

## General Foot Care

*Athlete's Foot*

*Bunions*

*Fungal Nail Infections*

*Hamstring Exercises*

*Soft Corns*

*Sweaty Feet*

## Diabetes

*High Risk Feet*

*Ulcers*

## Musculoskeletal Concerns

*Heel Pain*

*Plantar Fascia*

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*Local stockists of suitable footwear*

Athlete's foot is a common fungal infection of the skin on the feet. The conditions fungi like best are warm, moist and airless areas of skin, such as between the toes. However it is common for the soles of the feet to become infected too.

Athlete's foot can also be passed on from person to person. For example, this may occur in communal showers used by athletes or swimmers. It may make the skin itchy and flakey and pinky-red in appearance.

## How do I treat Athletes Foot?

- Buy an antifungal cream from pharmacies or supermarkets. There are various types and brands available in various strengths. Ask your pharmacist for advice on the best cream for you.
- Apply the cream all over both feet (even if just one is affected) using sparingly between the toes.
- Continue for 1-2 weeks after the infection has cleared to avoid reoccurrence.

## The following tips may prevent Athlete's Foot recurring

- Wash your feet daily and dry the skin between your toes thoroughly after washing. It is tempting to put socks on when your feet are not quite dry. The soggy skin between the toes is then ideal for fungi to grow.
- Do not share towels. Wash towels frequently.
- Change your socks daily. Fungi may multiply in flakes of skin in unwashed socks. Cotton socks and leather footwear are probably better than nylon socks and plastic footwear which increase sweating.
- Where possible alternate between different shoes every 2-3 days to allow each pair to dry out fully after being worn.
- Wear flip-flops or plastic sandals in communal changing rooms and showers. This prevents the soles of your feet coming into contact with the ground, which may contain flakes of skin from other people.
- Ideally, when at home, leave your shoes and socks off as much as possible to let the air get to your feet. However, this may not be practical for some people.

## Bunions and Minor foot deformities

- Bunions are a deformity of the big toe joint. The joint becomes bony and enlarged and can become very painful if your footwear exerts pressure on the area.
- Commonly when a bunion develops the smaller toes become more clawed making the joints more prominent and predisposed to rubbing in narrow and shallow fitting shoes. Often corns can develop on the joints of the toes due to this increase in pressure.
- Avoid stitching on you shoe/footwear as it can cause further friction and discomfort making walking difficult.

## Your options

- Follow the advice that your podiatrist gives to help manage this condition
- Choose soft leather footwear and WIDER and DEEPER shape toe box.
- Use a bunion shield or soft cover for these areas, often available at your local chemist or on [footcaresupplies.co.uk](http://footcaresupplies.co.uk)
- Any changes in colour/inflammation/pain, then consult a Health and Care Professions Council (HCPC) registered podiatrist.

## Footwear

Cardiff & Vale UHB Podiatry Department provides a service to assist patients who need to purchase extra wide and deep footwear to help accommodate foot deformities.

At Cardiff & Vale Footwear our specialist staff are trained to accurately measure your feet and provide comprehensive advice on the most appropriate footwear to meet your requirements.

We stock a range of extra wide and extra deep shoes on site which can accommodate all but the most difficulty of feet and we can also assist you in making the right choice of shoes from mail order and internet footwear providers.

Please ask your podiatrist for further details.

Fungal infection of nails is common.

The infection leads to thickened and unsightly nails which may be a yellow-brown colour and be crumbly when cut.

## How do you get a fungal nail infection?

- Spread from a fungal skin infection. For example, athlete's foot is a fungal skin infection of the feet. This may spread to the toenails if the skin infection is not treated early.
- A nail that has been damaged is also more likely to become infected.
- You have an increased risk of developing a fungal nail infection if you have various other conditions. For example diabetes, psoriasis, poor circulation, a poor immune system
- Smoking also increases the risk of developing a nail infection.
- In some cases there is no apparent reason. Fungus germs (fungi) are common and an infection can occur 'out of the blue'.

## What is the treatment for a fungal nail infection?

### No Treatment

This is an option if the infection is mild or causing no symptoms.

### Oral Medication

Anti-fungal tablets will often clear a fungal nail infection.

The medication will also clear any associated fungal skin infection, such as athlete's foot.

This medication can only be prescribed by your doctor. These medicines can cause side-effects in a small number of people, so read the packet that comes with the medicine for a full list of cautions and possible side-effects.

They are usually prescribed for about 3-6 months.

### Antifungal nail paint (nail lacquer)

A nail lacquer or varnish that contains antifungal medicine is an alternative for most (but not all) types of fungi that infect nails.

You can buy anti-fungal nail lacquer from pharmacies as well as getting it on prescription.

However, this tends not to work as well as medication taken by mouth and works most effectively on superficial infections. You may need to apply it for up to a year for toenails.

### Nail removal

If other treatments have failed, an option is to have the nail removed by a small operation done under local anesthetic.

## Stretches - Hamstring Muscles

As part of your treatment plan, your Podiatrist has advised that you need to stretch to increase flexibility and reduce muscle tightness.

### Things to remember:

- Stretch twice a day
- Always stretch before and after physical activity.
- Hold your stretch for 20-30 seconds and remember to stretch left and right sides.
- Stretch left and right sides approximately 5 times
- Do **NOT** bounce when stretching.

**CAUTION:** Please only attempt the stretching exercises in this leaflet if you are fit and able to do them safely. Please check with your doctor or HCPC registered podiatrist if you are unsure or require further advice.

### Using a stool

- Stand in front of a waist high stool.
- Place the right foot on top of the stool.
- Make sure that the right leg remains straight.
- Gently lean forward towards the elevated right foot, keeping the right leg straight.
- Always bend from the hip but keeping your back straight.
- Alternate from the right to the left leg.



### Sit and reach position

- Sit on the floor with your legs straight out in front of you.
- Gently reach forward toward your toes and try to keep both legs straight.

### OR

- Sit with your legs bent, and reach forward gently.
- Holding this position try to straighten one leg and then the other.
- If this stretch is too intense straighten one leg at a time.



### Standing

This stretch maybe unsuitable if you suffer/ have suffered from lower back pain.

- Place feet hip width apart with knees slightly bent.
- Bend forward maintaining a straight back as possible.
- Keeping knees slightly bent, reach down to your shins or ankles and hold.
- Begin to slowly straighten legs and hold when you feel the pull in the back of your legs.



Soft corns (Heloma Molle) are found between the toes and often occur when there is excessive moisture between them. They often look white, yellow and rubbery.

## To prevent this:

- Dry well between the toes after bathing/showering.
- Avoid socks made of synthetic material which may make your feet sweat.
- Use a cotton bud to dab a small amount of Surgical Spirit between the affected toes daily to help dry up any excess moisture.
- Separate the toes using padding or a small piece of cotton wool. There are other types of devices available to purchase in chemists or supermarkets which may also help to prevent your toes from rubbing together.
- Do not wear shoes which are too narrow and squash your toes together increasing the risk of rubbing and development of a problem.

### Sweaty Feet (Hyperhidrosis)

Your feet have about 4,200 sweat glands on every square inch - more than anywhere else in your body, apart from your hands. The sweat on your feet does not evaporate as it does on your hand because they are enclosed most of the time. That means that bacteria that live naturally on your skin start breaking down the sweat, making that awful distinctive smell.

- Wear shoes made of leather rather than synthetic materials.
- As much as possible, wear open-toed sandals to let the air circulate.
- Flip-flops also work, but they can be easy to trip on - so if you're not entirely steady on your feet, steer clear.
- Wear cotton socks rather than nylon.
- Wash socks every day, on the hottest cycle, and make sure they're completely dry when you put them on.
- Wash your feet at least daily, and dry them thoroughly checking for any signs of Athlete's Foot between the toes.
- Try wiping your feet daily with surgical spirit (stop if you get skin irritation).

## Why is diabetes a risk to your feet?

Diabetes is a lifelong condition which can cause life-and limb-threatening problems. Some of these problems can occur because the nerves and blood vessels, including those supplying your legs and feet, are damaged.

### This can change:

- the feeling in your feet (peripheral neuropathy); **and**
- the circulation in your feet (ischaemia)

These changes can be very gradual and you may not notice them. This is why it is essential you have your feet checked (screened) every year by a suitably trained health-care worker.

## What is my foot score and what does it mean?

Your foot check has shown that you are at high risk of developing wounds that won't heal or amputation because of your diabetes.

*Your podiatrist will tell you which of the following complications you have.*

- Hard skin on your feet
- Problems with the shape of your toe or foot
- You cannot look after your feet or do not have the help to do so
- You are on renal replacement therapy (dialysis)
- Reduced feeling in your feet
- Reduced circulation to your feet

You should now be referred to a podiatrist for an assessment to agree a treatment plan. The development of foot wounds in people with diabetes is serious as they are linked to an increased risk of heart attacks, strokes, amputations of the foot or leg and early death.

Controlling your diabetes, cholesterol and blood pressure, stopping smoking, increasing cardiovascular exercise and controlling your 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 your feet are at high risk, you will need to take extra care.

## Hard skin and corns

Do not try to remove hard skin or corns yourself. Your podiatrist will provide treatment and advice where necessary.

## Over-the-counter corn remedies

Do not use over-the-counter corn remedies. They are not recommended for anyone with diabetes as they can be highly dangerous and can lead to new wounds and infections.

## Avoid high or low temperatures

If your feet are cold, wear socks. Never sit with your feet in front of the fire to warm them up.

Always remove hot-water bottles or heating pads from your bed before getting in.

## Appointments

It is important that you attend all of your appointments with the Foot Protection Team or specialist podiatrist, as well as your other regular diabetes review appointments. This will reduce the risk of problems developing.

## What should I do if I have a concern or problem with my feet?

If you have any concerns or discover any problems with your feet, contact your Multi-disciplinary Foot Care Team, local Podiatry Department, Foot Protection Team or GP for advice immediately.

If they are not available, go to your nearest accident and emergency department. Remember, any delay in getting advice or treatment when you have a problem can lead to serious problems.

*This leaflet is for all people with a diagnosis of diabetes, including children over the age of 12.*

*Based on the original leaflet produced by: The Scottish Diabetes Group – Foot Action Group, with help from service users. Owned by the College of Podiatry © Published date: March 2018. Review date: March 2023.*



## What is a foot ulcer?

The development of foot ulcers in people with diabetes is serious, especially if they become infected, as they are linked to an increased risk of heart attacks, strokes, amputations of the foot or leg and early death.

A foot ulcer can become infected, which increases the risk of amputation and, if not treated quickly and effectively, the possibility of early death. If the circulation to your feet is poor, this further increases these risks.

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

People with foot ulcers will need to ask their Diabetes Team about non-weight-bearing cardiovascular exercise so as not to risk further harm to the damaged foot.

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

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

## What should I do if I have a concern or problem with my feet?

During your treatment for this ulcer, if you notice any of these danger signs you must contact a member of your Multi-disciplinary Foot Care Team, local Podiatry Department or GP for advice as soon as possible (within 24 hours).

- **Is there any pain or throbbing?**
- **Does your foot feel hotter than usual?**
- **Are there any new areas of discolouration, inflammation or swelling?**

## Pressure relief

Use any device which your podiatrist or orthotist provides to help relieve the pressure on your foot.

You may be asked to wear a cast or walking boot or special shoe until your ulcer has healed.

You should wear this at all times when putting weight on your foot.

Keep checking both feet between appointments with your specialist foot service, following the care and advice you have been given about foot protection. Make sure you wear the correct footwear on the other foot as there will be more pressure on this foot, which could cause a further problem.

You can get advice from your specialist diabetes foot service about weight-bearing, and aids such as crutches, sticks and wheelchairs that help keep the weight off your foot.

## 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 or community nurse, a practice nurse, a treatment room nurse or your podiatrist.

## Antibiotic treatment

You will be given antibiotics if there are signs of infection in the wound or in the nearby tissue. Report any problems you have with the antibiotics (for example rashes, nausea or diarrhoea) to the person who prescribed them for you. If this person is not available, contact your GP immediately for advice. Do not stop taking your antibiotics unless the person treating you or your GP tells you to do so. If the infection is getting worse (you have increased or spreading redness or pain or develop flu-like symptoms) you may need to go to hospital immediately to help protect your limb and even save your life.

## Operations

Sometimes if an infection becomes severe, you may need an operation to clean out the wound. If an infection is very severe, an amputation may be needed to save healthy parts of the foot. If your circulation is reduced, you may be referred for an operation to increase blood supply to the ulcerated area.

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## Heel pain

Please take time to read this leaflet and the stretching exercises enclosed and follow the advice and guidance provided.

A high percentage of patients are able to manage heel pain very effectively with the use of arch supports and stretching exercises.

## What causes heel pain?

There are several causes of heel pain but perhaps the most common is Plantar Fasciitis (pronounced Plan-tar-fashee-eye-tis).

The plantar fascia is a broad thick band of tissue that runs from under the heel to the ball of the foot. In certain individuals the plantar fascia can become over-stretched, resulting in pain around its attachment at the heel and into the arch of the foot.

*The following are common factors often associated with Plantar fasciitis:*

- A change in activities
- Feet which roll inwards
- Walking or standing for long periods
- Being overweight
- Very tight calf muscles
- Footwear which doesn't provide adequate arch support
- Sporting activities such as running
- A sudden injury

## What are the signs and symptoms?

- Pain, usually under the centre or inside of the heel, often radiating into the arch of the foot.
- The pain is generally worse first thing in the morning as the Plantar Fascia tightens up over night. This generally eases off with activity.
- As the condition becomes more severe the pain can increase throughout the day if activity continues.
- Pressing or stretching the Plantar Fascia may be painful.
- Occasionally the outside of the heel may become painful. This is caused by walking on the outside of the heel to avoid the pain.
- Similarly pains may occur in the other foot or elsewhere, in the knee or back due to altered gait.

## Will the pain go on its own?

Sometimes the pain will settle after a while as activities which bring on the pain are reduced.

However, Plantar Fasciitis can frequently become chronic if left untreated and may last for several years. Help should always be sought if the pain persists as treatment is often simple and effective.

## What can I do for my pain?

- Modify your activity: avoid activities which bring on the pain wherever possible. For example prolonged weight bearing activity such as running on a treadmill.
- Arch supports/Orthotics: a well shaped arch support is often extremely effective at reducing the over stretching of the Plantar Fascia. They should be worn for at least 8 hours a day and are most effective when

worn inside good supportive shoes. Suitable arch supports, such as Orthoheel are commercially available from Boots and other outlets.

- Stretching exercises: Controlled stretching of the calf muscles and the plantar fascia before getting out of bed and a few times each day is well known to help many patient. (*See stretches leaflet.*)
- Massage: although it can be uncomfortable at first, firm massage of the Plantar Fascia with your thumb can improve levels of comfort. Pull the big toe back to tension the Fascia and to help stretch it. (*See stretches leaflet.*)
- Change footwear: spend more of your daily activity in good supportive shoes such as trainers. Avoid flimsy slip-on shoes.
- Taping: athletic tape can be purchased at most pharmacies. When applied to the arch of the foot in strips it can help rest and support the Plantar Fascia.
- Weight control: if you are overweight, losing body weight will reduce the amount of stress your feet have to cope with.
- Anti-inflammatories and analgesics: pain can sometimes be eased with use of medication such as Ibuprofen or Paracetamol. However you should discuss this with your doctor first as some people are unable to tolerate this sort of medication.

## What if the pain persists?

The treatment outlined in this leaflet normally takes time to have an effect so you need to persevere for at least 6-8 weeks.

However, if after this time there is no sign of any improvement you will need to seek help from your HCPC registered Podiatrist.

## Useful links

[www.heelfitkit.com](http://www.heelfitkit.com)

[www.healthy-footwear-guide.com](http://www.healthy-footwear-guide.com)

[www.heelspurs.com](http://www.heelspurs.com)

[www.pediroller.co.uk](http://www.pediroller.co.uk)

[www.heel-that-pain.com](http://www.heel-that-pain.com)

[www.patient.co.uk](http://www.patient.co.uk)

## Stretches - Plantar Fascia

As part of your treatment plan, your Podiatrist has advised that you need to stretch to increase flexibility and reduce muscle tightness.

### Things to remember:

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- Always stretch before and after physical activity
- Hold your stretch for 20-30 seconds and remember to stretch left and right sides
- Stretch left and right sides approximately 5 times
- Do NOT bounce when stretching

**CAUTION:** Please only attempt the stretching exercises in this leaflet if you are fit and able to do them safely.

Please check with your doctor or HCPC registered podiatrist if you are unsure or require further advice.

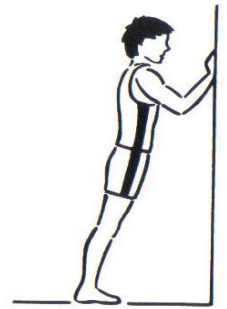
## 1. Plantar fascia stretch

- Standing in the bare foot lunge, position your hands against the wall.
- Gently press the ball of your foot furthest away from the wall into the ground.
- At the same time bend your knee downwards and forwards to encourage flexion of the ankle.
- Increasing the bend at the knee and ankle will increase the stretch.



## 2. Wall lean (calf muscle stretch)

- Standing in the bare foot lunge, position your hands against the wall.
- Gently press the ball of your foot furthest away from the wall into the ground.
- At the same time bend your knee downwards and forwards to encourage flexion of the ankle.
- Increasing the bend at the knee and ankle will increase the stretch.
- Stand facing the wall with both feet together keep your arms straight, place both hands on the wall shoulder width apart.
- Keeping both legs straight move both feet further away from the wall, decrease the stretch move your feet closer to the wall.
- Always keep both heels on the ground.



## 3. Deep Calf and Achilles (using a stool or chair)

- Place a low stool/chair against a wall.
- Put the right foot in the centre of the stool and the left foot on the floor.
- Position yourself into the lunge position maintaining that your foot is flat on the seat.
- Place both hands on your hips.
- Lean your knee away from you in a forward direction over the toes.
- Alternate between each leg.



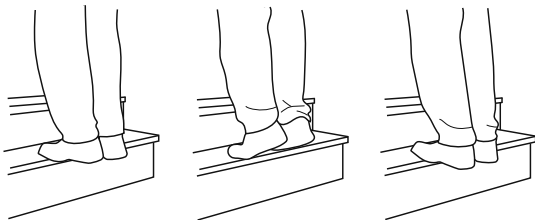
## 4. Calf lean

- Face a wall in a half lunge position with the right foot pointing towards the wall and the knee bent.
- Bend the back leg slightly with the foot also pointing towards the wall.
- Place your hands on the wall, bending your arms.
- You should feel the stretch in the back leg in the calf muscle.
- Keep both heels on the floor when stretching.



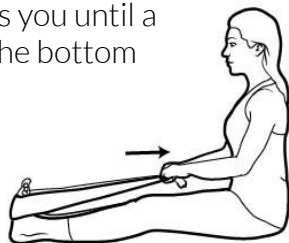
## 5. Stair

- Stand on the bottom step of the stairs with your heels overhanging the edge.
- Use the rail for support.
- Lower your heels until a stretch is felt in the calf.
- Hold the stretch for 20-30 seconds then relax.
- Repeat the stretch 5 times.



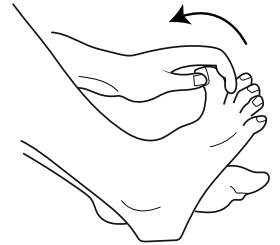
## 6. Long sitting stretch

- Sit on the floor with your legs stretched out in front of you.
- Loop a towel around the top of your affected foot.
- Pull the towel towards you until a stretch is felt across the bottom of your foot.
- Hold for 30 seconds then relax - repeat 10 times.



## 7. Toe stretch

- Sit on the floor with your knee bent and foot flat on the floor.
- Pull the toes back on the injured foot until stretch across the arch is felt.
- Hold for 10 seconds then relax and repeat 10 times.
- If you have trouble getting down to your foot you can bend the toe back against the wall. This will also stretch the calf.
- Ensure to find something firm to hold on to and provide support.



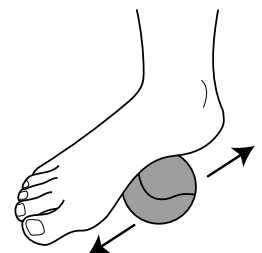
## 8. Plantar fascia stretch and massage

- Rest your ankle on your opposite knee
- Grab your heel with the opposite hand and use your other hand to pull back at the toes until you feel a stretch within the arch.
- Use your thumb to apply firm massage along the length of the arch for up to 5 minutes.
- This may feel uncomfortable to start with so a little and often approach may be best.



## 9. Plantar fascia massage

- Roll the foot back and forth over a can or ball as in the diagram for 3-5 minutes daily.
- Repeat 2-3 times per day.
- Freezing the can will enable cold therapy to be applied to help reduce inflammation but care should be taken not to overdo this. *Five minutes of cold therapy a day is usually enough.*



# Footwear Outlets

Here is a list of local footwear shops that stock suitable footwear:

Recommended footwear suppliers		
<b>ACE Feet in Motion</b> Sanatorium Rd, Cardiff CF11 8DG <a href="http://www.feetinmotion.co.uk">www.feetinmotion.co.uk</a>   02920 370672	<b>Ability Living and Mobility</b> 236a Cowbridge Road East, Canton, Cardiff <a href="http://www.ability.co.uk">www.ability.co.uk</a>   02920 667272	
<b>Clarks</b> Offering a 6 point fit check, please call to book in advance. St David's Centre, Unit UG17, Cardiff CF10 2EL <a href="http://www.clarks.co.uk">www.clarks.co.uk</a>   02920 667923	<b>Clarks</b> Children's footwear also available, 9 point fit check offered, please call to book in advance. 64-66 Queen Street, Cardiff CF10 2GQ <a href="http://www.clarks.co.uk">www.clarks.co.uk</a>   02920 390619	
<b>Hotter</b> St David's Centre, 17 Cathedral Walk, Cardiff CF10 2EQ <a href="http://www.hotter.com">www.hotter.com</a>   02920 220178	<b>Toetal Footcare</b> 232 Caerphilly Road, Cardiff CF14 4NS <a href="http://www.toetalfootcare.co.uk">www.toetalfootcare.co.uk</a>   02920 628306	
<b>Ability Living and Mobility</b> 282 Holton Rd, Barry CF63 4HW <a href="http://www.ability.co.uk">www.ability.co.uk</a>   01446 733310	<b>Ableworld Cardiff</b> Only stocking slippers. 4 Penarth Road Retail Park, Cardiff CF11 8EF <a href="http://www.ableworld.co.uk">www.ableworld.co.uk</a>   02921321072	
<b>Snowdrop Independent Living</b> Home visits considered on an individual basis – <i>please call to enquire.</i> Crown House, Windsor Road, Cogan CF64 1JG <a href="http://www.snowdropindependentliving.co.uk">www.snowdropindependentliving.co.uk</a>   02920 707111		
Footwear Catalogues		
<b>DB Wider fit shoes</b>	01933 311077	<a href="http://www.widerfitshoes.co.uk">www.widerfitshoes.co.uk</a>
<b>Cosyfeet (wide or swollen feet)</b>	01458 447275	<a href="http://www.cosyfeet.com">www.cosyfeet.com</a>
<b>Padders</b>	01536 534977	<a href="http://www.padders.co.uk">www.padders.co.uk</a>
<b>Sandpiper Shoes</b>	08008 223133	<a href="http://www.sandpipershoes.com">www.sandpipershoes.com</a>
<b>ACE feet in motion</b>	02920 370672	<a href="http://www.feetinmotion.co.uk">www.feetinmotion.co.uk</a>
<b>Hotter</b>	02920 220178	<a href="http://www.hotter.com">www.hotter.com</a>
<b>Snowdrop Independent Living</b>	02920 707111	<a href="http://www.jamesinglis.com">www.jamesinglis.com</a>

## NHS Footwear Service

Having difficulty buying footwear from the above suppliers? During your next appointment ask about our Cardiff and Vale NHS footwear service run at Park View Health Centre in Ely.  
*Please note this is not a free service and is available by appointment only.*