Foot Care Do's and Don'ts Do:

- Check your feet daily. Feel for skin temperature differences between your feet.
- Wear well-fitting shoes. They should be supportive, have low heels (less than 5 cm) and should not rub or pinch.
- Buy shoes in the late afternoon.
- Wear socks at night if your feet get cold.
- · Elevate your feet when you are sitting.
- Wiggle your toes and move your ankles around for a few minutes several times a day to improve blood flow in your feet and legs.
- Exercise regularly to improve blood flow.

Don't:

- Don't use over-the-counter medications to treat corns and warts.
- Don't wear anything tight around your legs, such as tight socks or knee-highs.
- Don't ever go barefoot, even indoors.
- Don't put hot water bottles or heating pads on your feet.
- Don't sit or cross your legs for long periods of time.
- Don't wear over-the-counter insoles they can cause blisters if they are not right for your feet.
- Don't smoke. Smoking decreases blood flow and healing, and increases the risk of amputation.

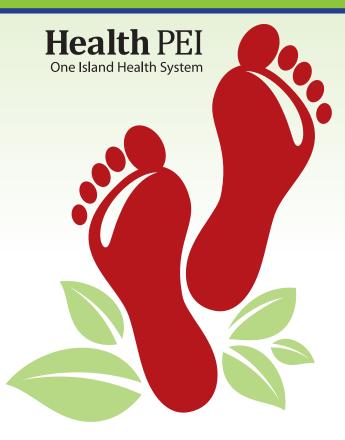
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Selecting Shoes and Socks Shoes:

- Shoes should be comfortable, well-fitting, and match the shape of your foot.
- Sneakers or walking shoes are best.
- You should have your feet measured by a professional. Your feet will change shape as you age.
- Shoes should have a wide and deep toe box.
- Buy shoes with laces or Velcro.
- When buying shoes, wear the type of socks that you will be wearing with the shoes.
- Avoid slip on shoes, high heels, shoes with pointed toes, and sandals.
- If your feet are different sizes buy shoes to fit the larger foot. Shoes should fit 10 to 12 mm beyond the longest toe.
- · Break new shoes in gradually.
- Check shoes before wearing for small stones, ridges, puckered or bunched up areas. You may not feel these things if you have loss of sensation in your feet.

Socks:

- Wear clean socks every day. Cotton or wool are best to absorb sweat.
- Socks should fit well. Avoid tight elastic at the top.
- If wearing knee-high hosiery, make sure it has a wide band at the top.
- Do not wear socks with holes or mended socks.
 They may cause an area of rubbing or pressure.



The High Risk Diabetic Foot

Your foot screen shows that you are at HIGH RISK of developing a diabetic foot complication or ulcer or have developed a complication/ulcer already.

You should make an appointment with your Primary Care Provider within **1 Week** for an advanced assessment to lower the risk of future problems including the risk of amputation.

You should have a repeat screen of your feet by a health care provider every 1-3 Months!

September 2019

Diabetes is a life-long disease with many complications. Over time diabetes can cause damage to your nerves and blood vessels. This can lead to loss of feeling and decreased blood flow in your feet.

15 to 25 percent of people living with diabetes will develop a diabetic foot ulcer. It is important for you to take very good care of your feet to avoid this.

Warning signs such as pain or burning in your feet/ legs or changes to the shape of your feet, may mean there is a change to your risk level or that you are developing a complication. You should make an appointment with your family doctor or nurse to have your feet checked.

Have a doctor or nurse assess your feet if you develop:

- · Cold, painful, or discolored feet.
- Red, hot, swollen feet (with or without pain).
- New or increased pain in your lower legs or feet.
- An open sore or swollen area that is red or draining (with or without pain).



It is important that you:

1. Follow up with your Primary Care Provider in 1-2 weeks for an advanced assessment. Stay off the foot with a sore or ulcer as much as possible. You may need to use crutches or specialized foot wear.

2. Staying Healthy with Diabetes by:

- Keeping your blood sugar levels within target (4-7mmol/L fasting or 5-10mmol/L two hours after eating and A1C less than or equal to 7%).
- Keeping your LDL cholesterol level less than 2 mmol/L.
- Going for regular visits with your health care team.
- Following a healthy meal plan.
- Doing at least 150 minutes of physical activity per week.
- Keeping blood pressure below 130/80 mm Hg.

Note: These targets are based on 2018 recommendations from Diabetes Canada.

Your health care provider may suggest other targets specific to you and your health care needs.

3. Quitting Smoking.

Quitting smoking is the single most important thing you can do for your health! You can discuss this with your family doctor, nurse practitioner, or primary care nurse.

Other resources include: the Smokers' Helpline at 1-877-513-5333 or quit smoking support with a primary care nurse at a primary care centre in your area.



4. Check your feet every day!

Diabetes can cause nerve damage and impair blood flow, making it hard for you to feel an injury to your foot. An unnoticed or untreated foot injury could become infected and lead to serious complications.

Look at the top and bottom of your feet and between your toes every day. Use a mirror or have someone help you if you can't see your feet well. Make an appointment right away if you develop any swelling, redness, new sores, or changes in an existing sore.



5. Wash your feet with warm water and mild soap daily. Be sure to dry your feet and between your toes well. Afterwards apply cream to the top and bottom of your feet. Do NOT apply between your toes.



6. Toenails should be cut straight across with edges smoothed with a file. You should have someone who is properly trained cut your nails.



- **7.** Wear well-fitting **shoes** and clean socks daily.
- **8.** Have your feet checked and your **foot screen** completed at least every 1 to 3 months by your health care provider.

