

Hard skin and corns

Do not try to remove hard skin or corns yourself. Your podiatrist will provide treatment and advice where necessary.

Over-the-counter corn remedies

Do not use over-the-counter corn remedies. They are not recommended for anyone with diabetes as they can be highly dangerous and can lead to new wounds and infections.

Avoid high or low temperatures

If your feet are cold, wear socks. Never sit with your feet in front of the fire to warm them up. Always remove hot-water bottles or heating pads from your bed before getting in.

Appointments

It is important that you attend all of your podiatry appointments as well as all of your regular diabetes review appointments. This reduces the risk of problems developing.

Individual advice

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Your next screening/assessment is due:
Month:..... 20

Local contact numbers

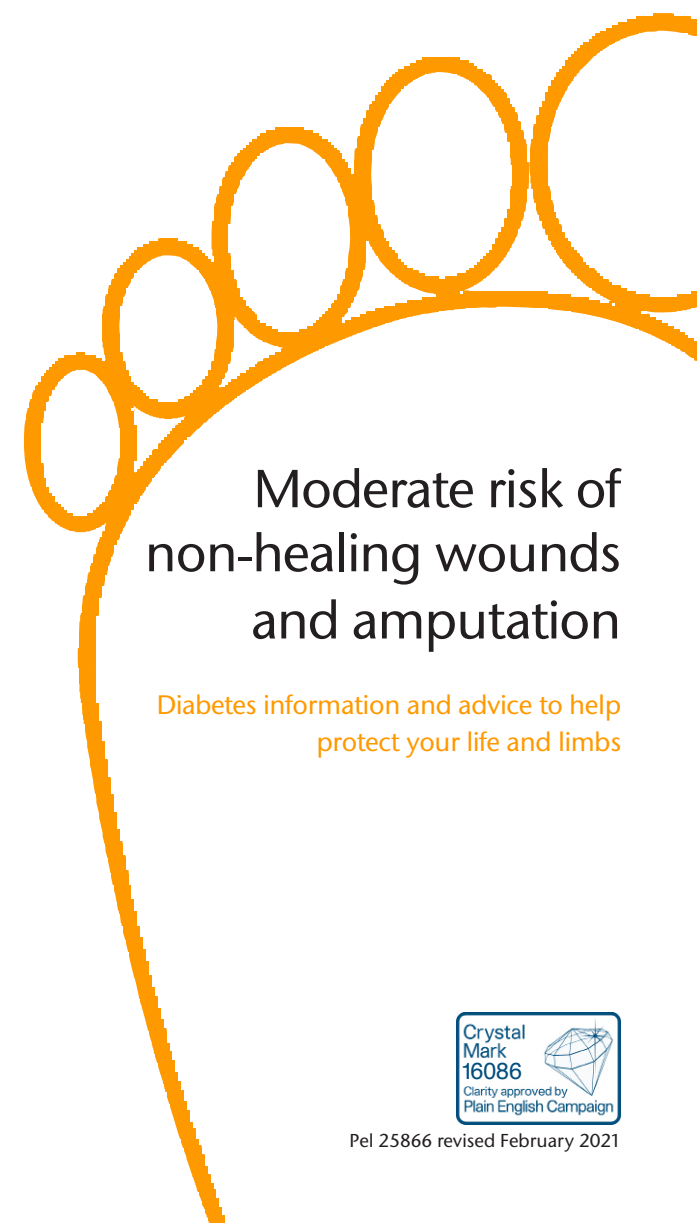
Podiatry Department or Foot Protection Team:
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GP clinic:
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This leaflet is for all people with a diagnosis of diabetes, including children over the age of 12.

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Moderate risk of non-healing wounds and amputation

Diabetes information and advice to help protect your life and limbs



Why is diabetes a risk to your feet?

Diabetes is a lifelong condition which can cause life and limb-threatening problems. Some of these problems can occur because the nerves and blood vessels, including those supplying your legs and feet, are damaged.

This can change:

- ❖ the feeling in your feet (peripheral neuropathy); and
- ❖ the circulation in your feet (ischaemia).

These changes can be very gradual and you may not notice them. This is why it is essential you have your feet checked (screened) every year by a suitably trained health-care worker.

Why is my foot score and what does it mean?

Your foot check has shown that you are currently at a **moderate risk** of developing wounds that may be slow to or may not heal and may lead to an amputation because of your diabetes due to one of the following.

- You have lost some feeling in your feet
- The circulation in your feet is reduced
- You cannot look after your feet or do not have help to do so
- You have severe kidney disease
- You have developed problems with the shape of your toe or foot

The development of foot wounds in people with diabetes is serious as they are linked to an increased risk of heart attacks, strokes, amputations of the foot or leg and early death. Controlling your diabetes, cholesterol and blood pressure, stopping smoking, increasing cardiovascular exercise and controlling your weight helps to reduce the risk of these life-and limb threatening problems.

Note: You may be at further risk of cardiovascular problems if you have a family history of heart disease.

As your feet are now at **moderate risk** of developing wounds which may be slow to or will not heal and could lead to an amputation, you will need an assessment by a podiatrist (which may be a one off appointment) with the implementation of a treatment/management plan agreed with yourself if required.

If you follow the advice and information in this leaflet, it will help you to take care of your feet between visits to your podiatrist. This will help you to reduce the risk of developing life-and limb-threatening problems.

What should I do if I have a concern or problem?

If you develop any of the following problems, it is important that you contact your Multi-disciplinary Foot Care Team, local Podiatry Department or GP for advice as soon as possible (within 24 hours).

- ❖ A red, hot, swollen toe or foot
- ❖ A new break or wound in the skin
- ❖ New redness or discolouration of your toe or foot
- ❖ New or unexplained pain in your foot

If they are not available, go to your nearest accident and emergency department. Remember, any delay in getting advice or treatment when you have a problem can lead to serious problems.

What can I do to reduce my risk of developing problems? Check your feet every day

You should check your feet every day for any blisters, breaks in the skin, pain or any signs of infection such as swelling, heat or redness.

If you discover any breaks in the skin or blisters, cover them with a sterile dressing. Do not burst blisters.

If you cannot do this yourself, ask your partner or carer to help you.

If your skin is dry and cracks, use 25% urea cream once a day until this improves.

Depending on your need, you may be assessed for prescription footwear, insoles or both.

Skin care for your feet

You should wash your feet every day in warm water and with a mild soap. Rinse them thoroughly and dry them carefully, especially between the toes. Do not soak your feet as this can damage your skin. Because of your diabetes, you may not be able to feel hot and cold very well. You should test the temperature of the water with your elbow, or ask someone else to test the temperature for you.

If your skin is dry, apply a moisturising cream, avoiding the areas between your toes.

Toenail care

Cut or file your toenails regularly, following the curve of the end of your toe. Use a nail file to make sure that there are no sharp edges which could press into the next toe. Do not cut down the sides of your nails as you may create a 'spike' of nail which could result in an ingrown toenail.

Socks, stocking and tights

Change your socks, stockings or tights regularly. They should not have bulky seams and the tops should not be elasticated.

Avoid walking barefoot

If you walk barefoot you risk injuring your feet by stubbing your toes and standing on sharp objects which can damage the skin.

Check your shoes

Check the bottom of your shoes before putting them on to make sure that nothing sharp such as a pin, nail or glass has pierced the outer sole. Also, run your hand inside each shoe to check that no small objects such as small stones have fallen in.