



# Your foot check has shown that there is a high risk that you could develop serious foot problems

### **YOUR FEET MATTER**

If you've been given this information by your doctor, nurse or podiatrist, it's because you're at high risk of developing serious problems with your feet.

#### That means you could have a foot attack.

You need to know why you're at high risk, how to spot a foot attack and what action to take – so you can keep your feet problem-free.

It's also vital that your feet are checked properly every year, as part of your annual diabetes review – and whenever you notice any changes in your feet. If you do notice any changes in your feet, contact your doctor immediately.



## **YOUR FOOT CHECK**

# Your latest foot check showed you're at high risk of a foot attack because:

- you've lost some feeling in your feet, or
- the circulation (blood flow) in your feet is reduced, or
- you have hard skin or corns on your feet, or
- the shape of your feet has changed, or
- your vision is impaired, or
- you cannot look after your feet by yourself, or
- you've had foot ulcers before, or
- you've had an amputation to part of your foot or leg.



#### The person doing your foot check should tell you the risk factors that apply to you.



As you're at high risk, you should be referred to the foot protection team or specialist podiatrist (see p9). Ask your **GP** if this has been arranged.

## **FOOT ATTACKS**

A foot attack is an injury to a foot (or feet) of someone with diabetes who has reduced feeling or reduced blood circulation in their feet.

# It is a medical emergency that needs immediate attention.

It often starts as a small break in the skin and can quickly develop into a foot ulcer. Injuries may look like blisters, bleeding or a puncture mark from something sharp. Sometimes a rough or long nail is enough to cause a wound. You may not feel any pain because you have lost sensation in your feet.



Make sure you know how to spot a foot attack in the future, know who to call and where to go.

## SPOTTING A FOOT ATTACK

- Is your foot red, warm or swollen?
- Is there a break in the skin or any discharge (or oozing) onto your socks or stockings?
- Do you feel unwell?



You may not have pain even with a visible wound. If your sight is not good make sure someone else looks at your feet every day.

## WHAT TO DO IF YOU'RE HAVING A FOOT ATTACK

- Contact your GP or foot protection team immediately.
- If they are not available and there is no sign of healing after one day, go to your nearest out-of-hours healthcare service or your A&E department.

### TREATMENT OF A FOOT ATTACK

- You will probably need a course of antibiotics and your foot will probably be covered with a dressing.
- You should rest and avoid unnecessary standing or walking.
- Your diabetes treatment may be changed to maximise the chances of healing.

#### **HELP IS HERE**

Being aware of your risk of developing foot ulcers and other problems with your feet and lower legs is essential. Changes in your feet can be gradual and you may not even notice them.

As your feet are at high risk, you'll be referred to a foot protection team or specialist podiatrist. This may be worrying for you, but it means you can get expert advice about how to look after your feet and prevent any problems from getting worse.



## WHAT SHOULD HAPPEN NEXT?

Your foot protection team will also tell you your risk and agree a **personalised care plan** with you. This may involve treatment, advice about appropriate footwear and how to look after your feet. You will be seen every 1–3 months and this will be arranged by the local podiatry service. If there isn't a foot protection team in your area you should be seen by a specialist podiatrist. These appointments are additional to your annual diabetes foot check.

Good fitting footwear is essential to help prevent foot problems and some people may need custom-made shoes or orthotics (insoles) to reduce the pressure on the foot. Your podiatrist will discuss this with you.

People with diabetes are eligible to have their feet assessed free (on the NHS) as part of their overall diabetes care. If you choose to see a private podiatrist, you will have to pay for this service and remember to check they are registered with the Health & Care Professions Council at www.hcpc-uk.org.

### HOW TO PREVENT FUTURE PROBLEMS

- **1.** Keep good control of your diabetes, cholesterol and blood pressure.
- 2. If you smoke, get help to stop because smoking affects blood circulation.
- **3.** Make sure you attend your annual foot check.
- **4.** Make sure you have been referred to a foot specialist for expert advice.
- 5. Attend all your appointments.



- 6. Check your feet every day.
- 7. Look after your toenails.
- 8. Use moisturising cream every day and wear well-fitting shoes that protect, support and don't cause pressure.
- 9. Know how to spot the signs of a foot attack.
- **10.** Keep useful numbers handy and know who to call if you have any new problems with your feet.

## WHO TO CONTACT

It is important that you know who to contact. If you don't know any of these details, ask someone at your doctor's surgery.

#### GP

GP	Surgery:
GP	Name:
Tel	ephone:

#### **Podiatrist/Foot Protection Team**

Named contact:
Telephone:
Opening hours:
_ocation:

#### **Multidisciplinary Footcare Team**

Named contact:	•••••	•••••	•••••	
Telephone:	• • • • • • • • • •	• • • • • • • • • • • • •	•••••	
Location:			•••••	

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#### Notes



We are the leading UK charity that cares for, connects with and campaigns for people with diabetes, providing information advice and support when you need it.

Go to www.diabetes.org.uk Email info@diabetes.org.uk Call 0345 123 2399\*





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