



## How to look after your feet when you have diabetes

### **Sarah Ayles – Diabetes Specialist Podiatrist**

Say there are some really key things that you yourself can do to help reduce the risk of developing foot problems. Most important is to monitor your glycaemic control and to make your blood sugars as good as possible using a combination of advice, diet, and medication, if that is what's agreed appropriate. It's also really important to manage your cholesterol and blood pressure as this is also shown to cause problems within your circulation if it's left untreated.

The other piece of advice I would give you is regarding a really well-fitting pair of shoes. Around 60 to 70% of wounds that I see start from people wearing shoes that do not fit them correctly. Poor fitting footwear can cause things such as corns, calluses, blisters, pressure points, all of which can easily ulcerate and if the nerves in your feet do not tell you that there is a problem quickly, they can develop into serious complications.

### **Colin McGreal –Type 1 Patient**

My partner, she loved walking and she would just walk ahead of me all the time and I would then try and walk as fast and keep going and not always admit that my feet are hurting or that there's a pain because it was like having flat feet. And the more I would do it, the more it would hurt. And then I would look at my feet and they were problematic. They were sore. I realized then that I had some issues. I didn't change my footwear as I should have done.

### **Gloria Travers –Type 2 Patient**

Footwear is the most important thing and unfortunately for me that is a real bad thing because I loved my shoes. I didn't necessarily love wrinkled pickers, but I do like some nice shoes.

Once you've been to see a podiatrist, you need to have your feet measured by an orthotic and get orthotics to go inside your shoes.

### **Sarah Ayles – Diabetes Specialist Podiatrist**

Other things such as checking your feet everyday are really important, particularly if you can't feel your feet as well as other people may. This way, if you do develop a problem, you can get help. You can notice it very quickly and get help straight away. The other thing that's really useful to do is to moisturize your feet every day. This helps keep your skin nice and supple and gives you your skin of some extra strength and therefore if you did knock your foot, your skin will have that little bit more robustness to help stop it from developing into a wound straight away. The other piece of advice I would give is to cut your nails straight across. People can be tempted to cut down the sides of their nails but unfortunately, this can increase the



risk of ingrowing toenails. And if you have diabetes, conventional treatments may not be available to you.

## **Gloria Travers –Type 2 Patient**

If something bothers me, I show my daughter to look. So you always do need someone else. People say you can do it with the mirror, but I've never managed that. The eyes aren't good enough to go look down there.

## **Sarah Ayles – Diabetes Specialist Podiatrist**

So your annual foot check is a completely pain free assessment, which lasts around 15 minutes. It's involves having a visual check of your feet. So, if there's any corns or calluses, etc, that you may not have noticed, you would be told about them. It is neurological test, which is a bouncy piece of plastic, which does look quite thin and, but it is not sharp and not painful and you have it touched to your feet multiple times and asked if you can feel it. And the final section of the examination is a vascular assessment. And this is where we listen to your circulation. You're using a machine called a Doppler. This is very similar to listening to a baby's heartbeat. And again, it's completely pain free.

If there are any problems identified with your feet, then the nurse or the podiatrist may ask you to see somebody, for more specialist advice. This may be a referral to the podiatry service itself, or it may be to another member of the multidisciplinary team such as orthopaedic surgeons or vascular surgeons, just for further investigations.

