

Diabetes is a disease which in the long term can affect your feet, in two different ways or in combination. Your circulation may be reduced and/or you may lose feeling in your feet. Either of these can lead to long term complications with an increased risk of developing a foot ulcer which may result in an amputation.

Ways to try and prevent complications:

- Keep as active as possible
- Stabilise your diabetes
- Look after yourself in general; reduce your alcohol intake, stop smoking

Once you have been diagnosed with diabetes you will automatically be referred to the Podiatry Department in your local area for a diabetic foot screening (assessment). At this appointment you will be asked about your medical history, any medication you take and if you have any concerns regarding your feet.

The podiatrist will then check your circulation in the following way:

- Pulses
- Looking for any skin tone changes
- Temperature of the skin
- Asking about any intermittent claudication (cramping in legs when walking)
- Checking for nail and hair growth

Check for any loss of feeling (neuropathy):

Testing if you can feel some light touch
Asking about any numbness / tingling / burning

Once this has been done you will be given a risk stratification to let you know how likely you are to develop a foot ulcer. This is done using a national system and you will be given verbal and written information at this point.

Low Risk means that you have no foot problems and may not need to see the podiatry service again unless you develop any problems. If you are unable to self care for your nails and have no-one to help you with this you may be seen by our podiatry assistant to help with this.

Your feet will be screened on a yearly basis by your practice nurse.

Moderate Risk - you may have:

- Lost some of the feeling in your feet
- Have reduced circulation
- Have significant hard skin
- A change in your foot shape
- Reduced vision
- Be unable to self-care for your feet and have no-one who can help you with this
- You will be seen routinely by the podiatry department for foot care. As well as having your foot assessment carried out on a yearly basis.

High Risk - you may have:

- Lost some of the feeling in your feet
- Have reduced circulation
- Have significant hard skin
- A change in your foot shape
- Reduced vision
- Be unable to self care for your feet and have no-one who can help you with this
- Had previous foot ulcers
- Have had an amputation
- You will be seen frequently by the podiatry department for foot care and have your foot assessment carried out on a yearly basis.
- You will have rapid access to podiatry with any problems.

Active Foot Disease - you will have some or all of the following:

- Foot ulcer
- Had a previous foot ulcer (s)
- Lost some of the feeling in your feet
- Have reduced circulation
- Have significant hard skin
- A change in your foot shape
- Reduced vision
- Be unable to self care for your feet and have no-one who can help you with this
- Have had an amputation
- You will be seen intensively by the podiatry department for wound care and have your foot assessment carried out on a yearly basis.
- You will have rapid access to podiatry with any problems.

Contact Details:

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