

## What is a Diabetic Ulcer?

People who suffer from diabetes mellitus, whether with childhood or adult onset, will often be afflicted by other diseases directly related to diabetes. Some of these are venous or arterial insufficiency, neuropathy (loss of feeling in feet), Charcot foot (destruction of joints and bones in foot), loss of moisture or dry skin, infection, osteomyelitis, or gangrene.

Diabetic ulcers are often a by-product of one of these other complications. Most diabetic ulcers form from an injury or pressure. The pressure can be from external causes like ill-fitting shoes or from internal causes like a bony deformity in the foot. What sets a diabetic ulcer apart from other ulcers is its healing capabilities– or lack thereof. Knowing this, it is imperative that diabetic patients take special precautions to prevent injury and ulcer formation.

## What to Look For

Most people's skin is warm to the touch and has a pulse that can be felt but their wound is resistant to healing. This is usually caused by a disruption of blood flow, infection, or both. Diabetic ulcers can appear anywhere on the body but are commonly found on the toes, feet, heels, and ankles. Blood sugar is a key factor in healing a diabetic ulcer.

## What to Do

### Hygiene and Inspection

- Inspect feet daily– use a mirror to see the bottom of your feet and between toes
- Wash feet daily and dry thoroughly– especially between toes
- Apply a moisturizer daily or as needed for dry, cracked feet– avoid putting lotion between toes as this area can become too moist
- Avoid hot water bottles or heating pads on feet– always check temperature with your elbow to prevent burns
- NEVER trim your own calluses or corns and never use over-the-counter treatments
- Trim toenails straight across and never shorter than the length of your toe
- Never walk on hot pavement or sand
- Protect feet with sunscreen
- NEVER go barefoot– inside or outside

# PATIENT GUIDE TO DIABETIC ULCERS

## Socks and Shoes

- Always wear socks with your shoes
- Avoid synthetic materials– 100% cotton will allow feet to “breathe” and wick moisture
- Do not darn socks– replace them
- Buy shoes made of soft leather or athletic-type material that will mold to your foot
- Buy shoes late in the day for the best fit– most people’s feet swell as the day goes on
- Buy shoes with a wide toe box so that toes are not cramped
- Never wear new shoes more than 2 hours at a time until they are “broke in”
- Inspect your shoes before putting on to insure that there are no foreign objects
- Inspect feet after removing your shoes for any red areas or blisters
- Custom molded shoes may be necessary

## When Should I Have Someone Look at My Wounds?

If you are suffering from a diabetic ulcer, you may benefit from the advice of a professional trained in the care of these types of ulcers.

- Do you have a wound that you do not know how you got it?
- Do you have a sore area with increased warmth and redness?
- Have you noticed a blister formation or purplish discoloration?
- Has your wound shown no significant signs of healing or has gotten worse after pressure is relieved?

If the answer to any of the above questions is “yes”, then you should contact your healthcare provider or one of ProCare’s wound clinics for a consultation.