

HIGH RISK DIABETES FOOT CARE



FOOT SMART FOCUS PATIENT INFORMATION SHEET

Diabetes is a lifelong condition which can cause foot problems. Some of these problems can occur because the nerves and blood vessels supplying your feet are damaged.

ADVICE ON KEEPING YOUR FEET HEALTHY

Check your feet every day

- check for any blisters, breaks in the skin, pain or any signs of infection such as swelling, heat or redness

Wash your feet every day

- wash with warm water and mild soap
- rinse and dry carefully especially between the toes

Moisturise your feet every day

- if your skin is dry, apply a moisturising cream every day, avoiding the areas between your toes

Toenails

- do not cut your toenails unless your podiatrist advises you to
- file your nails regularly following the curve of the end of your toe, make sure no sharp edge presses on the next toe

Hard skin and corns

- do not attempt 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 (can damage the skin and create foot ulcers)

A history of ulcers

- if you have had an ulcer before, or an amputation, you are at high risk of developing more ulcers

Socks, stockings and tights

- change your socks, stockings or tights every day

Avoid walking barefoot

- walking barefoot increases the risk injuring your feet by stubbing your toes and standing on sharp objects which can damage the skin

Check your shoes

- run your hand inside each shoe to check that no sharp or small objects such as small stones have fallen in

Prescription shoes

- follow the instructions of your podiatrist
- these should be the only shoes you wear which are normally be prescribed with insoles

Minor cuts and blisters

- if you discover any breaks in the skin, minor cuts or blisters, cover the area with a sterile dressing
- do not burst blisters. (If after one day there is no sign of healing, contact your podiatrist or GP immediately)

Avoid high or low temperatures

- wear socks if feet are cold
- never sit with your feet in front of the fire to warm them up

If you look after your feet carefully, with the help of a podiatrist, you will reduce the risk of more problems.

More questions? call us or check out our website.

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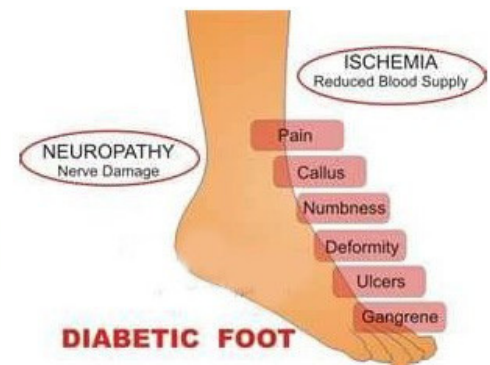
FOR THE DOCTOR CLINICAL PRACTICE GUIDELINE

Diabetes can affect:

- the feeling in the feet
(**peripheral neuropathy**)
- the circulation in the feet
(**ischaemia**)

These changes can be very gradual and may not be noticed. This is why it is **essential** that every year, the feet need to be screened and assessed by a podiatrist. A treatment plan will then be agreed to suit the needs.

DIABETIC FOOT



The screening and assessment have shown that there is a high risk of developing foot ulcers. Podiatrists will tick which of the following risk factors are present:

- **have lost some feeling in the feet**
- **circulation in the feet is reduced**
- **hard skin/skin changes on the feet**
- **the shape of the foot has changed**
- **vision is impaired**
- **cannot look after the feet without any help**
- **had an ulcer or amputation before**
- **Renal dialysis**
- **Other.....**

Keeping good control of diabetes, cholesterol and blood pressure will help to control these problems.

As the feet are at a **high risk**, extra care is required. Regular assessment and treatment by a podiatrist are needed. The information in this sheet will help in taking care of the feet between visits to the podiatrist. Hopefully, it will help to reduce the problems in the future.

We have comprehensive Clinical Practice Guidelines on our website for this condition, including videos, more details, and literature references.

SPOTTING A FOOT ATTACK

- > Is the foot red, warm or swollen?
- > Is there a break in the skin or any discharge (or oozing) on to the socks or stockings?
- > Feeling unwell?
- **May not have pain even with a visible wound.**

CONTACT US IMMEDIATELY!