

Helpful Contacts

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**This is a guide only and does not
replace clinical judgment**

References:

Steed DL et al. Guidelines for the treatment of diabetic ulcers. *Wound Repair and Regeneration* 2006. 14(6):680-692

Steed DL et al. Guidelines for the prevention of diabetic ulcers. *Wound Repair and Regeneration* 2008. 16(2):169-174

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McIntosh A et al. *Prevention and Management of Foot Problems in Type 2 Diabetes*. Sheffield: University of Sheffield: NICE 2003



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Diabetic Foot Ulcers

Information for clients, family and carers



Diabetic Foot Ulcers

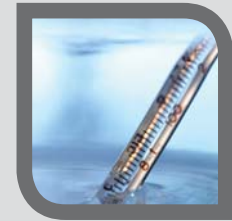
What is a diabetic foot ulcer?

- A diabetic foot ulcer is a sore or broken skin area, often on the bottom of the foot or over bony areas
- They can occur from injury, pressure, or rubbing of skin (e.g. from shoes)
- They may worsen because of lack of feeling (neuropathy) in your feet
- Most diabetic foot ulcers can be prevented or healed quickly if they are picked up in the early stages

Poorly fitting shoes are the most frequent cause of diabetic foot ulcers

✓ Do

- See a skilled health professional to inspect feet at least once a year
- Inspect your feet and toes daily
- Cut nails straight across
- Check there are no sharp or rough edges in shoes before putting them on
- Tell your health professional as soon as possible if you notice red areas, a blister, cut, scratch or sore
- Wash and dry your feet carefully, especially between the toes
- Check the temperature of the water before putting your feet in!
- Change your socks daily
- Use a moisturiser for dry skin but avoid moisturising between the toes
- Monitor blood sugar levels regularly. Healthy blood sugar levels promote healing
- Eat a healthy diet
- Stop smoking



✗ Don't

- Do not walk indoors or outdoors without socks and shoes
- Do not use plasters to remove calluses—see a health professional
- Do not use a heater or hot water bottle to warm your feet
- Do not wear shoes and socks that are too tight or too loose
- Do not wear socks with seams

