



Check the temperature of hot surfaces and water. If you have decreased sensation due to neuropathy, you can burn yourself without feeling it.

Trim your toenails to the shape of your toe and file them to remove sharp edges. This can reduce the risk of ingrown toenails or that they will cause a cut elsewhere on your foot.

Wear shoes that fit correctly. Your shoes should not be too tight. If you have a foot deformity, you may need customised shoes. Go for comfort, not style, opting for sports shoes.

Wear loose-fitting, cotton socks. Make sure you wear cotton socks that are not too tight and that you change them daily. Avoid seams and creases, which may reduce circulation or cause rubbing and create trauma.

Wash your feet daily. Give your feet a daily bath in lukewarm water with a mild soap. Dry your feet by patting them gently and apply a moisturising cream or lotion, avoiding between the toes.

If in doubt, seek medical advice.

For more information, please contact:

Health Promotion and Disease Prevention Directorate

2326 6000



healthpromotion.hpdp@gov.mt



DIABETES AND FOOT CARE

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GOVERNMENT OF MALTA
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Diabetes and foot care

Problems affecting the feet are common in diabetes and can be disabling. Minor, preventable injuries may become serious and could even lead to amputation. Understanding common foot problems, recognising them, and knowing how to treat them can help you prevent the most serious complications.

What foot complications are more common in type 2 diabetes?

Neuropathy

Neuropathy (nerve damage) is the loss of sensation in the feet, that affects nearly half of all people with diabetes. Those with diabetic neuropathy may lose the ability to feel pain, increasing the risk of a foot injury. For example, if there is a small stone in our shoes, the nerves sense this and we stop to remove it before we continue walking. With neuropathy, feet become insensitive to pain and you can walk all day on that tiny stone in your shoes without feeling it, potentially causing trauma.

Common symptoms of foot neuropathy include:

Tingling sensation or pins and needles (similar to numbness).

Burning pain.

Dull ache.

Foot deformity

Charcot foot is a severe complication of diabetes. It often results from neuropathy, leading to a gradual weakening of bones, joints, and soft tissues of the foot or ankle. Charcot foot usually begins with a sprain or fracture of the foot or ankle. Due to the nerve damage and lack of sensation caused by type 2 diabetes, the injured foot or ankle often goes untreated. Over time, bone loss leads to changes in the foot structure when areas of the foot collapse, causing deformity.

Vascular disease

Vascular disease, known as peripheral vascular disease (PVD), is a disease of the blood vessels. Diabetes can cause your blood vessels to become thickened, resulting in reduced blood flow in that area. It's a bit like the water pipes and limestone/calcium deposition. When limestone builds up in the pipes, it does not allow a good water flow. The same thing happens when blood vessels are clogged, less blood can get to where it is meant to be, leading to poor blood circulation in the feet and weakened skin, which contributes to the formation of ulcers, poor wound healing, and increases the risk of amputation.

Signs of damage to the blood vessels supplying your feet include:

Sharp leg cramps after walking short distances or climbing stairs.

Pain in your feet, even at rest.

Feet feel cold or look reddish-blue.

Cuts that are slow to heal.

What can I do to lower my risk of foot complications?

If you have diabetes, there are several essential steps you can take to lower your risk of developing foot ulcers. High levels of blood sugar can lead to the growth of certain fungi and bacteria, which affect the skin causing it to break and leading to ulcers.

Ask your doctor for a referral to a podiatrist. This health professional specialises in treating the feet, ankles, and lower legs and may be especially helpful for those with nerve damage.

Inspect your feet daily. Check underneath and between toes and look for breaks, blisters, swelling, or redness, especially at pressure areas on your foot. A mirror may help you see the underside of your foot and your heel.

Quit smoking. Smoking increases the risk of many health complications, including vascular disease and neuropathy, increasing the risk of foot complications.

Do not walk barefoot. Walking or exercising without shoes increases the risk of cuts, blisters and calluses that can lead to more severe problems.