# Foot care FAQs

Prepared by Dr Angela Evans, Podiatrist in private practice, Adelaide, and Lecturer, University of South Australia, Adelaide, and Dr Pat J. Phillips, Senior Director, Endocrinology, North Western Adelaide Health Service, The Queen Elizabeth Hospital, Woodville, SA. This handout is also available on the website of The Diabetes Centre, The Queen Elizabeth Hospital and Health Service: www.diabetes.org.au

# Am I at risk of developing foot problems?

You might be at risk of developing foot problems, such as ulcers, because of your diabetes. Consider the following questions.

 Do you have nerve damage? Are your feet numb, or do they feel like they are burning (particularly at night)? If they do, you may have nerve damage.

#### Is your blood circulation poor?

When you walk, do you get a cramping pain in your calves or other muscles that goes away when you stop walking but comes back as soon as you start walking again? Is this pain worse when walking up hills, against the wind or on cold days? Have you had a heart attack or a stroke? If blood vessels in your heart or brain have been affected by having a heart attack or a stroke, the vessels in your legs may also be affected.

Are your feet showing signs of having too much pressure on them? Do you have spots of thick skin (callus or corn) or thick nails? Thickening of skin or nails occurs as your body's response to excess pressure, and occurs particularly if you have nerve damage in your feet.

• Have you had a foot ulcer before?

If you have had a foot ulcer before, you will certainly not want to have another one but you are at an increased risk of further ulcers or foot problems.

If you answered yes to any of the above questions, you may be at risk of foot problems. Seek advice from your doctor, diabetes nurse or podiatrist.

#### What shoes and socks should I wear?

You should wear shoes and socks that protect your feet and make walking a pleasure, not a pain. If you are at risk of developing foot ulcers, you may need custom-made footwear and orthotics.

#### . Do your shoes fit your feet?

Check whether your shoes fit your feet properly. Do your feet have to fit your shoes, with your feet getting pressured and your shoes getting worn at particular spots? Check your feet and your shoes for excess wear and tear. When you buy new shoes, try them on while wearing the socks that you will usually wear with them. Also try on shoes after you have been on your feet for some time. Check that you can wiggle your toes freely and make sure that between your longest toe and the end of the shoe there is space equal to the width of your finger. The Figure above shows the features that you should look for when choosing a sports shoe.

# Do your shoes protect you?

Shoes should hold on to your foot and the ground you walk on. Do your feet slip around in your shoes, or your shoes slip on the surfaces you walk on? You may need

This handout outlines simple foot care routines for people who have diabetes.\* Consider the following frequently asked questions, and work out what applies to you.

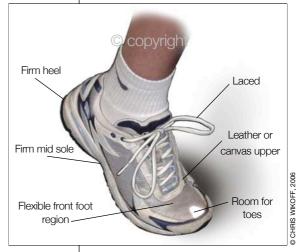


Figure. Features to look for when choosing a sports shoe.



**COPY FOR YOUR PATIENTS** 

Doctors may photocopy these pages for distribution to patients. Written permission is necessary for all other uses.

© MedicineToday 2006

<sup>\*</sup> The text in this handout is based on an article by Dr Evans and Dr Phillips published in Diabetes Conquest, March 2005, and has been adapted with permission.

shoes with extra grip on your feet for walking on uneven ground, extra cushioning for walking on pebbly ground, or special soles for walking on slippery surfaces.

# Do your shoes protect your feet?

Footwear is supposed to protect your feet, not damage them. Do your shoes cover your feet? Are they strong enough to absorb the occasional knock? Have they got any rough areas on the insides of them? Do your socks have seams that rub on your feet?

# · Are your feet dry?

Your shoes and socks should 'breathe'. Your feet, socks and skin should not get soggy while wearing shoes. It is best to wear wool or cotton socks, which soak up the moisture, and shoes with leather uppers, which let the moisture out.

#### Who will look after my feet?

Remember you only have the one pair to last you your lifetime, so it is important to look after your feet. If you think you are unable to care for your feet, ask your doctor, diabetes nurse or podiatrist for advice on who can help. If you are at risk of developing foot complications, you should have your feet checked regularly by your doctor, diabetes nurse or podiatrist.

# • Can you reach, see and feel your feet yourself?

If you can't reach, see and feel your feet, you may need some help to care for them. Your partner or family may be willing and able to help. If not, seek professional help. Don't muddle along on your own – it is too easy to damage your feet.

#### • Are your skin or nails dry?

If your skin or nails are dry, they may need extra care. Use a moisturiser (such as sorbolene with 10% glycerol) after your shower and before bed if necessary.

#### Are your nails in shape?

Trim your nails using clean clippers and follow the natural curve of your toe. Don't cut your nails too short. Never cut down the edges of the nail. File any sharp edges with a nail file or emery board.

# Is there any 'rubbish' between your toes?

Sogginess, dead skin, debris and tinea (a fungal infection) between your toes can lead to serious infections that can spread into your foot. Keep this area clean and dry. If necessary, use a little methylated spirits to dry the area.

#### • Have you got an action plan for when things go wrong?

This is particularly important if you are at high risk of developing foot problems. Make yourself a foot care kit containing the items listed in the Table above. If you do damage or break the skin, gently wash and dry the foot, apply an antiseptic (such as povidone—iodine [Betadine]) and a nonstick dressing, and secure this in place with a nonplastic tape. Check the area and reapply a new dressing daily. If any redness or swelling occurs, or if things aren't improving in a day or so, make sure you visit your doctor.

#### Remember the four 'bottom lines'

- Check your risk of developing a foot ulcer.
- Make sure your footwear protects your feet.
- Set up a schedule to care for your feet.
- Seek advice as soon as possible from your doctor, diabetes nurse or podiatrist if swelling, redness or a skin ulcer develops on your feet.

  MT

# Table. What to put in your foot care kit

- Povidone-iodine solution or ointment (e.g. Betadine)
- Moisturising cream (e.g. sorbolene with 10% glycerol)
- Dry dressing (e.g. Handypor)
- Sterile gauze squares
- Cotton buds
- Nail clippers
- · Nail file or emery board

Note: Seek advice as soon as possible from your doctor, diabetes nurse or podiatrist if swelling, redness or a skin ulcer develops on your feet.



**COPY FOR YOUR PATIENTS** 

Doctors may photocopy these pages for distribution to patients. Written permission is necessary for all other uses.

© MedicineToday 2006

This MedicineToday patient handout is provided only for general information purposes. The information may not apply to everyone, and the handout is not a substitute for professional medical care and advice. Please discuss the information with your doctor to find out what applies to you and for specific advice on the subject.