### WHAT'S A DIABETIC FOOT ULCER?

A diabetic foot ulcer is a sore on the foot of a person who has diabetes. People with diabetes are at more risk for getting a foot ulcer as they may have nerve damage in their feet (neuropathy). This nerve damage can cause loss of feeling in the feet, a change in the shape of the foot, and can dry out the skin of the feet. Because of these changes, a person with diabetes may not know that they have:

- · Shoes that are not fitting right;
- · A callus or blister on their foot;
- Cracks on their heels, or;
- Injured their feet.

People with diabetes may also have narrow or blocked blood vessels in their legs (a.k.a. peripheral arterial disease). This poor blood flow can slow wound healing and increase your risk of infection. Diabetic foot ulcers, if not properly treated, may become infected and may result in toe or foot amputations.

### WHAT ARE THE SIGNS OF NEUROPATHY?

Diabetic foot ulcers are most often found on the feet of people with neuropathy. Signs of neuropathy include: shooting, stabbing, burning, tingling, and/or throbbing of the feet with or without numbness. There are many known risk factors for neuropathy, such as:

- · High blood sugars;
- High cholesterol;
- High blood pressure;
- Being overweight, and;
- Smoking.

### **QUESTIONS TO ASK YOUR DOCTOR**

As a person with diabetes you should visit your doctor at least once a year. At these visits you should be asking:

- Is my HgbA1c 7% or less, and if not, what can I do to improve it?
- Am I at an ideal body weight, and if not, what can I do to get there?
- How often should I check my blood sugars, and what is the best blood sugar range for me?
- Do my diabetes, blood pressure, and/or cholesterol medications need changed?
- Do I need to see a diabetes educator?
- Can you please look my feet (with my socks off, standing and sitting) and my socks and shoes today?
- Do I need to see a foot/shoe specialist for better footwear and/or foot care? Who do you suggest?
- Can you check my feet for neuropathy (this should be done at least once a year)?
- Can you help me to stop or cut down smoking/ drinking alcohol?

For more information on diabetic foot ulcers, nutrition, wound healing, and community resources, go to:

swrwoundcareprogram.ca



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Tips on how to prevent and/or care for your or your loved one's diahetic foot ulcer





## **COMMON QUESTIONS**

# WHAT ARE THE SIGNS OF A DIABETIC FOOT ULCER?

A diabetic foot ulcer often shows up as a:

- Callus;
- · Blister;
- · Crack in the skin of your foot, and/or;
- Red, warm, tender spot that does not go away.

15-25% of people with diabetes will get a foot ulcer in their lifetime!

### WHAT CAN I DO TO HELP?

You are an important member of your wound care team. You can help to close your diabetic foot ulcer and keep new ones from happening by following these rules:

- Keep your ulcer dressing clean and dry;
- Change your dressing as instructed by your nurse. If you or a family member, friend, or neighbor is able to change the dressing, you/they will be taught to do so;
- Recognize the signs of wound infection and get help right away. Signs of infection are: redness with heat around the ulcer, swelling, more drainage than usual or green drainage or drainage with pus, worse or new pain, fever (38\*C), red streaks up the foot or leg, new foot pain or feeling in the foot where there was none before, and/or a bad smell;
- Wash your feet daily with warm (not hot) water, drying well (especially between your toes);
- Moisturize any dry foot skin with an emollient (but not between your toes);
- Don't soak your feet,
- Look at your feet every day, including between your toes;
- Check your shoes everyday and always shake out your shoes and feel inside them before putting them on;

- Change your socks every day and wear socks without seams/holes/wrinkles and that are light colored and not too tight nor knee-high in length;
- Never go barefoot, or walk around in socks without shoes, in thin-soled slippers, in sandals, flip flops, narrow pointed shoes, high heels or Crocs, whether at home or outside;
- Wear your socks and footwear EVERY TIME your feet touch the ground (NO EXCUSE);
- Have a professional choose/fit your foot-wear;
- Shop for shoes in the afternoon when your feet are more swollen;
- Replace shoes when they are worn out. If you are unsure, have a member of your health care team check for you;
- Break in new shoes slowly (wear them one hour per day for several days);
- Stop smoking;
- Eat a well-balanced diet;
- Take your medications as ordered by your doctor;
- Have a professional cut your toe nails and care for any corns or calluses—NEVER cut a callus off yourself and don't use off the shelf chemicals to remove corns or calluses;
- If you are cutting your toenails, cut them straight across;
- Protect your feet from injury (i.e. no heating pads or hot water bottles on your feet, don't sit close to fires or heaters and prevent sunburns);
- Visit your doctor at least once per year for a foot/foot wear exam and a diabetes check-up.

80% of diabetic foot ulcers are preventable!

### **CHECK YOUR FEET EVERY DAY**

Every day you should clean and check your feet in a well-lit area (make sure you have your glasses on). Wash your feet in warm tap water with a mild soap, rinse, and then dry well, especially between your toes. Look at your feet (use a mirror or ask someone else to look if you can't see the bottom of your feet). You should look at the top and bottom of your feet, your heels, and between each of your toes. Look for moisture, blisters, cracks, calluses, open sores, dry skin, changes in skin color and swelling. Feel your feet for changes in skin temperature, and smell your feet for odor. Next you should moisturize your feet (except between your toes) with a non-scented lotion, like Lubriderm, AtracTain, Uremol, or Glaxal Base. Let your doctor know of any problems right away!

#### I FOUND A NEW UI CFR!

Don't panic if you find a new ulcer on your foot. The good thing is that as you are cleaning and checking your feet every day that you have likely caught the ulcer early. If there is redness, heat, swelling and/or pain around the ulcer (signs of infection), go to your family doctor or the emergency room right away. If there are no signs of infection, clean the ulcer and skin around the ulcer with warm tap water. Pat the ulcer/ skin dry, and cover it with gauze or a Band-Aid that closes on all sides. Make an appointment to see your family doctor within the next couple of days (the sooner the better). Change the dressing every day and more often if the dressing falls off, leaks through or gets dirty (you want to keep the ulcer clean and dry).

DO NOT WALK ON ANY ULCERS UNTIL YOU CAN BE PRESCRIBED PROPER FOOTWEAR!

You cannot heal the ulcer if you keep walking on it!

