

# Diabetes Foot Health

Engagement and Empowerment to Self-care



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We hope you will find this education session enjoyable, useful and informative. The session has been co-developed in partnership with:

- Our patients, Diabetes UK and EPP

It is supported by the Welsh Government advisory Group:

The Bevan Commission, Cardiff and Vale Health Board, and the Podiatry Department.

# STANCE

## Diabetes Foot Health Engagement and Empowerment to Self-care

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We know that looking after your feet when you have diabetes is very important. But, we also know that YOU ARE the most important person in preventing long term complications to your feet from diabetes.

This session has been developed to start to give you the information you need to help you achieve your healthy feet.

You are here because you have diabetes and we would like to give you the chance to learn more about how it affects your feet, and what you can do to reduce the chance of diabetic foot disease.

This is about helping YOU look after YOUR feet. Three hours isn't a very long time to know how and what you can do to look after your Diabetes and everything it can affect, including your feet, eyes, kidneys and heart.

With this in mind take a few minutes to think about what you would like to know about diabetes and your feet.

On average, people with diabetes spend three hours a year with a healthcare professional

For the remaining 8,757 hours they manage their diabetes themselves

Diabetes self-management education helps people to stay healthy, live well and avoid life threatening and costly complications

What are your concerns about diabetes and your feet?	Are you worried about your feet?

## Introduction

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Some people feel overwhelmed and have no confidence or don't know how to look after their feet when they have diabetes.

After this session you will have more confidence in managing your own care and you will know how to look after your own feet.

## What are the benefits to you if you look after your own feet?

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So this is the difference between people who are involved, engaged and participating in their own foot health and care.

Those who are: INVOLVED, ENGAGED AND PARTICIPATING	Those who are not: INVOLVED, ENGAGED AND PARTICIPATING
<ul style="list-style-type: none"><li>• Are more likely to adopt healthier behaviours</li><li>• Have better clinical outcomes</li><li>• Lower rates of hospitalisation</li><li>• Are more satisfied with the service they receive</li></ul>	<ul style="list-style-type: none"><li>• Are more likely to attend accident and emergency departments</li><li>• Are more likely to be hospitalised or to be re-admitted to hospital after being discharged</li><li>• Are less satisfied with the service they receive</li></ul>

Simply the fact that you are here in the first place and taking part in the session means you want to be involved with your health and that is a very positive step. Let's get things put in place now to help prevent problems in the future.

## What is Diabetes?

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Diabetes can be referred to as a chronic disease characterised by high levels of sugar (glucose) in the blood.

There are a number of different types of diabetes and a number of different reasons why someone may get diabetes but there are 2 main types.

## Type 1 or Type 2 - What's the difference?

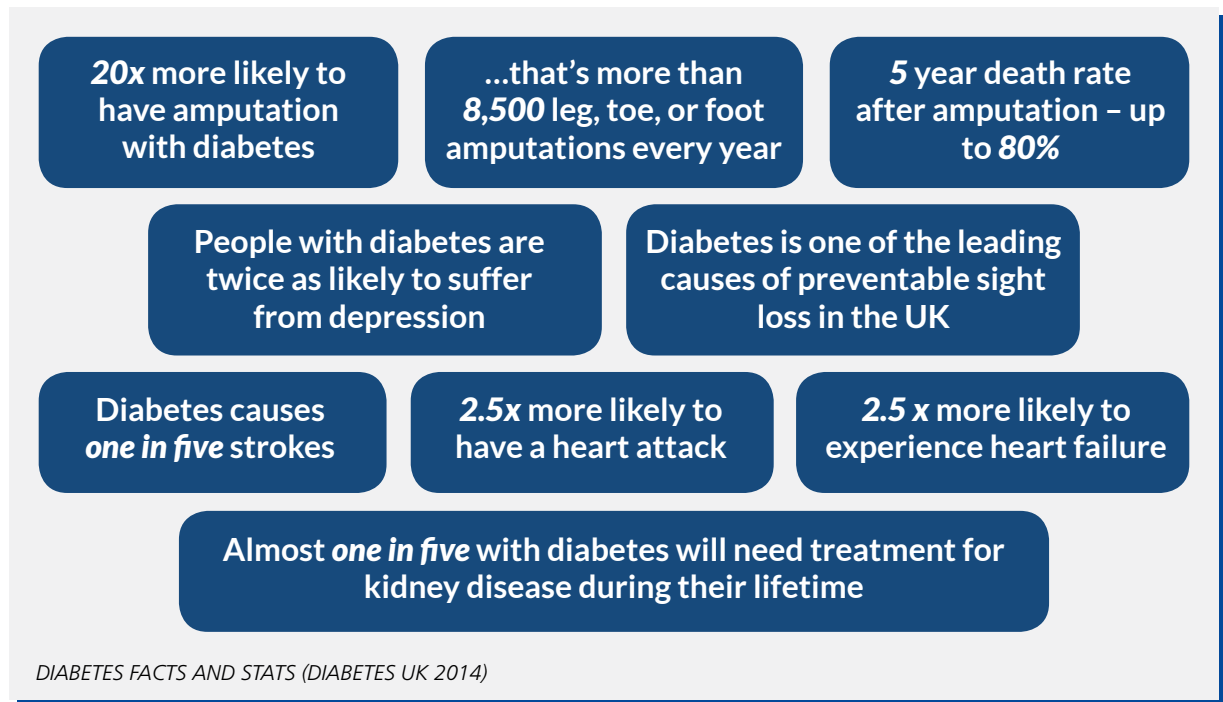
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Type 1	Type 2
Body unable to make any insulin to get the glucose into the cells. <a href="https://www.diabetes.org.uk/diabetes-the-basics/what-is-type-2-diabetes">https://www.diabetes.org.uk/diabetes-the-basics/what-is-type-2-diabetes</a> <a href="https://youtu.be/4SZGM_E5cLI">https://youtu.be/4SZGM_E5cLI</a>	Not enough insulin made in the body to get the glucose into the cells . Body unable to use the insulin to get the glucose into the cells. <a href="https://youtu.be/4SZGM_E5cLI">https://youtu.be/4SZGM_E5cLI</a>

As far as Diabetic Foot Disease is concerned it does not matter which type you have. If your blood sugar is high the effects on your body are exactly the same.

Now for some straight talking. We want to tell you some facts about what diabetes can do to your body if it is not managed properly.

# Diabetes and my body



## How do you feel about this information, does it make you feel concerned or anxious?

Lots of things are in place to help you prevent these problems from happening. There is a leaflet in your resource pack which states the 15 annual checks you may need when you have diabetes. These include your annual foot checks.

There are many simple things that you can do to help reduce the risk of the complications we have just looked at. One very important skill is to get as much information about your condition as you can.

We will take you through 4 key messages which will help you reduce the risk of ulceration and amputation to your feet.

## Key Messages

1. Good HbA1c (blood glucose) control is best for your feet.
2. Attend your annual foot screening and know your RISK classification
3. Importance of regular foot self care
4. How to get help when you need it

Let's look at the 4 key messages in more detail.

## Good blood glucose control

- We measure the amount of glucose in your blood using a test called HbA1c
- Your HbA1c will give a guide as to what your average blood glucose levels are over a 3 month period
- Normal HbA1c = less than 48mmol/mol (6.5%)
- The results of your HbA1c allows the Diabetes team to discuss change in your care and medication
- Anyone involved in your care can discuss your HbA1c with you

There is a conversion chart in your resource pack, if you prefer the % values rather than the mmol/mol to review your HbA1c?

### What can happen if we DON'T have good glucose control?

We will start with Poor Circulation, also known as Peripheral Arterial Disease or PAD.

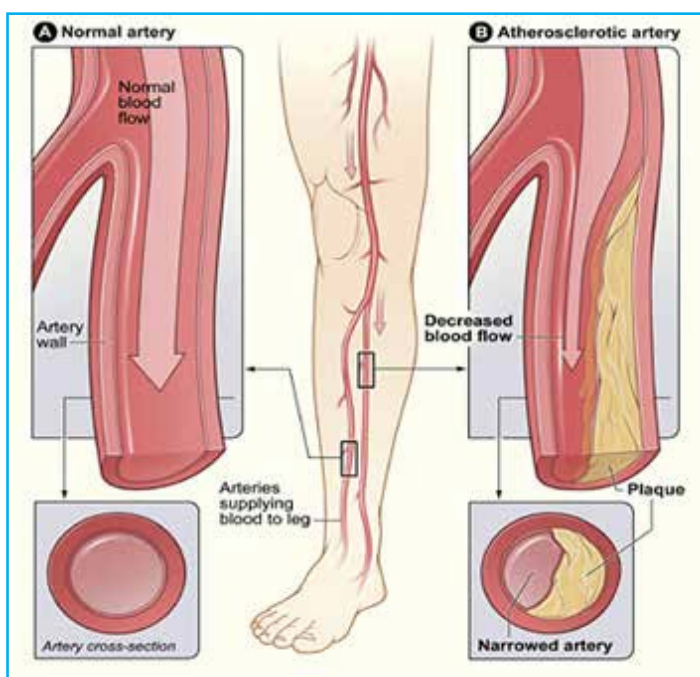
## Poor circulation (Peripheral Arterial Disease)

- High HbA1c levels can cause damage to the blood vessels and reduce blood circulation in your legs and feet
- Other things that affect blood flow (Risk Factors) also include:
  - Smoking
  - High Cholesterol
  - High Blood pressure
  - Obesity
- A good blood supply is essential to help any cuts or grazes on your feet heal

These risk factors are very important when you have diabetes.

They can contribute to the damage of your blood vessels and make things like stroke, heart disease, kidney disease and toe and foot amputation more likely.

The trouble with PAD is that you may not experience any symptoms with it. That is why you have your circulation tested once per year.



## Nerve Damage (peripheral neuropathy)

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- High HbA1c also causes damage the nerves in the feet and legs
- Reduced or altered sensation in your feet
- Dryness
- Change of foot shape

### Signs of Peripheral Neuropathy:

- Freezing
- Tingling
- Hyper Sensitivity
- Burning Sensation
- Sharp Jabbing Pain
- Loss of Feeling
- Numbness



Some of you may have experienced these symptoms. We often hear people describe a loss of feeling, numbness, sharp jabbing pain, burning sensation, tingling, freezing, or a hyper sensitivity where even the lightest of touch is painful. These sensations can improve with good blood glucose management.

The trouble with the loss of feeling is that you may not feel when you damage your foot. You may have a cut or a blister that you are not aware of, which could become infected if not looked after.

Once there is a loss of feeling, this sensation will not return. This is why it is very important to check your feet daily or more often if you are doing more walking, wearing a different pair of shoes, on holiday or if your feet are swollen.

**To summarise, Foot Complications in people who have diabetes are more likely to occur in people who have an ongoing high HbA1c or high blood glucose/poor control.**

## Foot Complications

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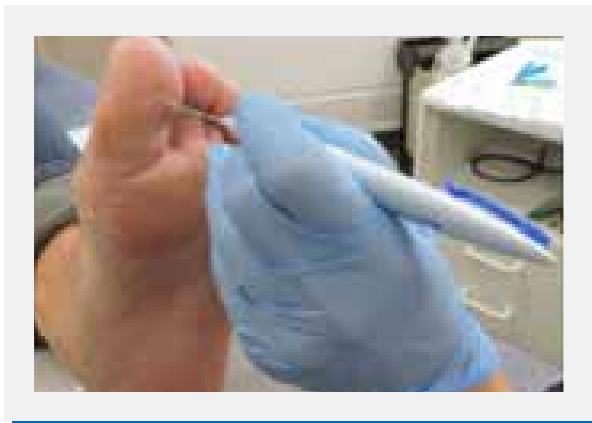
- Ongoing high HbA1c (blood glucose) levels can cause **BLOOD** vessel and **NERVE** damage
- This damage can lead to ulceration or wounds on your feet which can lead to infection, hospitalisation and amputation like we saw in the video
- High HbA1c (blood glucose) levels can also increase risk of infection which can slow down wound healing.

Now let's look at Key Message 2.



## Attend your annual Diabetes Foot Check

- Assess your foot shape and condition
- This includes checking your circulation and sensation



Your foot risk classification will be one of the following categories - that's the risk of you getting a foot ulcer because of your diabetes.

## Know your risk classification

After your annual Diabetes foot check you will be given a risk classification: (your level of risk of foot problems occurring).

**Low Risk**

**Moderate Risk**

**High Risk**

**Active**

If you have a risk classification of low, this means that your circulation and touch sensation are normal and you will be reviewed at your GP Surgery annually.

If you have a risk classification of Moderate or High you will be referred to the Podiatry team for further assessment.

If you have an Ulcer on your feet that means you have Active foot disease and you will be referred urgently to the podiatry wound care team.

Now let's look at Key Message 3.

## Importance of regular foot care - Do's

- ✓ Check your feet every day for changes in colour, breaks in the skin and corns and callus
- ✓ Wash your feet daily and ensure you dry well between your toes
- ✓ Apply a foot cream to your feet daily, avoid applying between your toes
- ✓ Instead of cutting your nails, file them weekly
- ✓ Wear shoes that fit well, broad fitting, deep and rounded toe area and have a fastening

You can buy foot cream in your local pharmacy or supermarket. Ideally foot cream should contain UREA - it will say this on the ingredients.

Avoid putting the cream between your toes as this can make the skin soggy and lead to a fungal infection.

Filing is a great way of managing your nails without worrying about doing damage to the skin around the nail. You can use an emery board or a metal diamond deb file which are available in chemists.

There is a footwear advice leaflet is available in your resource pack.

## Importance of regular foot care - Don't's

- ✗ Soaking can cause the skin to become soggy, fragile and more prone to damage
- ✗ Do not use blades yourself or use corn plasters
- ✗ Do not use the sharp edge of the scissors to clean the sides of your nails
- ✗ Do not walk barefoot or put your foot near hot radiators or hot water bottles

Blades and corn plasters can damage the skin, avoid using any sharp instrument that could break the skin and lead to infection. Some people like to use a nail brush or an old toothbrush to keep the side of their nails clean.

Ensuring you have slippers or shoes on all of the time can help protect your feet from any sharp objects of knocking your toes.

### Finally we have Key Message 4.

This is a very important message and is about you getting help at the right time and when you need it. You can get advice from your Pharmacist, Nurse, Health Care Support Worker, Doctor, Private Podiatrist or NHS Podiatrist.

## How To Get Help When You Need It

You should do this urgently if you have a red, warm swollen foot, if there is a break in the skin or any discharge (or oozing) or if you feel unwell.

If you use a Private Podiatrist, you should check they are qualified to provide Podiatry treatment and advice. Often the Health & Care Professions Council (HCPC) logo will be on their advert or you can check on the online HCPC register.

There is a leaflet in your pack explaining this.

Now we will take a look at how diabetes affects our feet.

### Who can help?

- Pharmacist
- Doctor
- Nurse
- Health Care Support
- Worker
- Private Podiatrist\*
- NHS Podiatrist

### What are the danger signs?

- Is your foot red, warm or swollen?
- Is there a break in the skin or any discharge (or oozing) onto your socks or stockings?
- Do you feel unwell?

\* More information about this is on page 24



**WARNING**, the next pages contain images of foot wounds so please be prepared, but it's important to know what you are looking for or even better, trying to stop.

## How Diabetes affects your feet

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### Heel wound:

Patient has loss of feeling in the feet, the foot shape had changed and because of high HbA1c the wound was not healing.



### Toe wound:

Patient has loss of feeling in the feet, the toe joints were rubbing together and has caused a wound. There is infection in this toe which is now in the bone.



It's important to remember that it's not just about looking after your feet daily that can help prevent wounds like this.

It is really important to keep your blood glucose levels within target range and take the following steps to help prevent problems.

## Steps to reduce problems with your feet

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- Keep your blood glucose levels within your target range
- Stop smoking
- Attend diabetes checks and other medical appointments
- Manage your weight
- Eating a healthy balanced diet
- Be physically active, aim for 150 minutes a week
- Check your feet daily
- Wear appropriate footwear
- Take any medications as prescribed

Help me quit is a group which provides support to help you stop smoking.

There are courses to go on to help you manage your health and well-being in your area and you have further information in your resource pack.

There are lots of ways to exercise without having to go to the gym. Walking to the post box, housework or the shop can be included in this time.

Remember you can have a medication review with your local pharmacist free of charge. You should speak to your doctor or pharmacist before stopping any medication that has been prescribed.

## POCKET MEDIC

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I'd like to introduce you to an information resource called Pocket Medic. It can be accessed from your phone or computer to view many different short films about diabetes.

You don't have to sign up or make an account which often puts people off. You can just type the address straight into your phone, iPad, laptop or computer to watch the films.

There is a leaflet in your resource pack showing you how to access the films.

The films are only about 5 minutes long and you can watch which ever you like.

### Videos include:

- What is Diabetes
- What can I eat?
- The Eat well Guide
- Medication and Diabetes
- Retinal Screening
- Looking after your Feet
- Understanding your feet
- Care of the High Risk Foot
- Diabetes and hospitals
- So... what can I do?
- Driving and diabetes
- Stop Smoking
- And more...



People who spend time watching these films learn valuable information that helps them reduce their HbA1c and reduce their risk of getting diabetes complications.

# Common Foot Problems

## Fungal infections

Include itchy, cracked and scaly skin and redness.



Discoloration, thickening, change in texture, ridges or a distorted shape, brittle or crumbly nails.



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 flaky 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.

## Nail problems

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Convoluted or curling nail.



Ingrowing toe nail, when the nail breaks the skin of the toe.



Sometimes caused by damage to the nail or fungal infection.



## Cutting and filing toe nails

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Filing toe nails is best, however:

### How do I cut my toe nails safely?

Ensure that you have the right tools for the job before starting to cut your toenails. Podiatrists use nail 'nippers' which can be purchased in most chemists or supermarkets.

- Try to cut your nails following the natural curve of the toe.
- Do not cut your nails too short- a small crescent of nail should still be visible at the end of your nails after cutting them
- Do not cut or poke anything down the side of the toe.
- Use a soft nail brush to keep your nails clean

### How do I file my toe nails safely?

Often filing nails regularly can keep them to a manageable length.

- Use a good quality nail file ('Diamond Debs' are commonly used in the Podiatry Clinic)
- Hold the file over the nail and pull it gently away from you
- Do not file the nails too close to the skin
- Carry this out 1-2 times weekly to keep nails manageable



## Corns and callus

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Occurs over areas of high pressure from footwear or walking; the outer layer of skin thickens as a reaction to the pressure.



## Pressure damage (corns and callus)

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Occurs over areas of high pressure from footwear or walking; the outer layer of skin thickens as a reaction to the pressure.



Corns and calluses on the feet are thickened areas of skin that can become painful. They are caused by excessive pressure or rubbing (friction) on the skin.

**The most common causes are:**

- Poorly fitting shoes - your foot shape not coinciding with the shape of the shoe/ slipper causing rubbing
- Your foot function
- Prominent joints in your feet



## Advice

- Follow the advice from your Podiatrist regarding your footwear. Check that your shoes are not too tight or too loose and that they are the right shape for your feet.
- Apply a moisturising cream daily and gently rub area with a pumice stone or foot file. Urea based creams are most effective for this.
- Cushioned insoles may help.
- Never use razors or sharp instruments to remove the skin. Do not wrap material around the toes, which can become uncomfortable and tight. Fissures (cracked heels).

## Fissures (cracked heels)

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A combination of dry skin and high pressure, sometimes made worse with poor footwear.



Heel fissures are splits or cracks in the skin which appears around the heel. They usually occur if you have dry and hard skin and often wear open backless or slip-on footwear. The area can become very sore if you pick it or use a sharp instrument. Sometimes the area can bleed or become infected.

## Advice

- Avoid slip-on shoes and wear closed back footwear (this should include your slippers if you wear them)
- Never use razors or sharp instruments to remove the skin. A pumice stone or foot file is best suited for reducing dry skin on the heel area
- Cream your feet and heels daily; Urea based creams are often the most effective.

# Blisters

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Mostly caused by poorly fitting shoes, but can be caused by some skin conditions.



**To protect the blister and help prevent infection:**

**Do:**

- Cover blisters that are likely to burst with a soft plaster or dressing
- Wash your hands before touching a burst blister
- Allow the fluid in a burst blister to drain before covering it with a plaster or dressing

**Don't:**

- Do not burst a blister yourself or peel the skin off a burst blister
- Do not pick at the edges of the remaining skin
- Do not wear the shoes or use the equipment that caused your blister
- If the blister is infected it can be red, hot and filled with green or yellow pus. Ensure you get advice from your GP or local podiatrist.

**If you regularly get friction blisters:**

- Wear comfortable, well-fitting shoes
- Wear thicker wool socks during exercise
- Dust talcum powder in your socks if you get sweaty feet

## Inflammation

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Red, hot swollen foot, with or without a break in the skin. Maybe a trauma, gout, Charcot foot or a wound.



### Charcot foot

Charcot foot occurs in people who have peripheral neuropathy such as people with diabetes. It is where the bones become soft and start to collapse making the foot change shape rapidly, the foot can be red, hot and swollen. This is not life threatening but is a medical emergency and the patient should seek help immediately for advice.

## Wounds

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A break in the skin either caused by too much pressure or rubbing or as a result of a trauma.



Wounds may occur as the patient does not feel the damage happening to their feet. Cover them with a clean dressing as soon as you spot them. **Both of these are wounds and need professional help immediately.**

Cardiff and Vale Podiatry Wound team number is 02920 335135 or 02920 335134.

## What next?

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- You should feel more confident to discuss your foot health with your **health care professional**
- Your **health care professional** will assess your feet and tell you your **RISK** of complications
- Please make sure you know how to get help when you need it.

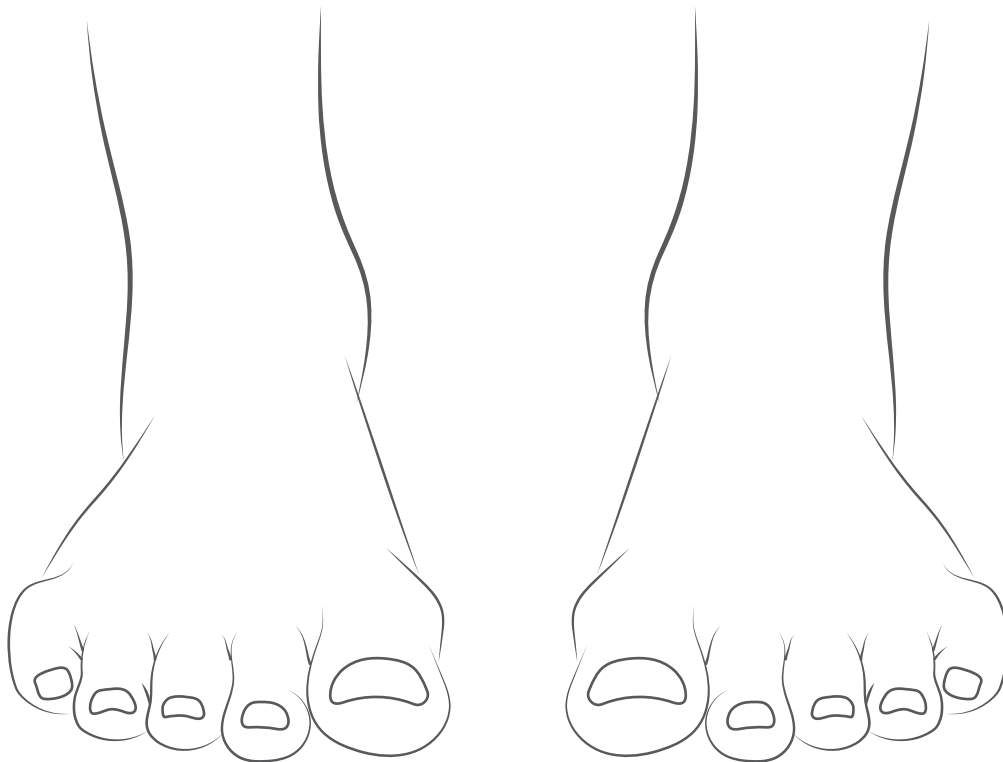
## Thank you for taking part

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We look forward to working with you in partnership to look after your feet and your diabetes.

### Healthy Me, My Healthy Feet

If you have any questions, please speak to a health care professional.



# 15 Healthcare Essentials

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## Getting the care you need

When you have diabetes, you're entitled to certain checks, tests and services **every year**. We call these the **15 Healthcare Essentials** – these will **help you manage your diabetes** and they're all free.

Take the list to your GP and start ticking the things off you've already got an appointment for. You won't have all of these on the same day. Talk to your GP about the things you still need help arranging.

- |  |   |
|--|---|
| 1 Blood glucose test (HbA1c test) <input type="checkbox"/>     | 9 Group education course <input type="checkbox"/>                             |
| 2 Blood pressure check <input type="checkbox"/>                | 10 Care from diabetes specialists <input type="checkbox"/>                    |
| 3 Cholesterol check (for blood fats) <input type="checkbox"/>  | 11 Free flu jab <input type="checkbox"/>                                      |
| 4 Eye screening <input type="checkbox"/>                       | 12 Good care if you're in hospital <input type="checkbox"/>                   |
| 5 Foot and leg check <input type="checkbox"/>                  | 13 Support with any sexual problems <input type="checkbox"/>                  |
| 6 Kidney tests <input type="checkbox"/>                        | 14 Help to stop smoking <input type="checkbox"/>                              |
| 7 Advice on diet <input type="checkbox"/>                      | 15 Specialist care if you're planning to have a baby <input type="checkbox"/> |
| 8 Emotional and psychological support <input type="checkbox"/> |   |

### My action plan

- I'll ask my GP to help me get the things I haven't ticked ☐
- I know how to help manage things myself too, in between yearly checks ☐
- I'll get more info from [www.diabetes.org.uk/15-healthcare-essentials](http://www.diabetes.org.uk/15-healthcare-essentials) ☐

# HbA1c units conversion chart

DCCT (Diabetes Control and Complications Trial) units measured in %  
IFCC (International Federation of Clinical Chemistry) units measured in mmol/mol

DCCT (%)	IFCC (mmol/mol)
4.0	20
4.1	21
4.2	22
4.3	24
4.4	25
4.5	26
4.6	27
4.7	28
4.8	29
4.9	30
5.0	31
5.1	32
5.2	33
5.3	34
5.4	36
5.5	37
5.6	38
5.7	39
5.8	40
5.9	41
6.0	42
6.1	43
6.2	44
6.3	45
6.4	46
6.5	48
6.6	49
6.7	50
6.8	51
6.9	52
7.0	53
7.1	54
7.2	55
7.3	56
7.4	57
7.5	58
7.6	60

DCCT (%)	IFCC (mmol/mol)
7.7	61
7.8	62
7.9	63
8.0	64
8.1	65
8.2	66
8.3	67
8.4	68
8.5	69
8.6	70
8.7	72
8.8	73
8.9	74
9.0	75
9.1	76
9.2	77
9.3	78
9.4	79
9.5	80
9.6	81
9.7	83
9.8	84
9.9	85
10.0	86
10.1	87
10.2	88
10.3	89
10.4	90
10.5	91
10.6	92
10.7	93
10.8	95
10.9	96
11.0	97
11.1	98
11.2	99
11.3	100

DCCT (%)	IFCC (mmol/mol)
11.4	101
11.5	102
11.6	103
11.7	104
11.8	105
11.9	107
12.0	108
12.1	109
12.2	110
12.3	111
12.4	112
12.5	113
12.6	114
12.7	115
12.8	116
12.9	117
13.0	119
13.1	120
13.2	121
13.3	122
13.4	123
13.5	124
13.6	125
13.7	126
13.8	127
13.9	128
14.0	130
14.1	131
14.2	132
14.3	133
14.4	134
14.5	135
14.6	136
14.7	137
14.8	138
14.9	139

# Footwear fitting advice



## Shoe fitting

Stores that sell footwear and have attained the HFG mark are very likely to have staff available who can offer help and advice to ensure the footwear fits correctly. If you are purchasing footwear by mail order and the purchaser is receiving treatment or advice from a foot care specialist, such as a Podiatrist, it is strongly recommended that purchasers take the footwear along to an appointment before they are worn for advice on fit and quality. If the footwear considered unsuitable by the specialist, they can be returned and an alternative or refund obtained.



*Ensure both shoes are on, correctly fastened and weight distributed on both feet. It is advisable to ask a friend or family member to help.*



*If the purchaser uses any form of insert (orthoses) inside the footwear these must be in place before the fit assessment is conducted.*



*There must be a minimum of 6mm, preferably 10mm, in front of the longest toe.*



*The natural shape of the footwear forepart should not be distorted by the foot. This may indicate pressure on the top or side of the toe and toe joints.*

<http://www.healthy-footwear-guide.com/shoe-fitting>



*When drawing a thumb or finger across the forepart of the footwear there should be a slight rippling of the material but not a significant crease that would indicate the shoe is too wide.*



*The toplines of the footwear should be neatly against the sides of the feet with no pressure on the bony protrusions such as the ankle bone or the top of the heel curve.*



*Elasticated gussets or laces must be under some tension to grip the foot but not fully stretched.*



*The fastening must grip the foot and allow further adjustment if required.*

## When walking check that:

1. The shoe grips the foot and does not slip
2. The sole flexes easily in the forepart
3. The heel provides a stable platform
4. The outsole does not slip on the surfaces the wearer will normally be walking on
5. The upper material flexes with the foot and returns to its original shape
6. No pinching or pressure is felt by the wearer whilst walking

Illustrations on this page are from - <http://www.healthy-footwear-guide.com/>



# Health and care professionals must be registered so you can be sure...

- ✓ they are genuine
- ✓ they meet national standards
- ✓ you are protected

By law the following professionals must be registered  
with the Health Care Professions Council.

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Social workers in England
- Speech and language therapists



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# Stop Smoking Wales

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Stop Smoking Wales is funded by the Welsh Government and is an integral part of Public Health Wales where it forms a central element of the Tobacco Control programme.

Stop Smoking Wales is a specialist health service that provides sessions for smokers who want help to give up.

The service plays an important role in reducing the impact of tobacco on the health of people in Wales and values the contribution it can make towards reaching the Welsh Government target of reducing smoking prevalence in Wales to 16 per cent by 2020.

Research has shown that smokers are four times more likely to give up with a support programme like Stop Smoking Wales.

Stop Smoking Wales offers clients a seven week treatment programme based on the withdrawal oriented treatment model.

## The programme provides:

- Weekly appointments at the same time and same place each week
- Appointments available during the day and early evening in local community venues
- Expert behavioural support delivered by a trained Stop Smoking Advisor
- Encouragement, support and guidance throughout the quitting process
- Information on pharmacological aids
- Follow-up at four weeks and 12 months

The service offers free, half day **Brief Intervention Training**. Brief intervention is a method of discussing smoking and quitting in a positive, non-confrontational way to encourage smokers to think about giving up and enable them to access specialist support when they are ready.

This training is suitable for all professionals who come into contact with smokers on a regular basis.

## Contact Details

Help Me Quit – Free NHS help, that's right for you.  
The best choice you can make to help you quit smoking.

Website: [www.helpmequit.wales](http://www.helpmequit.wales)

Call: 0808 278 9711 or

Email: [helpmequit@wales.nhs.uk](mailto:helpmequit@wales.nhs.uk)





# An Invitation for People Living with Diabetes

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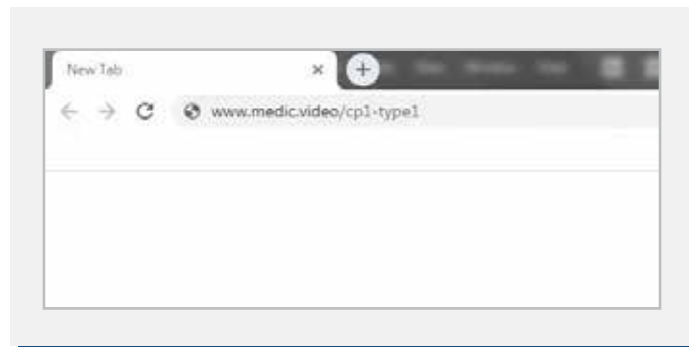
We invite you to watch a short series of films as part of your treatment plan.

Each film has been created by NHS healthcare professionals and people living with diabetes to help you to further understand and manage your condition.

To watch these films please type this web address into your browser and click enter:

<p><b>Type 1 Diabetes</b></p> <p><a href="http://www.medic.video/cp1-type1">www.medic.video/cp1-type1</a></p> 	<p><b>Type 2 Diabetes</b></p> <p><a href="http://www.medic.video/cp1-type2">www.medic.video/cp1-type2</a></p> 
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Please ensure that you type the link into the address bar at the top of your browser – NOT the search box in the middle of the screen.



The films have been made as part of a national plan to support the many people in Wales living with a long-term condition.

When you have watched all the films in the series please let us know by completing 4 very short questions on the survey link from the landing page.

If you have any difficulties accessing the films or have any comments, please email the team at [patient@pocketmedic.org](mailto:patient@pocketmedic.org)



# Cutting and filing toe nails

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## How do I cut my toe nails safely?

Ensure that you have the right tools for the job before starting to cut your toenails. Podiatrists use nail 'nippers' which can be purchased in most chemists or supermarkets.

- Try to cut your nails following the natural curve of the toe.
- Do not cut your nails too short – a small crescent of nail should still be visible at the end of your nails after cutting them
- Do not cut or poke anything down the side of the toe.
- Use a soft nail brush to keep you nails clean

## How do I file my toe nails safely?

Often filing nails regularly can keep them to a manageable length.

- Use a good quality nail file
- ('Diamond Debs' are commonly used in the Podiatry Clinic)
- Hold the file over the nail and pull it gently away from you
- Do not file the nails too close to the skin
- Carry this out 1-2 times weekly to keep nails manageable

## Problems cutting your toenails?

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Age Connects Cardiff & Vale provide a nail cutting service to administer basic foot care services to older people.

The service is provided by our nail cutting assistants, who are trained by the Cardiff & Vale University Health Board.

There is a cost of £14 for nail cutting at our clinics.

Home visit nail cutting is available in Cardiff and Penarth at a cost of £20.

**This is a simple nail-cutting service, we are unable to provide:**

- Help with foot care problems such as corns and bunions
- Nail-cutting for anyone with certain medical conditions such as kidney failure, blood circulation problems, a history of ulceration or being treated with steroids.

If you are unsure whether you are eligible for our service, we will be happy to discuss it with you. Nail cutting is available on an appointment basis. To book, or discuss, please call **02922 331 113**.

**We are currently running a reduced service due to the Coronavirus pandemic. Information correct and taken from Age Connects website 9-12-20. Please review website or contact Age Connects for updated information.**

## Well-being

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'Dewis Cymru is the place to go if you want information or advice about your well-being – or want to know how you can help somebody else.

When we talk about your well-being, we don't just mean your health. We mean things like where you live, how safe and secure you feel, getting out and about, and keeping in touch with family and friends.

No two people are the same and well-being means different things to different people. So Dewis Cymru is here to help you find out more about what matters to **you**'.

You can access this information at [www.dewis.wales](http://www.dewis.wales)

# Your feet are important especially when you've got diabetes

**Every week diabetes causes over 150 amputations in the UK.**

People with diabetes can get foot problems because there is too much blood glucose (also called sugar) in the blood over a long period of time.

This can stop your nerves working so you might not feel when you've cut your foot or burned yourself.

It can also make it difficult for your body to heal itself properly. This means even small cuts, blisters, burns or infections can lead to ulcers and amputations.

If people manage their diabetes well most foot problems, including amputations, can be prevented.

You can also dramatically reduce your chances of foot problems by taking good care of your feet.

This leaflet tells you how.

## Simple steps to healthy feet if you've got diabetes

### Never ignore a problem with your feet

- Foot problems can develop extremely quickly. Urgent treatment is vital.
- If you have any concerns about your feet contact your diabetes healthcare team.
- Know who to call at the first sign of any new foot problems and keep their numbers handy.

### For more information and advice

Go to [www.diabetes.org.uk/putting-feet-first](http://www.diabetes.org.uk/putting-feet-first)

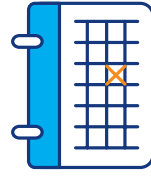
Call **0345 123 2399\***

Monday to Friday, 9am–7pm

Email [helpline@diabetes.org.uk](mailto:helpline@diabetes.org.uk)



# Take these simple steps to healthy feet



## Go to your foot check

If you're over 12 years old a trained professional should inspect your bare feet once a year. This will spot if you are at risk of any foot problems.

## Know how your feet are doing

At the end of the foot check you should be told if you are at high risk of developing foot problems or if you need to see a specialist for expert foot advice.

## Look at your feet every day



Whether it's when you're putting your socks on or just before bed check your feet every day. If you see any colour changes, swelling, pain, cuts or bruises, build-up of hard skin, or anything unusual tell your diabetes team.

## If you lose feeling in your feet be extra careful

Being at high risk of foot problems or losing feeling in your feet means you might not realise when you've hurt yourself. Try not to go barefoot, especially on hot sand or gravel, and don't sit too close to radiators or heaters.



## Watch out cutting your nails

If your body can't heal itself properly any kind of wound can increase the chances of a serious foot problem so cut your nails carefully. Don't cut down the side of your nails to avoid ingrowing toenails.

## Don't use corn-removing plasters or blades

These can damage your skin and cause more problems for your feet. If you have corns a healthcare professional should deal with them.



## Make sure your socks and shoes fit

Blisters can be dangerous for people with diabetes. If your shoes are too tight, too loose or rub you then don't wear them. Even if they look great.

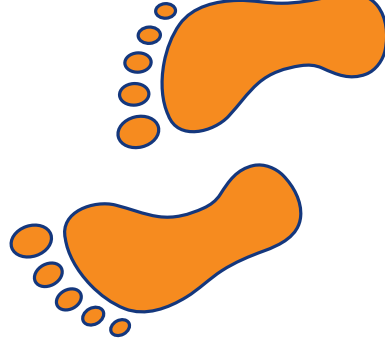
## Take control of your diabetes

Easier said than done. But lowering high amounts of sugar in your blood will help prevent nerve damage and can stop things getting worse. Ask your diabetes team about the different ways they can help.



## Ask for help to stop smoking

Smoking makes it harder for blood to travel around your body (like to your feet) so puts you at even greater risk of amputation. Your healthcare team can make it easier to quit.





# Healthy Me: **My Healthy Feet**

## 1 Checking your feet



Checking your feet daily helps to promote good foot health. If you are unable to do this yourself get someone to check them for you.

## 2 Annual foot check



You should have a foot check at your GP surgery every year. You will be given advice on how to look after your diabetes and feet through information prescriptions and use of the Pocket Medic films.

## 3 Nail Care

Age Connect in some areas across Wales are able to offer a nail cutting service for which there is a charge. Routine nail cutting is not available on NHS podiatry. <https://www.ageconnectswales.org.uk/our-nail-cutting-service>



## 4 Podiatry Consultation

Poor foot health can mean that you may be referred to an NHS podiatry service who can help you understand how to look after your feet.



## 5 Foot Attack



If you notice any redness, heat, swelling or break to your skin – It could be a Foot Attack. Seek advice **TODAY** at your local Podiatry clinic or GP surgery. If this is during the weekend ring your GP out of hours or go to your nearest A&E.

**DONT DELAY - ACT TODAY!**

## 6 Meet the team



If you get an ulcer on your foot you may see other specialists to help in your care who can also advise on how to manage your diabetes.

## 7 Healthy feet

Always take care of your feet so you can live life to the full. Check your feet daily. **Healthy Feet – Happy Feet.**



Further advice is available by watching **Pocket Medic** films on your computer or Mobile phone.



Design: Penelope Ltd / 029 2048 1021

For further information on the care of your feet please check out the **Pocket Medic** links above.



**Cardiff and Vale Podiatry Service. Tel: 20335135/134**

# Diabetes Foot Health

Engagement and Empowerment to Self-care

