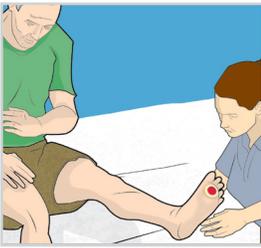


WHAT IS A NEUROPATHIC/ DIABETIC ULCER?



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. An ulcer, wound or cut on your foot may get worse because you may not know it is there. This can lead to a large ulcer or wound, known as a neuropathic/diabetic ulcer.

How did you get a neuropathic/diabetic ulcer?

Diabetes can damage your nerves. This is called diabetic neuropathy. Diabetes can also cause poor circulation. 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. The injury may also get infected. If your blood sugar is high, the extra sugar feeds germs and an infection can get worse. Because you have poor circulation, healing is slowed and the ulcer or wound may never heal.

Common causes include:

- » High blood sugar
- » Nerve damage
- » Poor circulation
- » Being overweight
- » Smoking
- » Dry and cracked skin
- » Shoes that do not fit
- » Athlete's foot

What does it mean to you?

You may notice that your legs or feet do not have much hair, are cold most of the time, and your skin is smooth and shiny. Your skin may have a red or purple appearance and be cool to the touch. The muscle in your calf may be getting smaller. Your wound may be very painful. The pain in your leg, foot, or ulcer may get worse when you raise your leg.

What should you do about it?

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 is necessary. Aggressive treatment of diabetic ulcers can often keep the problem from getting worse and eliminate the potential for amputation.

It is very important to follow the directions given to you by your doctor or nurse. These directions may include:

- » Monitor and record your blood sugar daily.
- » Take your diabetes pills or insulin at the appropriate time(s) each day.
- » Be active at least 30 minutes every day. Your doctor or nurse will tell you which exercises are right for you.
- » Eat healthy foods and drink plenty of water.

Helpful hints

- » Control your blood sugar.
- » Ask your doctor or nurse to look at your feet at each checkup.
- » Wear socks with no seams.
- » Always wear socks with shoes.
- » Wear shoes that fit.
- » Never go barefoot.
- » Gently apply lotion wherever you feel dry or flaky.
- » Cut your toenails only if your doctor or nurse says it is safe.
- » Wash and check your feet every day.

This document is not intended to treat, diagnose or prescribe. The information is for educational purposes only and is not meant to take the place of a consultation with a licensed healthcare professional.

How to change your bandage:

- 1** Wash your hands with soap and water.
- 2** Collect the supplies you will need.
- 3** Get into a comfortable position to change your bandage.
- 4** Place a large plastic bag or cover on your bed or chair to protect it.

How to remove your bandage:

- 5** Place your hand into a small clean plastic bag.
- 6** Grasp the old bandage with your bag-covered hand and gently remove your bandage.
- 7** Turn the bag inside out over the old bandage.
- 8** Close the bag tightly and throw it away.

How to examine your neuropathic/diabetic ulcer:

- 9** Look at your ulcer. As the wound heals, it will slowly become smaller and drain less. New tissue is pink or red and may look lumpy or shiny. **Do not disturb this tissue. Clean it gently.**
- 10** Tell your doctor or nurse if your wound gets bigger, if it has more drainage, if it is more painful or swollen, or if it is not better in 2 to 4 weeks.

Bandage your wound *(doctor or nurse instructions):*

Doctor or nurse contact information:

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