To: Local Newspaper
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RE: Diabetes
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**DIABETES FOOT CARE**

The term “diabetes” refers to a disease that affects how your body breaks down blood glucose. Glucose is sugar from the carbohydrates we eat, whether they are simple carbohydrates (table sugar) or complex carbohydrates (wheat, corn). There are two types of diabetes: Type I is usually found in young children when the body does not produce insulin; Type II, or adult on-set diabetes, is diagnosed when the body is not producing enough insulin. Insulin is a hormone produced by the pancreas that helps turn glucose into energy that “feeds” the muscles and tissues. A diagnosis of diabetes means there is too much glucose (sugar) in the blood. Diabetes is a manageable disease that many people deal with everyday, and in-turn live a long and healthy life.

For people with diabetes, having too much glucose (sugar) in their blood for a long time can cause some serious complications, including foot problems. Foot problems most often happen when there is nerve damage; also called neuropathy, which can lessen your ability to feel pain, heat, and cold. This loss of feeling could mean you may not feel a foot injury. Poor blood flow or changes in the shape of your feet or toes may also cause problems.
Diabetes can cause changes in the skin of your foot. At times your foot may become very dry. The skin may peel and crack. The problem is the nerves that control the oil and moisture in your foot no longer work. After bathing, dry your feet and seal in the remaining moisture with a thin coat of plain petroleum jelly, an unscented hand cream, or other such products. Do not put oils or creams between your toes.

Calluses occur more often and build up faster on the feet of people with diabetes. This is because there are high-pressure areas under the foot. Too much callus may mean that you will need therapeutic shoes and inserts. Never try to cut calluses or corns yourself - this can lead to ulcers and infection. Let your health care provider cut your calluses.

Ulcers occur most often on the ball of the foot or on the bottom of the big toe. Ulcers on the sides of the foot are usually due to poorly fitting shoes. Remember, even though some ulcers do not hurt, every ulcer should be seen by your health care provider right away. Walking on an ulcer can make it get larger and force the infection deeper into your foot. Your health care provider may put a special shoe, brace, or cast on your foot to protect it.

Poor circulation (blood flow) can make your foot less able to fight infection and to heal. Diabetes causes blood vessels of the foot and leg to narrow and harden. The best way to help cold feet is to wear warm socks. Exercise is good for poor circulation. It stimulates blood flow in the legs and feet. Walk in sturdy, good-fitting, comfortable shoes, but don't walk when you have open sores.

People with diabetes are far more likely to have a foot or leg amputated than other people. Many people with diabetes have artery disease, which reduces blood flow to the feet. Also, many people with diabetes have nerve disease, which reduces sensation. Together, these problems
make it easy to get ulcers and infections that may lead to amputation. Most amputations are preventable with regular care and proper footwear.

If you have diabetes, it's essential to make foot care part of your daily self-care routine. That's because "people can develop complications before they realize they even have a problem," says Bresta Miranda-Palma, MD, a professor with the Diabetes Research Institute at the University of Miami Medical School. Proper foot care can help prevent these common foot problems and/or treat them before they cause serious complications. Here are some tips for good foot care.

**Daily Care** - Wash and dry your feet with mild soap and warm water. Dry your feet thoroughly, especially between the toes, an area more prone to fungal infections. Use lotion on your feet to prevent cracking, but don't put the lotion between your toes. Do not soak feet, or you'll risk infection if the skin begins to break down. And if you have nerve damage, take care with water temperature. You risk burning your skin if you can't feel that the water is too hot.

**Weekly Care** - Trim toenails straight across with a nail clipper. You can prevent ingrown toenails if you don't round the corners of the nails or cut down the sides. Smooth the nails with an emery board.

**Your Daily Foot Exam Checklist** - Check the tops and bottoms of your feet, using a mirror if you need it; you can also ask someone else to check your feet for you. When examining your feet, look for cuts/scratches, dry skin, developing corns/calluses, ingrown toenails, blisters. Call your doctor if you notice changes in skin color or temperature, swelling or pain in foot, ankle, or legs, discolored toenails, open sores or other signs of infection, or unusual or persistent foot odor. Also, be sure to get your feet examined at every doctor's visit.
For additional information on diabetes, visit websites www.diabetes.org or www.ndep.nih.gov.

This article has been brought to you by the Central Michigan District Health Department, which serves the residents in Arenac, Clare, Gladwin, Isabella, Osceola, and Roscommon Counties.

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