



## Diabetes

## Foot problems

- <u>Reduced blood flow (peripheral arterial disease)</u>
  - o Due to narrowing and hardening of the blood vessels within the lower legs and feet
  - o Leads to reduced healing capacity and resistance to infection
- <u>Reduced or complete loss of sensation (peripheral neuropathy)</u>
  - o Due to damage to the nerves within the feet
  - o Often painless
  - o Leads to trauma to the feet going undetected
  - Toenail and skin changes
    - o Fungal toenails
    - o Tinea/athlete's foot
    - o Dry skin
    - o Calluses
    - o Corns
- <u>Ulcers</u>
- <u>Amputation</u>

## **Preventative measures**

- Consult your podiatrist at least every 12 months for a diabetes foot assessment and more regularly for general toenail and skin care if you have difficulty attending to your feet.
- Consult your podiatrist and/or GP ASAP if you develop any of the abovementioned foot problems.
- Thoroughly inspect your feet daily to ensure that there hasn't been any undetected trauma to your toenails and skin (e.g. bruised toenail, blister).
- Thoroughly inspect your shoes daily to ensure that there aren't any potential causes of trauma (e.g. stone, exposed plastic).
- Thoroughly wash and dry your feet daily, particularly between your toes.
- Apply moisturising cream to the areas of your feet that are prone to becoming excessively dry (e.g. heels). Never apply moisturising cream between your toes.
- Ensure that all of your shoes accommodate the length, width and depth of your feet.
- Ensure that your socks and/or stockings aren't too tight.
- Ensure that your feet aren't exposed to direct heat (e.g. heater, water bottle).