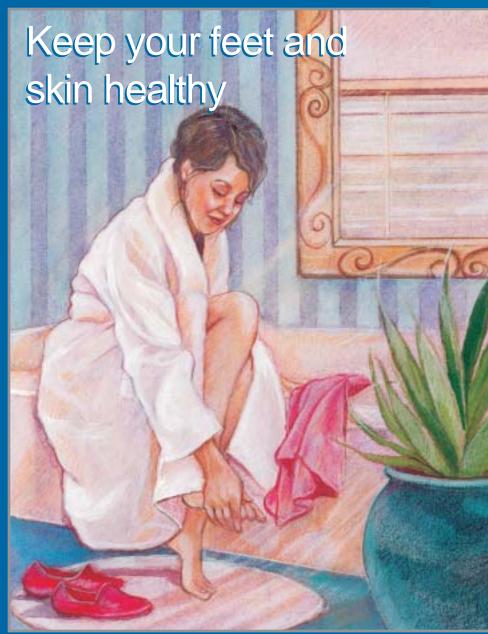
Prevent diabetes problems







Prevent diabetes problems: Keep your feet and skin healthy

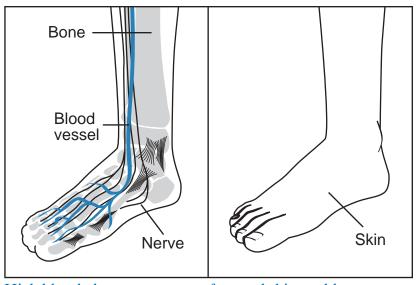
Contents

| What are diabetes problems? | 1 |
|--|----|
| What should I do each day to stay healthy with diabetes? | 2 |
| How can diabetes hurt my feet? | 3 |
| What can I do to take care of my feet? | 5 |
| How can my doctor help me take care of my feet? | 7 |
| What are common diabetes foot problems? | 8 |
| How can special shoes help my feet? | 11 |
| How can diabetes hurt my skin? | 12 |
| What can I do to take care of my skin? | 13 |
| For More Information | 14 |
| More in the Series | 16 |
| Acknowledgments | 17 |

What are diabetes problems?

Too much glucose (sugar) in the blood for a long time can cause diabetes problems. This high blood glucose (also called blood sugar) can damage many parts of the body, such as the heart, blood vessels, eyes, and kidneys. Heart and blood vessel disease can lead to heart attacks and strokes. You can do a lot to prevent or slow down diabetes problems.

This booklet is about feet and skin problems caused by diabetes. You will learn the things you can do each day and during each year to stay healthy and prevent diabetes problems.



High blood glucose can cause feet and skin problems.

What should I do each day to stay healthy with diabetes?



Follow the healthy eating plan that you and your doctor or dietitian have worked out.



Be active a total of 30 minutes most days. Ask your doctor what activities are best for you.



Take your diabetes medicines at the same times each day.



Check your blood glucose every day. Each time you check your blood glucose, write the number in your record book.



Check your feet every day for cuts, blisters, sores, swelling, redness, or sore toenails.



Brush and floss your teeth and gums every day.



Don't smoke.

How can diabetes hurt my feet?

High blood glucose from diabetes causes two problems that can hurt your feet:

- 1. Nerve damage. One problem is damage to nerves in your legs and feet. With damaged nerves, you might not feel pain, heat, or cold in your legs and feet. A sore or cut on your foot may get worse because you do not know it is there. This lack of feeling is caused by nerve damage, also called diabetic neuropathy (ne-ROP-uh-thee). It can lead to a large sore or infection.
- 2. Poor blood flow. The second problem happens when not enough blood flows to your legs and feet. Poor blood flow makes it hard for a sore or infection to heal. This problem is called peripheral (puh-RIF-uh-rul) vascular disease. Smoking when you have diabetes makes blood flow problems much worse.

These two problems can work together to cause a foot problem.

For example, you get a blister from shoes that do not fit. You do not feel the pain from the blister because you have nerve damage in your foot. Next, the blister gets infected. If blood glucose is high, the extra glucose feeds the germs. Germs grow and the infection gets worse. Poor blood flow

to your legs and feet can slow down healing. Once in a while a bad infection never heals. The infection might cause gangrene (GANG-green). If a person has gangrene, the skin and tissue around the sore die. The area becomes black and smelly.

To keep gangrene from spreading, a doctor may have to do surgery to cut off a toe, foot, or part of a leg. Cutting off a body part is called an amputation (amp year)



Make sure you wear shoes that fit well.

amputation (amp-yoo-TAY-shun).

What can I do to take care of my feet?

- Wash your feet in warm water every day. Make sure the water is not too hot by testing the temperature with your elbow. Do not soak your feet. Dry your feet well, especially between your toes.
- Look at your feet every day to check for cuts, sores, blisters, redness,



Look at your feet every day to check for problems.

- calluses, or other problems. Checking every day is even more important if you have nerve damage or poor blood flow. If you cannot bend over or pull your feet up to check them, use a mirror. If you cannot see well, ask someone else to check your feet.
- If your skin is dry, rub lotion on your feet after you wash and dry them. Do not put lotion between your toes.

- File corns and calluses gently with an emery board or pumice stone. Do this after your bath or shower.
- Cut your toenails once a
 week or when needed.
 Cut toenails when they are soft from washing.
 Cut them to the shape of the toe and not too short. File the edges with an emery board.
- Always wear shoes or slippers to protect your feet from injuries.
- Always wear socks or stockings to avoid blisters. Do not wear socks or knee-high stockings that are too tight below your knee.
- Wear shoes that fit well. Shop for shoes at the end of the day when your feet are bigger.

 Break in shoes slowly. Wear them

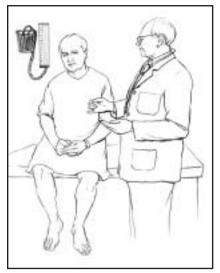
 1 to 2 hours each day for the first

 1 to 2 weeks
- Before putting your shoes on, feel the insides to make sure they have no sharp edges or objects that might injure your feet.

Always wear slippers or shoes to protect your feet.

How can my doctor help me take care of my feet?

- Tell your doctor right away about any foot problems.
- Ask your doctor to look at your feet at each diabetes checkup. To make sure your doctor checks your feet, take off your shoes and socks before your doctor comes into the room.
- Ask your doctor to check how well the nerves in your feet sense feeling.
- Ask your doctor to check how well blood is flowing to your legs and feet.
- Ask your doctor to show you the best way to trim your toenails. Ask what lotion or cream to use on your legs and feet.
- If you cannot cut your toenails or you have a foot

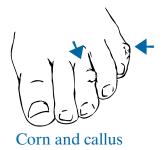


Take off your shoes and socks so your doctor will check your feet.

problem, ask your doctor to send you to a foot doctor. A doctor who cares for feet is called a podiatrist (puh-DY-uh-trist).

What are common diabetes foot problems?

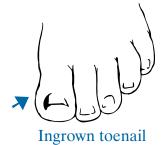
Anyone can have corns, blisters, and athlete's foot. If you have diabetes and your blood glucose stays high, these foot problems can lead to infections.



Corns and calluses are thick layers of skin caused by too much rubbing or pressure on the same spot. Corns and calluses can become infected.



Blisters can form if shoes always rub the same spot. Wearing shoes that do not fit or wearing shoes without socks can cause blisters. Blisters can become infected.



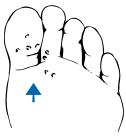
Ingrown toenails happen when an edge of the nail grows into the skin. The skin can get red and infected. Ingrown toenails can happen if you cut into the corners of your toenails

when you trim them. If toenail edges are sharp, smooth them with an emery board. You can also get an ingrown toenail if your shoes are too tight.



A bunion forms when your big toe slants toward the small toes and the place between the bones near the base of your big toe grows big. This spot can

get red, sore, and infected. Bunions can form on one or both feet. Pointed shoes may cause bunions. Bunions often run in the family. Surgery can remove bunions.



Plantar warts

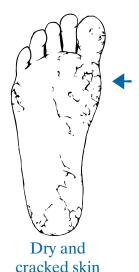
Plantar warts are caused by a virus. The warts usually form on the bottoms of the feet.



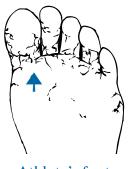
Hammertoe

Hammertoes form when a foot muscle gets weak. The weakness may be from diabetic nerve damage. The weakened muscle makes the tendons in the

foot shorter and makes the toes curl under the feet. You may get sores on the bottoms of your feet and on the tops of your toes. The feet can change their shape. Hammertoes can cause problems with walking and finding shoes that fit well. Hammertoes can run in the family. Wearing shoes that are too short can also cause hammertoes.



Dry and cracked skin can happen because the nerves in your legs and feet do not get the message to keep your skin soft and moist. Dry skin can become cracked and allow germs to enter. If your blood glucose is high, it feeds the germs and makes the infection worse.



Athlete's foot

Athlete's foot is a fungus that causes redness and cracking of the skin. It is itchy. The cracks between the toes allow germs to get under the skin. If your blood glucose is high, it feeds the germs and makes the infection worse. The

infection can spread to the toenails and make them thick, yellow, and hard to cut.

All of these foot problems can be taken care of. Tell your doctor about any foot problem as soon as you see it.

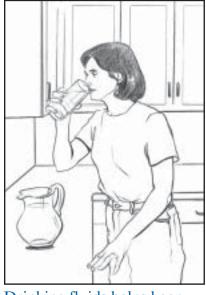
How can special shoes help my feet?

Special shoes can be made to fit softly around your sore feet or feet that have changed shape. These special shoes help protect your feet. Medicare and other health insurance programs may pay for special shoes. Talk to your doctor about how and where to get them.

How can diabetes hurt my skin?

Diabetes can hurt your skin in two ways:

1. If your blood glucose is high, your body loses fluid. With less fluid in your body, your skin can get dry. Dry skin can be itchy, causing you to scratch and make it sore. Also, dry skin can crack. Cracks allow germs to enter and cause infection. If your blood glucose is high, it feeds germs and makes infections were a Skir



Drinking fluids helps keep your skin moist and healthy.

infections worse. Skin can get dry on your legs, feet, elbows, and other places on your body.

2. Nerve damage can decrease the amount you sweat. Sweating helps keep your skin soft and moist. Decreased sweating in your feet and legs can cause dry skin.

What can I do to take care of my skin?

 After you wash with a mild soap, make sure you rinse and dry yourself well. Check places where water can hide, such as under the arms, under the breasts, between the legs, and between the toes.

 Keep your skin moist by using a lotion or cream after you wash. Ask your doctor to suggest one.

 Drink lots of fluids, such as water, to keep your skin moist and healthy.

 Wear all-cotton underwear. Cotton allows air to move around your body better.



Keep your skin moist by washing with a mild soap and using lotion or cream after you wash.

- Check your skin after you wash. Make sure you have no dry, red, or sore spots that might lead to an infection.
- Tell your doctor about any skin problems.

For More Information

Diabetes Teachers (nurses, dietitians, pharmacists, and other health professionals)

To find a diabetes teacher near you, call the American Association of Diabetes Educators toll-free at 1–800–TEAMUP4 (1–800–832–6874), or look on the Internet at www.diabeteseducator.org and click on "Find a Diabetes Educator."



Dietitians

To find a dietitian near you, call the American Dietetic Association toll-free at 1–800–366–1655, or look on the Internet at www.eatright.org and click on "Find a Nutrition Professional."

Government

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) is part of the National Institutes of Health. To learn more about feet and skin problems, write or call the National Institute of Arthritis and Musculoskeletal and Skin Diseases Information Clearinghouse, 1 AMS Circle, Bethesda, MD 20892–3675, 1–877–226–4267 (toll-free); or see www.niams.nih.gov on the Internet.

To get more information about taking care of diabetes, contact

National Diabetes Information Clearinghouse

1 Information Way

Bethesda, MD 20892–3560

Phone: 1–800–860–8747 or (301) 654–3327

Fax: (301) 907–8906

Email: ndic@info.niddk.nih.gov

Internet: www.diabetes.niddk.nih.gov

National Diabetes Education Program

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Bethesda, MD 20892-3600

Phone: 1-800-438-5383

Fax: (301) 907–8906

Internet: http://ndep.nih.gov

American Diabetes Association

1701 North Beauregard Street

Alexandria, VA 22311

Phone: 1-800-342-2383

Internet: www.diabetes.org

Juvenile Diabetes Research Foundation International

120 Wall Street

New York, NY 10005-4001

Phone: 1-800-533-2873

Internet: www.jdrf.org

More in the Series

The "Prevent Diabetes Problems" series has seven booklets that can help you learn more about how to prevent diabetes problems.



For free single copies of these booklets, write, call, fax, or email the

National Diabetes Information Clearinghouse 1 Information Way Bethesda, MD 20892–3560

Phone: 1-800-860-8747 or (301) 654-3327

Fax: (301) 907–8906

Email: ndic@info.niddk.nih.gov

These booklets are also available at www.diabetes. niddk.nih.gov on the Internet.

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The National Diabetes Information Clearinghouse (NDIC) is a service of the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). The NIDDK is part of the National Institutes of Health under the U.S. Department of Health and Human Services. Established in 1978, the clearinghouse provides information about diabetes to people with diabetes and to their families, health care professionals, and the public. NDIC answers inquiries, develops and distributes publications, and works closely with professional and patient organizations and Government agencies to coordinate resources about diabetes.

Publications produced by the clearinghouse are carefully reviewed by both NIDDK scientists and outside experts.

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