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# **Diabetic Foot Management: A Patient Guide**

Diabetes can lead to poor circulation and reduced nerve sensation (neuropathy) in the feet. Without proper care, minor foot problems can progress into serious complications, including infections, ulcers, and even amputations. Consistent foot management is essential for prevention and early detection. At SoCal Foot and Ankle Doctors, our goal is to protect your feet, prevent wounds and ulcers, and preserve your limbs.

## **Daily Foot Care Routine**

- Inspect your feet daily using a mirror or have someone help you. Look for:
  - Cuts, blisters, or sores
  - Redness, swelling, or warmth
  - Ingrown toenails or areas of pressure
- Wash feet daily with warm (not hot) water and mild soap.
- Dry thoroughly, especially between the toes.
- Moisturize your feet daily—but avoid lotion between toes to prevent fungal infections.

#### Nail & Skin Care

- It is strongly recommended to have your toenails trimmed by your podiatrist rather than at a nail salon or spa. Pedicures can increase the risk of cuts, infections, or worsening of existing foot problems.
- Trim toenails straight across; avoid cutting into corners.
- File edges gently to prevent ingrown nails.
- Do not treat corns or calluses yourself—avoid over-the-counter pads or sharp tools.
- Avoid using heating pads or hot water bottles on your feet.

### **Footwear & Socks**

- Wear well-fitting shoes with a wide toe box—avoid tight or pointed shoes.
- Break in new shoes slowly and inspect feet for signs of irritation.
- Avoid walking barefoot, even at home.
- Choose seamless, moisture-wicking socks (cotton or diabetic-specific materials).

### When to See Your Doctor or Podiatrist

- A new wound, ulcer, or blister
- Swelling, redness, or signs of infection
- Foul odor, drainage, or discoloration
- Pain, numbness, or burning sensation
- Ingrown nails or nail infections

Regular visits to your podiatrist are one of the most effective ways to prevent complications. Your podiatrist can detect pressure points, recommend appropriate shoes or inserts, and provide proactive care to avoid ulcers and future amputations.

For patients with moderate to high risk, routine foot exams every 2–3 months are recommended. Low-risk patients should be seen at least annually.

### **Lifestyle Support**

- Keep blood sugar levels under control to prevent nerve and vascular damage.
- Quit smoking—smoking significantly reduces blood flow to the feet.
- Exercise regularly to improve circulation (walking, swimming, stationary biking).
- Maintain a healthy weight to reduce pressure on your feet.