

What should I do next?

Even if you don't have exactly the symptoms described in this leaflet, if you have any concerns about the condition of your legs or feet you should have them professionally assessed. In the first instance, speak to your doctor, nurse or local Leg Club, who will give you a thorough examination. This may include a full health check and review of the circulation in your legs.

What is a Leg Club?

Leg Clubs are a research-based initiative which provide community-based treatment, health promotion, education and ongoing care for people of all age groups who are experiencing leg-related problems.

The Leg Club nursing teams are employed by NHS local provider services, CCGs and GP consortia and the nurses incorporate the Leg Clubs into their everyday practice.

No appointment is required and the Leg Club opening hours should be available from the local surgery, community nurses' office, and adverts in the local parish magazine and village shops or from the Leg Club website www.legclub.org

Through education, ongoing advice and support from your Leg Club nurses, you will be made aware that care and prevention of recurrence of leg-related problems is for life.

Visit your nearest Leg Club

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A Guide to Common Foot Problems

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Common foot problems

Fungal Infection/Athlete's Foot

Fungal infection causes dry skin, redness, blisters, intense itching and skin peeling especially between the toes. Toenails can also be affected. They become discoloured, yellowish, brittle and thickened.

Over-the-counter antifungal powders, paints or cream can help.

Ingrown Toenails

Ingrown toenails commonly affect the big toe. The toenail pierces the skin and the toe becomes very painful, inflamed and infected (yellow pus). You can relieve the pain by bathing your foot in a salty footbath.

Chilblains

Chilblains are small red/purple areas that are associated with cold/wet conditions. They often appear on the extremities of the hands and feet. They can also appear on the face (nose and ear lobes). Rapid change of temperature is considered a cause of chilblains.

There are over-the-counter products that you can buy from the Pharmacist.

Corns and Callus

Corns and callus are patches of thickened skin which occur from excessive pressures acting on the foot. This may result from ill-fitting footwear, change in foot shape, altered gait (way of walking) and the ageing process. Corns usually occur on the tops of toes and have a hard central area of dead skin. Corns and callus appear as circular patches and the thickened skin tends to be brownish in colour.

It is not advised to try and cut the corns or callus yourself, especially if you have diabetes or poor circulation. If you are unsure of what to do, seek professional advice. For over-the counter products, ask to speak to the pharmacist for advice. There may be some products that are not suitable for you.

Verrucae

Verrucae are warts that appear on the foot. They are caused by a common virus that is commonly present in moist damp environments like swimming pools and gym changing rooms. They are infectious and can spread to other parts of the body and affect other members of the family.

Verrucae have a cauliflower like appearance and can be painful. Over-the-counter products may be used for self treatment, but they need to be used carefully as they can damage the surrounding skin. They can be covered with a simple plaster and may disappear without further treatment.

Dry Skin and Heel Fissures

Skin can become dry and flaky from the ageing process and the skin may lose its elasticity. This can lead to splits in the skin (fissures). The splits can be painful and lead to infection. This may be severe especially in people with diabetes. Over-the-counter products include emollients and moisturisers. They can help to rehydrate the skin.

Morton's Neuroma

Morton's neuroma is a painful condition that commonly affects the forefoot (metatarsals) and toes, especially the third and fourth toes. The condition is a result of pinching of nerves in the plantar (sole) aspect of the foot. The nerve becomes thickened and can feel like a pebble or stone in the shoe. The pain may be tingling and burning and shooting into the toes.

Bunions and other Foot Deformities

A bunion is a foot deformity where the big toe is 'bent' towards the second toe and can develop a bursa (fluid filled sac) over the large joint which may become painful. This deformity can cause other problems with corns and callus as a result of excessive pressure. Self treatment includes wearing supportive footwear (lace ups or strap) and the use of stretching exercises (calf stretches) may help.

Other foot deformities include hammer toes, flatfoot and claw toes.

Heel Pain and Plantar Fasciitis

There are a number of conditions that cause pain in the heel. The majority are caused by small repetitive injuries. The most common are plantar fasciitis and heel bursitis. Plantar fasciitis is caused by a strain on a 'band' of tissue which connects the heel bone to the base of the toes. This leads to painful inflammation which is often worse on standing, especially rising from bed. Heel bursitis is inflammation of a bursa which lies under the heel bone. The pain is generally felt in the centre of the heel.

For self care, there are a number of treatments that you can try: avoid wearing ill-fitting shoes and wear shoes with cushioning and arch support. Avoid wearing flat shoes and lose weight if overweight.

Blisters

Blisters are fluid filled sacs that are a result of friction and pressure. They are commonly caused by ill-fitting footwear, excessive sweating, wrinkles in socks and prominent joints.

Most foot blisters will heal within 3-7 days. For self care, a simple dressing will suffice.

Diabetes

If you have diabetes, you should have your feet examined at your GP surgery. Your feet will be examined for any loss of sensation (peripheral neuropathy) and your foot pulses will be recorded for any evidence of loss of circulation (peripheral arterial disease).

If you develop risks for foot ulcers (open sore on the toes or sole of the foot) you need to examine your feet every day to look out for any change in colour (redness), swelling (cellulitis) or discharge (fluid or pus) coming from your foot. If you see any of these signs, you must contact your GP immediately or a member of the multidisciplinary diabetes footcare team.

To find your nearest Leg Club (no appointment needed), visit: www.legclub.org/about-leg-clubs or ring: 01473 749565.