

Your Health Matters

TAKING CARE OF YOUR FEET

A Guide for Patients with Diabetes



*Diabetes High Risk
Foot Program*

UCSF Medical Center

Introduction

The physicians at the Diabetes High Risk Foot Program of the Diabetes Clinic will perform a variety of tests on your feet in order to determine your risk of developing a foot ulcer or amputation. These tests are not painful and will provide both you and your doctor important information about the feeling or sensation, circulation (blood flow) and pressure distribution on your feet.

Many diabetics develop the loss of sensation or feeling in their feet. Patients are often unaware of this gradual loss of sensation. It is important that the level of the loss of sensation be identified. The doctors at the clinic will measure your sensation in order to determine your risk and provide recommendations and methods of care to you.

A second major factor in prevention is to determine the amount of circulation (blood flow) to your feet. If there is inadequate circulation, the ability to heal even minor irritations on your feet becomes impaired. The normal nutrition and oxygen carried to your feet by red blood cells can be disrupted by disease of the arteries carrying the blood. We will measure the blood flow to your feet in order to determine if the vessels have been diseased because of your diabetes.

A third factor in causing foot ulcerations or other foot disease is the way you walk. Often a foot that is not structurally stable can develop corns, calluses, bunions, or even hammertoes. In the Diabetes High Risk Foot Program we can measure the pressure on the bottom of your feet with a special instrument while you walk to determine if any excessive or abnormal forces exist which might contribute to your developing a foot problem. By identifying these forces, we are able to make recommendations to you and your doctor that could help prevent complications from developing.

This information pamphlet reviews a variety of subjects relative to your foot care. We suggest you review this information and keep it easily available at home as a reference. If you have additional questions please note them to discuss with your clinic doctors.

Helpful Suggestions on Shoes

Very often patients ask about the proper shoes to wear if they have diabetes. In selection of the proper shoe there are several general rules which apply:

- Shoes should be comfortable at the time of purchase. Do not depend on them to stretch out. Avoid high heels or pointed toes.
- Make certain your foot is measured and the shoes fitted each time you purchase a new pair of shoes. You may not be able to feel that the shoe is too tight with neuropathy.
- The shoe should be wide enough to allow the toes to wiggle and spread out while avoiding pressure on the toes.
- The heel area of the shoe, sometimes referred to as the counter, should fit snug to prevent rubbing or "walking out of your shoe."
- As a general rule, the shoe should be made of good quality leather or other material that allows the feet to breathe. (Avoid plastic, vinyl, etc.)
- The insole should be smooth, soft and spongy. You can buy insoles that protect the bottom of the feet. (Spenco insoles are the ideal variety.)
- The sole should be flexible but thick enough to protect and cushion the feet during walking.

- Never wear shoes without stockings.
- It is a good idea to wear new shoes only a few hours a day until the materials soften a bit. It is important to have at least two pairs of shoes which you alternate wearing, allowing the perspiration to dry out completely between wearings.
- Always shake out shoes before you put them on in order to make certain there is nothing inside.
- Do not walk barefoot.

How should I care for my feet?

You should follow these instructions carefully!

- Wash your feet each night with soap and warm water, drying each foot completely. Do not use hot water. Make certain you dry between the toes.
- Never test your bath water with your foot. If your feet are insensitive to heat, you might not realize the true temperature of the water, and burn your body. Always test your bath water with your hand or elbow, or have a friend or family member check it for you.
- Massage hand cream over dry skin or calloused areas but not between your toes. (You may use Eucerin, Nivea or Urea in HEB.)
- Use a clean, dry pair of socks at all times. Woolen or cotton socks are best.

- Cut toenails straight across if possible. Don't use sharp instruments to poke or dig around corners. If you are uncertain about how to cut you nails properly, come to the Diabetes Clinic at UCSF where we will instruct you on the proper method and the correct tool. Some patients should not attempt to cut their nails themselves. If you cannot see clearly or are unable to reach your nails, a Podiatrist may assist you or will instruct a friend or family member in how to do this properly.



- Don't trim or cut corns or callouses. Come to the Diabetes Clinic for these conditions to be evaluated by our podiatrist.
- Inspect your feet each day, using a mirror if necessary, and report any problems to your doctor. If you cannot see well, have a friend or family member help to check your feet.

What to look for:

- ◆ Dry or flaky skin
- ◆ Cracks between your toes
- ◆ Bloody or blackened corns or callouses
- ◆ Recent color change of skin
- ◆ Loose toenails
- ◆ Redness

How can I protect my feet?

Follow these guidelines:

- ❑ Avoid using heating pads or hot water bottles as you might burn yourself and not feel it happening. It is also not necessary to routinely soak your feet unless instructed to do so by your doctor.
- ❑ Inspect the inside of your shoes with your hands for nails or rough spots, especially before putting your shoes on. Inspect your socks and shoes for wet spots after wearing your shoes, which can indicate an open injury.
- ❑ Never use commercial corn medicines or corn plasters. Likewise you should not use strong chemicals or over-the-counter cortisone creams or medicine your doctor has prescribed for another part of your body. Many pads sold in stores have medicines or chemicals on them. Read the label carefully to make sure that any pad you use on your feet is not medicated.

Questions & Answers

- ***I have heard that diabetics sometimes have to have a foot or leg amputated. Does this ever really happen?***

Yes; if not properly treated, simple cuts and sores can lead to serious foot ulcers, gangrene or infection, which can ultimately lead to amputation.

- ***If my foot starts feeling numb, what does that mean?***

Some patients complain of numbness or tingling in their toes and feet. This may be what we call diabetic neuropathy (changes in the nerve resulting from diabetes). Neuropathy of the feet can result in numbness or a lack of feeling of the entire foot.

- ***Does having diabetes mean that I will also have poor blood circulation?***

Many, but not all patients with diabetes have diseased blood vessels. If there is an insufficient blood supply to the leg, you might develop pain in your calf when you walk. Poor circulation also causes slow healing of all types of sores, thus putting you at greater risk of infection.

- ***I've heard that smoking is harmful for patients with diabetes. Is this true?***

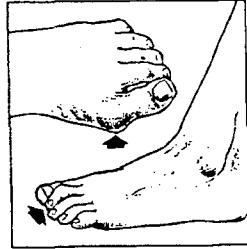
Tobacco in any form causes a narrowing of the small blood vessels, preventing blood from reaching your foot. Any reduction in the blood flow to your feet can cause you to develop sores or ulcers that do not heal.

- ***What could happen to me if I do not inspect my feet daily?***

As a diabetic your skin can become infected easily or you can develop a foot ulcer. The nerves to your feet can become diseased to the point that you may not be able to feel or sense an area of irritation. Without knowing that there is a problem (because of the lack of feeling) the infection can become worse and you may have to be hospitalized.

Shoes to Match Your Feet

If you have **normal feeling in your feet without any foot deformities** (bunions, hammertoes, etc.), a normal, well-fitting shoe is adequate. Try to avoid wearing loafers, as they are usually not very stable. A laced oxford or a running shoe would be ideal for every day use.



If you have **normal feeling, but have a hammertoe or bunion deformity**, you may require a special type shoe. Shoes which allow for extra depth and allow for the insertion of an orthotic device (custom-made shoe insert) are commercially available. Our staff can help locate an outlet near your residence.

If your **feet are numb**, use extreme care in selecting your shoes. Make certain they are always in good repair and well-fitting. A well-fit Oxford shoe made of good leather with a rounded toe and cushioned sole would be ideal. Many commercially available shoes are ideal for you. If you have any question about their fit and style, bring them in on your scheduled appointments to allow our staff to evaluate them before wearing them.

Finally, if you have **lost the feeling in your feet** and have **had a history of foot ulcers**, amputations or foot deformity, specific custom-made shoes may be best for you. The podiatric physicians in our clinic will advise you on your need for custom-molded or orthopedic shoes. Every attempt will be made to place you in the appropriate custom shoe program and advise you concerning availability and costs of these shoes.

When should I contact my physician?

You should contact your doctor or the clinic immediately if you develop either a nail infection, a cut, sore or a severe increase in pain in your feet or calves. Many times patients believe their foot problems can be managed by themselves and do not call their doctor. This is a mistake and could cost you the loss of a leg or even your life!

- **What do I do if I have a problem?**

If you develop a foot problem it is important that you be seen as soon as possible. You should contact the doctor who normally follows you in either the Diabetes, Vascular, Orthopedic or Medicine Practices. If you cannot reach the appropriate doctor, don't wait! Come to the Emergency Department at the hospital (open 24 hours, 7 days-a-week), and you will be evaluated by one of the staff doctors. If you need some guidance and direction that cannot be given by the physicians in the Emergency Department, call the Diabetes Practice (476-1104) and our staff will attempt to resolve your problem.