

DIABETES AND FEET

PODIATRY AND MOORE

DIABETES CAN EFFECT YOUR FEET IN TWO WAYS

Diabetic Peripheral Neuropathy is a long-term complication of diabetes. Exposure to high blood glucose levels over an extended period of time causes damage to the peripheral nerves – the nerves that go to the arms, hands, legs, and feet. These damaged nerves cannot effectively carry messages between the brain and other parts of the body. It leads to numbness, loss of sensation, and sometimes pain in your feet, legs, or hands. If you do not feel a cut or sore on your foot because of neuropathy, the cut could get worse and become infected. The muscles of the foot may not function properly, because the nerves that make the muscles work are damaged. This could cause the foot to stiffen and change shape over time. It is not curable so prevention is the key. Keeping your BGL's consistent low is important. If you can't feel your feet you must check them regularly and protect them from injury.



There are two types of risk to feet, high risk and low risk. Knowing the risk and taking care of your feet can prevent serious problems like ulcers and amputation. A podiatrist can carry out an easy and painless check on your feet to determine whether your feet have a low or high risk of developing more serious problems.

Low risk - feet have normal sensation and good blood flow. However it is important to know that low risk feet can become high risk feet without symptoms, so regular checks are still as important.

High risk - People who have had a foot ulcer or amputation in the past have a high risk of complications. Feet with calluses or deformities like claw toes also have increased risk if poor feeling and/or decreased blood flow are also present. If your feet are at high risk, you should have them checked by your podiatrist every 3 – 6 months.

Peripheral Arterial Disease, occurs when blood vessels in the legs are narrowed or blocked by fatty deposits and blood flow to your feet and legs decreases. Peripheral vascular disease is 20 times more common in people with diabetes than in the general population. In people with diabetes, chronic high blood glucose raises the risk of developing peripheral vascular disease. Along with diabetes, other risk factors for peripheral vascular disease are smoking, inactivity, and high blood lipid levels. Fatty deposits build up in the inner linings of the artery walls of the legs, making them narrower, hindering blood flow and can even stop blood flow to the legs and feet completely. This condition can lead to pain, especially when walking, as well as a number of other symptoms like foot wounds that are slow to heal, one foot being much colder than the other, or gangrene. In severe cases, foot or leg amputation may be needed. A number of the risk factors mentioned here can be controlled to minimize the likelihood of developing PAD and to slow its progression. For people with diabetes, it's especially important to keep blood glucose levels as normal as possible.