High Risk Diabetic Foot

People with diabetes are more at risk of developing foot problems because of damage to the nerves which leads to reduced or no feeling in the feet. This is known as neuropathy. Diabetes also causes damage to the blood vessels which leads to poor circulation. This is known as peripheral arterial disease. You may not notice these changes yourself, so it is vital that you have your feet checked by a podiatrist.

In accordance with National Institute for Clinical Excellence (NICE) guidelines, your foot assessment today has shown that you are at high risk of developing foot complications such as ulcers because:

(tick those that apply)

- You have neuropathy
- You have poor circulation
- You have eyesight problems
- Your feet have corns or calluses
- Your shoes are damaging your feet
- Because your foot shape has changed
- You have a history of ulcers
- You have had an amputation

Because your feet have been classified high risk you will need treatment by a podiatrist on a 1 to 3 monthly basis. The frequency of your visits will depend on your foot problems.

The following advice will help you to look after your feet in between your podiatry appointments.

How to keep your feet healthy

Aim for good control of your blood sugar, cholesterol and blood pressure.

Give up smoking.

Eat a balanced diet.

Take regular exercise.

Attend your diabetic appointments.

Inspect your feet daily, especially between your toes. Use a mirror to look at the soles of your feet or have someone do this for you.

If you notice any signs of infection (swelling, redness, heat, weeping wound) contact a health professional immediately.

Any minor cuts or blisters should be covered until healed. A dry dressing and tape can be used. If these are slow to heal, seek advice.

It is essential that you do not walk barefoot. You risk damaging your feet by stubbing your toes or standing on something sharp.

Looking after your feet

To keep your skin in good condition, wash your feet daily with soap and warm water and dry them carefully with a soft towel, paying particular attention to between the toes. Do not soak your feet as this will dry out natural oils in the skin.

If you have neuropathy, check the temperature of the water with your elbow to make sure it is not too hot. Your feet cannot ‘feel’ temperature normally and you could scald your feet without realising.

Dry skin can be treated with a moisturising cream such as E45 (available at the chemist, supermarket or on prescription.) Avoid using it between the toes as this can make the skin soggy and prone to infection.
If your skin is white or soggy between the toes, use surgical spirit applied with a cotton bud and allow to dry before putting on your socks or hosiery. Do not use surgical spirit if it ‘stings’. Avoid using talcum powder.

Wear socks if your feet feel cold, never toast your toes in front of a fire and always remove hot water bottles before getting in to bed.

Never use corn plasters. They contain an acid and can harm your feet.

To treat small amounts of hard skin, a pumice stone or foot file can be used.

**Looking after your toenails**

Do not cut your toenails unless you are advised to do so.
If filing, file once or twice a week and follow the contours of the toe. Wipe any debris from between the toes with a clean tissue or towel.

**Footwear advice**

Correctly fitting shoes can prevent injuries. Have your feet measured when buying new shoes, so that they are the correct length, width and depth. If your feet tend to swell, try new shoes on later in the day, to ensure they fit properly.

**You may need prescription shoes.**

Check your shoes inside and out before you put them on to make sure there are no sharp pins or nails piercing through the outer sole or inside the shoe. They can damage your feet.

Always wear correctly fitting socks or hosiery with shoes but avoid bulky seams and tight fitting elasticated tops.

Please contact the Podiatry Appointment Office: 01803 217712
If you:
--have any foot problems
--require further information
--require this leaflet in a different format.