

Diabetes and your feet

Diabetes can cause nerve damage (known as diabetes peripheral neuropathy) and poor blood flow or circulation to the legs and feet (known as peripheral arterial disease).

As a result, people with diabetes are less likely to feel a foot injury, such as a blister or cut. Diabetes can make these injuries more difficult to heal. Unnoticed and untreated, even small foot injuries can quickly become infected, potentially leading to serious complications.

A good daily footcare routine can help keep your feet healthy:

- ✓ Examine your feet and legs daily
- ✓ Care for your nails regularly
- ✓ Apply moisturizing lotion if your feet are dry (but not between the toes)
- ✓ Wear properly fitting footwear
- ✓ Test your bath water with your hand before you step in, to make sure the water is not too hot

Foot problems are very common in people with diabetes and can lead to serious complications. A daily foot-care routine and good blood sugar control will help keep your feet healthy.

Daily foot care

Gather foot care supplies like nail clippers, a nail file, lotion, and a plastic hand mirror and keep them together. Having everything you need in one place makes it easier to follow this care routine every day.

- **WASH** your feet in warm (not hot) water, using gentle soap.
- **DRY** your feet carefully, especially between your toes.
- **ASSESS** your feet and between your toes for cuts, blisters or changes.
- **LOOK** in a hand mirror to see the bottom of your feet (or ask for help).
- **CLEAN** cuts or scratches with gentle soap and water, cover with bandage for sensitive skin.
- **TRIM** your toenails straight across, file sharp edges. Don't cut the nails too short.
- **APPLY** lotion to your heels and soles (not between toes). Wipe off excess lotion.
- **WEAR** clean socks and well-fitting shoes every day.



When to see your doctor

Have your bare feet checked by your doctor or a foot-care specialist (podiatrist, chiropodist or foot-care nurse) at least once a year or more often if you've been told you are high risk.

In addition, ask your doctor to screen you for nerve damage and poor blood flow in your feet at least once a year.

If you have any of the following, see your doctor or a foot-care specialist right away:

- swelling
- warmth, redness or pain in feet or legs
- corns (thick or hard skin on toes)
- calluses (thick skin on bottom of feet,
- ingrown toenails
- warts
- slivers

Do not try to treat them yourself.



Best advice

DO	DON'T
Wear supportive, well-fitting shoes. They should have low heels (<5 cm high) and should not rub or pinch. Try to have a knowledgeable staff member measure you for the proper fit.	Don't go barefoot, even indoors. Consider buying a pair of well-fitting shoes that are just for indoors.
Buy shoes in the late afternoon (since your feet swell slightly by then).	Don't wear over-the-counter insoles. They can cause blisters if not fit properly.
Wear loose socks at night if your feet get cold.	Don't wear anything tight around your legs, such as tight socks or knee-highs.
Keep your feet clean and dry.	Don't overly soak feet or put lotion between your toes. Too much moisture can cause infection.
Elevate your feet when you are sitting.	Don't put hot water bottles or heating pads on your feet.
Wiggle your toes and move your ankles throughout the day to improve blood flow.	Don't sit or cross your legs for long periods of time.
Exercise regularly to improve circulation.	Don't smoke. It decreases circulation and healing and greatly increases the risks of amputation.
Inspect your feet daily and feel for skin temperature differences between your feet.	Don't use over-the-counter treatments for corns and warts. They are dangerous for people with diabetes.

For more information visit diabetes.ca

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