

LOW 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 skin is dry, apply a moisturising cream every day, avoiding the areas between the toes

Toenails

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

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 a few days there is no sign of healing, or see signs of infection- swelling, heat, redness or pain- contact your podiatrist or GP immediately)

Socks, stockings and tights

- change socks, stockings or tights every day

Avoid walking barefoot

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

Check your shoes

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

Badly-fitting shoes

- a common cause of irritation or damage to feet
- podiatrists may give you advice about the shoes you are wearing and about buying new shoes

Over-the-counter corn remedies

- do not use over-the-counter corn remedies (can damage the skin and create foot ulcers)

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**)

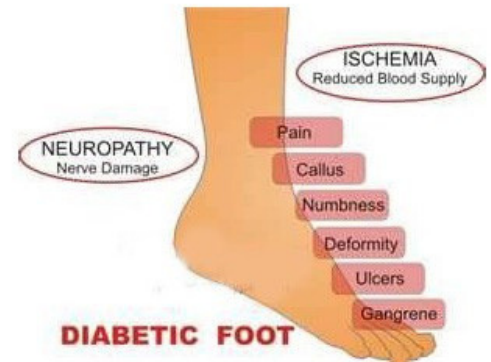
These changes can be very gradual and may not be noticed. This is why it is **essential** that every year, the feet needs to be screened and assessed by a podiatrist.

Your foot screening has shown that you do not have nerve or blood vessel damage at present and so currently, at low risk of developing foot complications because of your diabetes.

Controlling diabetes, cholesterol and blood pressure, and having the feet screened every year by a suitably trained professional, will help to reduce the risk of developing problems with the feet.

As the feet are in **good condition**, regular podiatry treatment is not required. The simple information on this sheet should be able to help in carrying out own foot care unless developing a specific problem.

DIABETIC FOOT



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!

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