

# Simple Steps to healthy feet for people with diabetes

## **Find out what having diabetes means for your foot health**

- ◆ How to reduce the risk of developing foot problems
- ◆ Establish a simple daily foot care routine
- ◆ The dos and don'ts of diabetic foot care

# Diabetes, your feet and the simple steps to reduce the risk of developing foot problems

People with diabetes have an increased risk of developing foot problems. You should therefore be looking after your feet on a **daily** basis.

Minor foot problems, such as dry skin and callus could lead to foot ulcers and infections which, if left untreated, can lead to amputation. Currently, 23 lower limb amputations are performed on people with diabetes every day in England alone<sup>1</sup>.



Four out of five diabetes-related lower limb amputations are preventable<sup>2</sup> with actions including checking your feet **every day**, having a suitable daily foot care routine, and regularly visiting your healthcare professional.

This leaflet will provide you with advice on the above to ensure you are maintaining good foot health.

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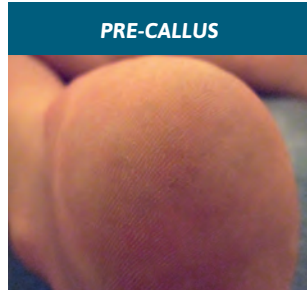
<sup>1</sup> Diabetes UK, Record levels of diabetes-related amputations, September 2017, [https://www.diabetes.org.uk/about\\_us/news/record-levels-of-diabetes-related-amputations](https://www.diabetes.org.uk/about_us/news/record-levels-of-diabetes-related-amputations). Last accessed: October 2018

<sup>2</sup> Diabetes UK, Putting feet first, [https://www.diabetes.org.uk/get\\_involved/campaigning/putting-feet-first](https://www.diabetes.org.uk/get_involved/campaigning/putting-feet-first). Last accessed: October 2018

# Examples of how a simple daily foot care routine can help you

by Donna Welch, Advanced Podiatrist, Diabetes.

## SKIN CONDITION



PRE-CALLUS

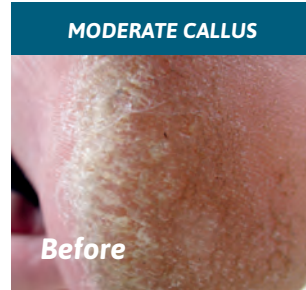
Pre-callus.



PRE-CALLUS WITH DRY SKIN

Before

Pre-callus with dry skin.



MODERATE CALLUS

Before

Skin dry with callus and superficial cracks forming. Potential risk of cracks/ulceration.



SEVERE CALLUS

Before

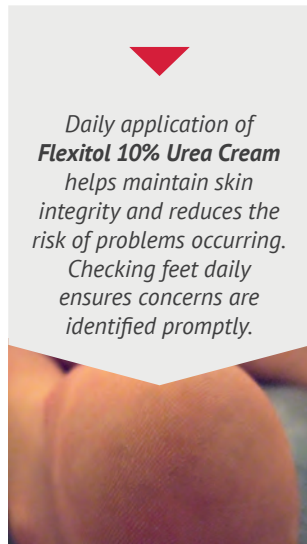
Deep cracks present, catching on socks, at risk of trauma and possible ulceration.



ULCERATION

Ulceration present.

## RECOMMENDATIONS

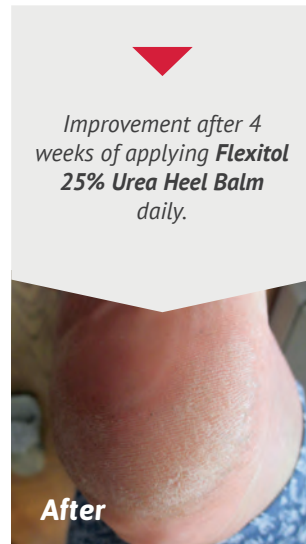


Daily application of **Flexitol 10% Urea Cream** helps maintain skin integrity and reduces the risk of problems occurring. Checking feet daily ensures concerns are identified promptly.



After

Improvement after 2 weeks applying **Flexitol 10% Urea Cream** daily.



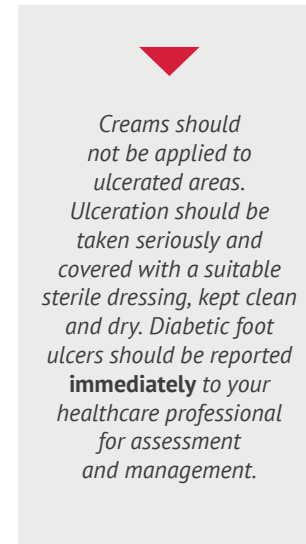
After

Improvement after 4 weeks of applying **Flexitol 25% Urea Heel Balm** daily.



After

Skin integrity achieved after 4 weeks of applying **Flexitol 25% Urea Heel Balm** daily (56 applications).



Creams should not be applied to ulcerated areas. Ulceration should be taken seriously and covered with a suitable sterile dressing, kept clean and dry. Diabetic foot ulcers should be reported **immediately** to your healthcare professional for assessment and management.



## Do you know your risk status?

If your current foot risk status is "low" you should attend a diabetic foot screening annually with your doctor, nurse or podiatrist.

If your current foot risk status is "moderate" you should see a doctor, nurse or podiatrist every 3-6 months.

If you have been identified as being at high risk of diabetic foot disease or you have seen changes in your foot health, you should visit your healthcare professional regularly (every 2-8 weeks).

If your foot becomes red, hot, swollen or unusually painful, you may have an infection. Make an appointment immediately with the specialist team.



# The dos and don'ts of diabetic foot care

## ✓ DOs

- ✓ Check feet daily, with a mirror if necessary, and report any concerns immediately to a health professional
- ✓ Wash and dry feet daily, paying particular attention to between the toes
- ✓ Test water temperature prior to bathing
- ✓ Use a moisturiser daily; avoid between the toes. For areas of dry, hard and cracked skin or callus, ask your nurse or doctor about using a urea-based emollient, such as Flexitol
- ✓ Check shoes before putting them on to ensure there are no foreign objects in them (eg, stones)
- ✓ Wear shoes that fasten securely and are deep and broad enough for your feet
- ✓ Call your doctor or nurse immediately if you find a cut or sore that doesn't begin to heal

## ✗ DON'Ts

- ✗ Don't walk bare foot even when on holiday or in the house
- ✗ Don't use acid preparations such as corn cures and hard skin removers
- ✗ Don't try to remove hard or loose skin yourself
- ✗ Don't use heat pads or hot water bottles
- ✗ Don't soak your feet for too long – it will dry them out
- ✗ Don't cut toe nails too short or down the sides. Instead follow the shape of the toe
- ✗ Don't delay seeking advice on cuts or sores on your feet

## Where to find out more

For more information on the simple steps you should be taking to reduce the risk of developing foot problems, please visit [www.flexitol.co.uk/simplesteps](http://www.flexitol.co.uk/simplesteps)

Please visit [www.diabetes.co.uk](http://www.diabetes.co.uk) for more help and information on living with diabetes.