

Caring for your Feet with Diabetes

- Diabetes causes narrowing of the arteries to your feet (Peripheral Vascular Disease) and damage to the nerves in your feet (Peripheral Neuropathy).
- Foot problems do not result directly from changes to arteries and nerves. They occur when injuries go unnoticed due to peripheral neuropathy and healing is delayed by peripheral vascular disease. A slow healing wound is called an ulcer. The longer the ulcer is unnoticed and the longer the ulcer takes to heal, the more chance of infection.
- Your podiatrist, diabetes educator and GP will regularly want to check your nerve and blood supply. This is called a Neurovascular Assessment.

Things that you can do to reduce your risk of developing an ulcer

- Look and feel your feet every day so that if you do have an injury it will be detected within 24 hours of occurring.
- Treat your injury promptly by cleaning it, applying an antiseptic (Betadine) and covering it with a bandaid.
- Seek help from your Podiatrist or GP if the injury is not healing.
- Maintain acceptable blood glucose control.
- Don't smoke.
- Exercise regularly (30 minutes three times a week or more, on top of your normally active day).
- Avoid barefoot walking even in the house.
- Keep your feet clear and dry, especially between your toes.
- Wear well fitting shoes with a deep square toe box and laces or Velcro (walking/sports shoes).
- Shake out your shoes before putting them on.
- Always break-in your new shoes slowly, checking regularly for blisters or abrasions.
- Cut and file nails carefully.
- Have corns, callus and other foot problems treated by a podiatrist. Do not use commercial corn cures/pads.