AMERICAN ORTHOPAEDIC FOOT AND ANKLE SOCIETY
DIABETIC FOOT CARE

A cause for concern

Ulceration, infection, and gangrene are the most common foot and ankle problems that the patient with diabetes must face. As a result, thousands of diabetic patients yearly require amputations.

There are two major causes of foot problems in diabetes:
1. Nerve damage (neuropathy): This causes loss of feeling in the foot, which normally protects the foot from injury. Furthermore, nerve damage causes toe deformities, collapse of the arch, and dry skin. These problems may result in foot ulcers and infections, which may progress rapidly to gangrene (tissue death) and amputation. However:
   GOOD FOOT CARE MAY OFTEN PREVENT ULCERS AND INFECTIONS.

2. Loss of circulation (ischemia): This may be more difficult to treat. If circulation is poor, gangrene and amputation may be unavoidable. However:
   GOOD FOOT CARE MAY OFTEN DELAY THE NEED FOR AMPUTATION.

PROTECT YOUR FEET

1. EXAMINE YOUR FEET DAILY
   - Use your eyes and hands, or have a family member help.
   - Check between the toes.
   - Use a mirror for the bottom of the feet.
   - Look for these DANGER SIGNS:
     SWELLING (especially new, increased, or involving one foot)
     REDNESS (may be sign of pressure sore or infection)
     BLISTERS (may be sign of rubbing or pressure sore)
     CUTS OR SCRATCHES OR BLEEDING (may become infected)
     NAIL PROBLEMS (may rub on skin, cause ulcer, become infected)
     WET, FRAGILE SKIN OR DRAINAGE (between toes)
   - If you observe any of these danger signs, call your physician at once.

2. EXAMINE YOUR SHOES DAILY
   - Check the insides of your shoes, using your hands, for:
     IRREGULARITIES (rough areas, seams)
     FOREIGN OBJECTS (stones, tacks)

3. DAILY WASHING AND FOOT CARE
   - Wash your feet daily.
   - Avoid water that is too hot or too cold – use lukewarm water.
   - Dry off the feet after washing, especially between the toes.
   - If your skin is dry, use a small amount of lotion on the skin.
   - Use lambswool (NOT cotton) between the toes to keep these areas dry.
4. FITTING SHOES AND SOCKS
   Make sure that shoes and socks are NOT TOO TIGHT.
   - Toe box should have extra room and be made of soft upper material that can “breathe.”
   - New shoes should be removed after 5-10 minutes to check for REDNESS, which could be a sign of too much pressure; if there is redness, do not wear the shoe. If there is no redness, check again after each half hour during the first day of use.
   - Rotate your shoes.
   - Ask your physician about therapeutic (prescription) footwear, which is a covered benefit for diabetics in many insurance plans.
   - A certified orthotist or pedorthist is qualified to fabricate and fit appropriate diabetic shoewear.
   - Tell your shoe salesman that you are diabetic.

5. MEDICAL CARE
   - Ask your physician to check your feet and shoes at every visit.
   - Call your physician if you observe any of the above danger signs.

DO NOT DO THESE DANGEROUS ACTS

1. DO NOT WALK BAREFOOT
   - Sharp objects or rough surfaces can cause cuts, blisters, and other injuries.

2. DO NOT USE HEAT ON THE FEET
   - Heat can cause a serious burn, especially if sensation is abnormal.
   - DO NOT soak feet in hot water.
   - DO NOT apply a heating pad.

3. DO NOT USE CHEMICALS OR SHARP INSTRUMENTS TO TRIM CALLUSES
   - This could cause cuts and blisters that may become infected.

4. DO NOT CUT NAILS INTO THE CORNERS
   - Cut nails straight across.

5. DO NOT SMOKE
   - Smoking prevents oxygen from getting to your feet.

REMEMBER: “AN OUNCE OF PREVENTION IS BETTER THAN A POUND OF CURE”
   It takes 20 times more energy to heal a wound than to maintain a healthy foot.

THE AMERICAN ORTHOPAEDIC FOOT AND ANKLE SOCIETY is a group of orthopaedic surgeons (MDs and DOs) who have special interest and training in the care of the foot and ankle. In addition to medical school, these physicians complete at least five years of rigorous training to become orthopaedic surgeons.