

Patient information factsheet

Diabetes: managing your foot wound

You have been given this factsheet to help you recover from your foot ulcer or recent foot surgery. Please keep it in a safe place in case you need to refer to it in the future. It's a good idea to show this factsheet to your family or carers, so that they are aware of the main guidelines for the care of your wound.

Looking after your feet

Our feet are designed to support our bodies when we walk, adapting to the underlying surface and absorbing the shocks and pressure sustained during walking. If you have a foot ulcer, nerve damage or have had foot surgery, your feet will not be able to complete this function in a normal way.

How you can help your foot heal:

- wear modified footwear to try to relieve areas of high pressure
- keep the skin soft and supple and maintain good nail care
- avoid carrying excess body weight

Try to modify your lifestyle to decrease the stress on your feet. It's important to avoid standing and walking, so ask your friends, family or neighbours to help with the shopping, cooking and household chores while you heal.

To improve the chances of wound healing, it's important to follow the advice below.

Reducing leg/ankle swelling (oedema)

Excess fluid in the tissues of the leg will slow healing and increase the risk of infection.

- Fluid will collect in the tissues within minutes of your foot dropping below the level of your hips, so it's essential that you keep your legs elevated above the level of your hips for the majority of the day.
- Do not increase your dose of diuretics (water tablets) unless advised to by a doctor. Fluid naturally collects at our ankles due to the effects of gravity, and diuretic medicines may not improve swelling in this area.

Walking

Only walk on your affected foot if it's absolutely essential.

Even a few short steps can cause extensive damage to the tissues of your foot. If walking is unavoidable, ensure you are wearing footwear recommended by your podiatrist.

Footwear

Diabetes can cause changes in your feet affecting their size, shape and the way they feel sensations like pain, discomfort, heat and cold.

These changes may continue to develop or worsen over time, so it's essential that you wear only correctly fitting shoes approved by a podiatrist. Your old shoes should be discarded, and not worn again, even for special occasions. Just because a pair of shoes feels comfortable, does not mean they fit you correctly. The nerves in your feet may be unreliable, so always check with your podiatrist.

If you have had foot surgery then you will have been advised on the type of footwear you should use until the wound has healed. Once your foot has healed, you should follow the advice of your podiatrist, and only wear footwear they have prescribed, even when walking around in your home.

Slippers are **not** suitable unless your podiatrist has seen them and confirmed that they're ok.

Blood glucose control and nutrition

If you test your blood glucose levels, aim to keep your measurements between 4 and 12mmol/l.

This will give your body the best chance of healing the wound, and reduce the likelihood of developing an infection. Eat a healthy, balanced diet to provide your body with the nutrition it needs at this time.

Dressings

If your wound has been covered with a dressing, you should be aware of the following points:

- A dressing should keep the wound warm and moist.
- Dressings do not prevent infections.
- If your wound 'leaks' a lot then this is usually an indication that there is too much fluid in the tissues of your leg. You will need to keep your legs elevated for longer periods of the day (possibly even complete bed rest).
- Absorbent dressings are generally not helpful as they can cause the wound to become soggy and encourage the growth of bacteria.

There's no scientific evidence for any one specific dressing being better than another in achieving quicker wound healing.

Antibiotics

You may be prescribed antibiotics, but only if necessary to treat an infection.

Antibiotics alone do not encourage a wound to heal and will not work effectively if the foot is swollen.

Smoking

Do not smoke. Smoking slows down healing and increases the risk of complications in the future.

Signs of infection

If you experience any of these symptoms affecting your foot or wound, contact your podiatrist urgently:

- Increasing pain or tenderness
- Increasing redness spreading from the sides of the wound (more than 1cm/half an inch)
- An increase in swelling, even though you have rested and elevated your leg
- An offensive smell from the wound
- Feeling unwell (flu-like symptoms) or experiencing difficulty controlling your blood sugar levels

How to reduce the risk of further complications

As you have already had a problem with your foot, there is a 50 to 70% chance that you could experience further problems in the future. Ways you can minimise this risk:

- Protect your feet: always wear enclosed shoes that fasten to your feet (never slip-on footwear).
- Always check, look and feel inside your shoes before putting them on.
- Wear correctly fitted footwear, with adequate space for your toes (height and width-wise) without your foot moving in the shoe once it is fastened.
- Always wear a new shoe for a short while to start with, then use for longer periods if no areas of redness develop.
- Check and change your shoes every six to 12 months, because your feet will change shape.
- Discard your old shoes. This may seem like a waste, but the health of your feet is the most important thing.
- Wash and check your feet daily. Use a mirror or ask someone to help you if required, and then put on clean, dry socks with the seams turned out (away from the skin).
- Use skin moisturisers at least daily to keep the skin soft.
- Controlling your body weight is one of the most important ways to decrease stress on your feet. Remember that when you walk, very small areas of your feet have to carry the force of moving your body weight at speed. This force may be one to two times your body weight if you shuffle slowly, and increase up to seven times your body weight if you run.

Guide to selecting shoes

- Have your feet measured while standing every time you buy shoes.
- Avoid heels higher than 2.5cm/one inch, loafer style shoes or those with straps between your toes.
- Avoid shoes with ridges from seams inside the shoe that you can feel with your hand.
- There should be at least 1cm/half an inch of space between the longest toe and the front of your shoe.
- You should be able to wiggle your toes without them rubbing on the shoe. The shoe should be wide enough to hold your foot without pinching it (measure the width required) but not so wide that your foot slides from side to side.
- If you use orthotic insoles, always measure and try your shoes with these in place.
- The sole of the shoe should provide cushioning and some flexibility (not too much though, you shouldn't be able to fold the shoe in half). If the shoe has a 'rocker-bottom' sole then this may be quite rigid. The shoe should flex at the point of the 'knuckles' of the foot.
- The material used for the main body of the shoe (the upper) should be breathable (material or leather) and should support your foot your foot should not tend to slip off the inside or outside of the sole of the shoe.
- There should be padding, an adjustable closure mechanism (Velcro or laces) and the material should not rub on your ankle bones.

A simple way to check your basic shoe fitting

Cut out a tracing of the outline of your foot (made when standing). The tracing can either be placed over the insole of the shoe or lie it inside the shoe. The edges of the tracing should not overlap the sides of either. Remember to check that there is also enough height for your toes in the front of the shoes.



If you are admitted to hospital for any reason

- Tell the healthcare professionals that you have diabetes and have received care for foot-related complications in the past.
- If your foot is the reason for your hospital stay, your feet should be assessed within four hours of admission.
- If your feet are fine, they should still be looked at within 24 hours of admission.

Useful links

www.nhs.uk/Conditions/Diabetes/Pages/Diabetes.aspx www.nhs.uk/Livewell/foothealth/Pages/Diabetesandfeet.aspx www.nhs.uk/livewell/loseweight/Pages/Loseweighthome.aspx www.diabetesinscotland.org.uk/publications/#leaflet-docs



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