

Podiatry appointments

Always attend your appointments to have your ulcer treated. You may need regular appointments until the wound has healed. Your appointment may be with a district nurse, a practice nurse, a treatment room nurse or your podiatrist.

Antibiotic treatment

You may be prescribed antibiotics if there are signs of infection in the wound or in the nearby tissue. Report any problems you have with the antibiotics (rashes, nausea or diarrhoea) to the person who prescribed them for you. If this person is not available, contact your GP immediately. Make sure you have enough antibiotics to finish the course so your treatment isn't interrupted.

If the infection is spreading, you may need to go to hospital. Here you would have antibiotics straight into your bloodstream to treat the infection quickly. This only happens rarely.

Operations

Sometime if an infection or wound is deteriorating you may need a surgical operation.

If an infection is very severe, an amputation may be needed to save healthy parts of the foot.

If you discover any more problems, or if you are concerned about your foot ulcer, contact your local Podiatry Department or GP for advice immediately. If out of hours you may need to go to the Emergency Department at the Royal Victoria Hospital or your local hospital

Individual advice



Local contact numbers

Multi-Disciplinary Foot Care Service:

Podiatry Department/Foot Protection Service:

GP Clinic:

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Looking after your foot ulcer/ wound

Diabetes – information and advice



Diabetes is a lifelong condition which may cause foot problems. Some of these problems can occur because the nerves and blood vessels are damaged.

This can affect:

- The circulation in your feet (ischaemia)
- The feeling in your feet (peripheral neuropathy).

These changes can be very gradual and you may not notice them. This is why it is essential you receive a foot screening and an assessment by a podiatrist every year. You can then agree a treatment plan to suit your needs.

You have a **foot ulcer**. This means an area of skin has broken down and the tissue under it is now exposed.

About one in ten people with diabetes will develop a foot ulcer at some stage.

A foot ulcer can become infected and the infection may become severe. It is important that you look after your foot ulcer to reduce the risk of an infection.

Controlling your diabetes, cholesterol and blood pressure, as well as quitting smoking, increasing cardiovascular exercise, and controlling weight helps to reduce the risk of these life and limb-threatening problems.

Note: You may be at further risk of cardiovascular problems if you have a family history of heart disease.

As you have a **foot ulcer**, you will need regular podiatry treatment. Your podiatrist will draw up a treatment plan for you.

Podiatry treatment for your foot ulcer

Foot ulcers are sometimes hidden beneath hard skin and can gather dead tissue around them. The podiatrist will need to remove this to help your ulcer to heal. This can cause the ulcer to bleed a little but this is completely normal. Do not try to treat the ulcer yourself.

How to look after your foot ulcer

Do not touch the dressing unless you have been properly shown how to remove and replace it and you have suitable dressings to replace the one you are changing. If the dressing accidentally comes off, cover the wound with a sterile dressing.

Debridement

The word debridement means the removal of dead or infected tissue. Studies show that appropriate debridement of foot ulcers help them to heal faster.

Continue to check your feet every day

Continue to check your feet every day for any other problem areas or danger signs.

Danger signs

You should pay close attention to any of the following **danger signs** when checking your feet look out for:

- Any new pain or throbbing
- Your foot feeling hotter than usual
- Any new areas of redness, inflammation or swelling
- Any discharge
- A new smell from your foot
- Any flu-like symptoms.

Do not get the dressing wet

Getting the dressing wet may prevent healing or allow bacteria to enter the ulcer. This will cause more problems. Dressing protectors are available to keep the dressing dry. These are available on prescription. The dressing protector will allow you to have a bath or shower safely while keeping your dressing dry.

Moisturise the surrounding area of your feet

If your skin is dry, use a moisturising cream every day, avoiding areas of broken skin and the areas between your toes.

Walking and standing

Avoid any unnecessary standing or walking. A wound cannot heal if it is constantly under pressure. Rest as much as possible and keep your foot up to help it to heal. Use anything your podiatrist recommends or gives you to relieve the pressure on your foot. Your podiatrist will advise you of appropriate level of activity.

Footwear

You may be asked to wear a cast (a device to relieve pressure) or a temporary shoe until your ulcer has healed. You should not wear any other footwear until your podiatrist tells you that you can wear your own shoes again.

It is important that you wear these shoes at all times when indoors and outdoors to relieve pressure on your foot. If appropriate the podiatrist may refer you to a footwear specialist.