

How did you get a diabetic foot ulcer?

Diabetic ulcers are a serious problem related to diabetes. They occur mostly on your feet. If you have high blood sugar, your blood may flow slowly to your feet. Diabetes can cause poor circulation and damage nerves (diabetic neuropathy). These two problems may cause serious foot complications. When nerves in your legs and feet become damaged, you may have a hard time feeling pain, heat, or cold. If you do not feel pain, you can injure yourself and not know it because of the nerve damage and lead to infection. If your blood sugar is high, the risk of bacteria and infection increases. Poor circulation slows down healing and the ulcer or wound may be hard-to-heal for a long time.

Common causes include:

- Elevated blood sugars
- Nerve damage
- Poor circulation
- Obesity
- Smoking or Drug Use
- Cracked or dry skin
- Improperly fitted shoes



Early treatment is important to allow quick healing of the ulcer or wound and prevent it from coming back once it is healed. Pressure relief and infection control are necessary. Aggressive treatment by a wound specialist of diabetic ulcers can often keep the problem from getting worse and eliminate the potential for amputation.



What can you do?

- Monitor and record your blood sugar daily.
- Take your diabetes medications/insulin at the same appropriate time(s) each day.
- Be active for at least 30 minutes every day.
- Eat a healthy diabetic diet and drink plenty of water.

Taking care of your feet is key. Controlling blood sugar levels, wearing socks with no seams, always wear shoes that fit appropriately, and never go barefoot. Moisturize feet, but do not put the lotion in between the toes as this may harbor bacteria. See a podiatrist on a regular basis. Wash and check your feet every day.

When should I call my doctor about my wound?

- Increased pain
- Increased swelling
- Red and warmth surrounding wound and or skin
- Increased drainage
- Smelly drainage after cleansing your wound during dressing changes.

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