perseverance for excellence, and his passion for the advancement of podiatric medicine throughout his career. As XL Health's first medical director, Larry spearheaded the use of predictive technologies, thus transforming the paradigm of care from reactive to predictive in major populations for people who suffer the devastating consequences of diabetic lower extremity complications. From these outcomes,

*Continued on page 65*

*Dr. Lavery (from page 64)*

presented to the CDC National Meeting on Diabetes Translations, Larry authored the seminal paper on population management in diabetes lower extremity disease.

The impact that Larry has had on diabetic populations can never be overstated. The profession of podiatry will be defined by its focus on saving limbs and saving lives. Larry has been the point of the spear in taking podiatry to that level in the United States and globally. Larry has inspired a great many physicians, not just podiatrists, but many other specialists and professionals, in part through his writing and speaking, but mostly because of his integrity and the generosity which governs all his work. This is true in clinic, in the OR, in every published study, and in every lecture from podiums in this country and around the world. I can think of no more deserving person for this award. I am proud to be part of his journey.

***Terri Quebedeaux, DPM,*** *Seguin, TX*

I would like to express my sincere gratitude to Larry Lavery for the profound impact he has had on my career and for the confidence he instilled in me along the way. I came to the University of Texas Health Science Center at San Antonio first as a student, and later as a resident. During my first year of residency, I had the opportunity to work closely with Larry in clinic. We worked well together, and he asked if I would spend a year as his research assistant before completing a surgical year. That year proved to be transformative. Under his mentorship and guidance, I gained invaluable clinical experience and research skills. Larry taught me to approach problems with a critical eye and to think more deeply and thoughtfully about patient care. I truly believe that I would not have been as successful in my career without his positive influence and support.

Larry, your mentorship was a pivotal part of my professional growth, and I am deeply grateful for the time, effort, and trust you invested in me as both a research assistant and a resident. Beyond my own experience, your influence extends throughout the profession of podiatry, shaping the careers of countless students, residents, and colleagues through your leadership and research. The impact you have made on so many—myself included—is lasting and meaningful. I am truly grateful not only for your mentorship, but also for the privilege of calling you my friend.

***Arthur Tarricone, DPM,*** *UT Health San Antonio*

Dr. Lawrence Lavery's induction into the *PM* Podiatric Hall of Fame is a well-deserved recognition of a career that has fundamentally reshaped our understanding of the diabetic foot and limb salvage. His impact on the profession is nearly unparalleled, evidenced by his prolific body of work that includes over 600 published manuscripts and dozens of book chapters. Dr. Lavery has been a driving force behind the global standards of care, contributing significantly to the International Working Group on the Diabetic Foot (IWGDF) and IDSA guidelines. From pioneering the validation of wound classification systems to his groundbreaking research on dermal thermometry and negative pressure wound therapy, his work has provided the scientific bedrock upon which modern podiatric medicine is built. He has not only advanced the science but has also been a tireless advocate for the multidisciplinary limb salvage team model, which has saved countless lives and limbs worldwide.

On a personal level, having completed my fellowship under Dr. Lavery, I have seen firsthand the brilliance that earns him this honor. Larry's greatest gift to his trainees is his unique ability to bridge the gap between the laboratory and the clinic; he possesses a rare talent for translating complex research findings into daily, evidence-based practice. He taught me that every clinical decision should be rooted in data, yet delivered with the empathy required for the complex patients we serve. His mentorship has been the cornerstone of my career, instilling in me a rigorous commitment to clinical excellence and a passion for continuous learning. Larry is more than a researcher and a surgeon; he is a visionary who has elevated the entire profession, and I am deeply honored to celebrate his legacy today.

**"The impact that Larry has had on diabetic populations can never be overstated."—Tredwell**

***Edgar Peters, MD, PhD,***
*Amsterdam University Medical Center, the Netherlands*

Larry took me in his house when I came to do research with him in San Antonio, as a student, all the way from the Netherlands. I lived with his family for a while, and I was not the first, nor the last, who he has given a head start in this way. Eventually, my time with Dr. Lavery resulted in my PhD thesis. Again, I was not unique to obtain that title through Dr. Lavery as he has served as a research supervisor to many (Dutch) students. I am convinced he has given a substantial global boost to diabetic foot research. His energy and enthusiasm for diabetic foot research is contagious and has thus been disseminated to other continents. He is not just an outstanding clinician and thoughtful and brilliant researcher, but he also has a warm personality and a big heart. Congratulations Larry, on this lifetime achievement award! **PM**

**Dr. Rogers** is the Chief of Podiatry, the Louis T. Bogy Endowed Professor of Podiatric Medicine and Surgery, and an Associate Professor of Orthopaedics at the University of Texas at San Antonio. Dr. Rogers is the vice president of the International Federation of Podiatrists, an associate editor of the *Journal of the American Podiatric Medical Center,* and the past president of the American Board of Podiatric Medicine. Dr. Rogers was inducted into the Podiatric Hall of Fame in 2025.