

diabetic foot care

Because diabetes can affect the blood circulation in our legs and feet, it is very important for people with diabetes to take good care of their feet. Children with diabetes usually have good circulation. However, as your child grows into adulthood, this circulation may decrease. It is important to develop good foot care habits when young so it will become routine as the person with diabetes grows older. Taking a few extra minutes every day to care for your feet may prevent serious complications later.



daily care includes:

- **Inspect (look over carefully) your feet every day.** Watch for cracks, blisters, cuts, sores, and any signs of infection (redness, discoloration, swelling, pus). Call your pediatrician or family doctor if you notice any signs of infection.
- **Avoid injuries to your feet.** For a person with uncontrolled diabetes, the chances of a blister or cut becoming infected are greater.
- **Keep your feet covered.** Wear shoes or slippers everywhere, even around the house or at the pool or beach.
- **Wear clean cotton socks, which help absorb moisture.**
 - Diabetic socks are not necessary
 - Avoid wearing anything tight on the feet or ankles that would slow the blood flow to the feet
- **Wash your feet every day in warm (not hot) soapy water and rinse them well.** Dry your feet by patting with a towel until dry instead of rubbing. At this time, apply lotion to any rough spots so that the skin will not crack.
- **Keep toenails trimmed straight across.** File down any sharp edges. It is best to trim your toenails after washing your feet, so the nails are soft.
- **Avoid shoes that rub or do not fit well.** These could cause blisters.
- **Rub corns (thickness in the skin that have a hard center surrounded by inflamed skin) daily with a pumice stone.** Trimming them or applying commercial corn remedies may harm your feet.
- **Keep feet warm by wearing socks.** Do not use hot water bottles or heating pads on your feet. Avoid sun burns on your feet.

(continued on back)



long term care includes:

- Regular medical exams that include:
 - Yearly foot exams that include checking pulses and sensation
 - Type 1 patients – starting 5 years after diabetes diagnosis
 - Type 2 patients – first appointment after diabetes diagnosis
 - Labs – A1C every 3-6 months, cholesterol every year
 - Blood pressure every appointment
- Checking blood sugar and giving medication as directed by physician
- Exercise
- A healthy diet

If foot problems develop, you may experience the following:

- Burning, tingling, or pain in feet
- Hair loss on the toes, feet, or lower legs
- Toenails that are thick and yellow
- Red areas, blisters, sores, ulcers, infected corns or ingrown toenails

If any of these symptoms develop, call your doctor. Untreated sores and ingrown toenails can lead to infection. Higher blood sugars and poor circulation can make it more difficult for an infection to heal. If an infection does not heal well, the tissue of the problem area can die and need to be removed. In serious cases, this can lead to amputation (removal) of the affected toe, foot, or part of the leg. Good diabetes control and foot care can greatly reduce the risk of this happening.

This handout is for general information only and should not be considered complete. For more specific information, please ask your child's health care provider.

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