NHS
Somerset
NHS Foundation Trust

Wound care advice

What is an ulcer?

An ulcer is a medical term for an open wound or sore on the skin that is slow to heal.

Who can get an ulcer?

Anyone can get an ulcer, however, there are certain factors that can increase your risk of getting them on your feet. These include:

- Reduced feeling in the feet (peripheral neuropathy)
- Reduced circulation/blood flow to your feet (peripheral vascular disease/ischaemia).
- Hard skin (callus) caused by a change in the foot shape
- Impaired vision
- Inability to self-care
- Previous ulcers or amputations.

The above risk factors can be caused by diseases that affect the entire body (systemic disease) such as diabetes or rheumatoid arthritis or a variety of lifestyle choices.

Below are examples of what a foot ulcer can look like.



Potential complications

- You are more prone to ulcers if you suffer from a systemic disorder such as diabetes or poor circulation
- Ulcers are a way in for bacteria and infection. Localised infection can lead to infection in the bone
- Poor circulation, reduced sensation and foot deformity can reduce healing and hide the signs and symptoms of infections
- If left untreated ulcers can deteriorate quickly, leading to spreading infection.

Signs of local infection

Without appropriate management and treatment, an ulcer could lead to amputation or infection spreading into the blood system, such as developing sepsis (see next page).

If you suspect that you have an infection, please contact your GP as soon as possible and ask for an emergency appointment. If you are unable to see your GP please attend a Minor Injury Unit, A&E department or walk-in health centre.

The following signs and symptoms may suggest you have an infection:

- Red skin around the area
- Heat
- Swelling
- Malodour/smell
- Pain that gets worse after a few days
- Sores that look like blisters
- A pimple or yellowish crust on top
- A red streak that runs from the area towards your heart - attend an A&E department at your nearest hospital straight away.







What is sepsis?

Sepsis is a life-threatening reaction to an infection. It happens when your immune system overreacts to an infection and starts to damage your body's own tissues and organs. You cannot catch sepsis from another person. Sepsis is sometimes called septicaemia or blood poisoning.

An open wound can lead to an infection. It may spread from your foot to the rest of your body.

What are the symptoms of sepsis?

Below are signs of SERIOUS systemic infection:

- Fever and chills
- Very low body temperature
- Urinating less than normal
- Rapid pulse
- Rapid breathing
- Nausea and vomiting
- Diarrhoea.

If you think you have sepsis

Contact your nearest A&E (emergency department) immediately.

Sepsis is life threatening. It can be hard to spot. If you think you or someone you look after has symptoms of sepsis, call 999 or go to A&E. Trust your instincts.
Read more about sepsis on the NHS website at www.nhs.uk/conditions/sepsis/

The podiatry team will ensure you have regular appointments to monitor and treat your ulcer. Your care may be shared with other healthcare teams.

Consider taking a photo of your wound or ulcer so that you have a record of what it looks like.

During your appointments, the clinician will:

- Assess the appearance of the ulcer, including checking for signs of infection
- Measure the ulcer
- Undertake any treatment – e.g., debridement of hard skin (callus), nail care
- Clean and dress it appropriately
- Remove areas of pressure where necessary
- Advise on how to look after your feet and give self-help advice
- Consider a referral to another team
- Test the nerve and blood supply in the foot

The podiatrist will remove hard skin and dead tissue with a sterile blade to ensure the ulcer heals from the base upwards. The hard skin may harbour bacteria, increasing the risk of infection.

If an ulcer is caused by pressure, an appropriate dressing and pressure relief will be applied to distribute pressure away from the wound. Specialist footwear may be considered for this.

The podiatrist, alongside your GP, may consider a referral for additional input from another team. These teams include: the vascular team, the diabetic foot clinic, orthopaedics, orthotics etc. This will be discussed with you at your appointment.

Self help

Check your feet every day, particularly the area around the ulcer. If you have any concerns between your appointment, please seek medical advice from your GP, Practice nurse or A&E.

- Keep dressings dry and covered. Wet dressings increase the risk of infection.
- Clean and dry dressings should stay in place until your next follow-up appointment.
- Should you be concerned about keeping dressings dry when washing, please ask your podiatrist to provide information on assistance devices.
- If you are unable to attend your next appointment with the podiatrist, please ensure that you contact your practice nurse so that the wound can be checked and re-dressed.

Healed ulcer

An ulcer site can remain fragile for several weeks after it has healed. Scar tissue does not have the elasticity of normal skin and a wound is therefore more likely to break open again, especially under pressure / friction.

The healed ulcer site should be checked daily to ensure that the new skin is healthy.

Sometimes hard skin can form over the area and this may need regular attention from a podiatrist.

It is very important to regularly monitor the area for any signs of redness, bleeding or discharge and if these occur you will need to urgently request a podiatry appointment.

To help protect the skin, insoles, specific footwear or a referral to an orthotist may be considered.

How can you help to prevent ulcers forming?

Wash and check your feet every day
Wash your feet every day with warm water and a mild soap. Rinse your feet thoroughly and dry them carefully, check especially between the toes. Use a mirror or ask a friend, family member or carer to help if finding this difficult. Do not soak your feet as this can damage your skin.

Moisturise your feet every day
If your skin is dry, apply a moisturising cream every day, avoiding the areas between your toes. Rubbing moisturiser on healed ulcer sites on the sole or top of your foot will help the skin to remain healthy, but this should not be done if the ulcer was between any of your toes, as the moisture may cause an athlete's foot infection.

Toenails
Do not cut your toenails unless your podiatrist advises you to. Filing is recommended. Be careful when using podiatry equipment at home (sharp nippers and pedirolls).

Socks, stockings, and tights
You should change your socks, stockings, or tights every day. They should not have bulky seams and the tops should not be elasticated.

Avoid walking barefoot
If you walk barefoot, you risk injuring your feet by stubbing your toes and standing on sharp objects which can damage the skin. Walking barefoot on a hot holiday is unsafe as you are at risk of burning your feet.

Consider other factors
Temperature: if having a bath, check the water temperature. Do not warm your feet in front of the fire, on a radiator, hot water bottle, or with an electric blanket.

Check your shoes
Check the bottom of your shoes before you put them on to make sure that nothing sharp such as a pin, nail or glass has pierced the outer sole. Also, run your hand inside each shoe to check that no small objects such as small stones have fallen in. Before putting on your shoes turn them upside down and check nothing is inside, for example grit, or foreign body.

Always wear a slipper or shoe with a strong thick sole because you may step on something sharp and not be aware of it.

Badly fitting shoes are a common cause of damage to the feet. Narrow and shallow shoes without a fastening will increase your risk of developing rubs and hard skin which can lead to an ulcer forming. Your podiatrist will give you advice regarding appropriate footwear.

Minor cuts and blisters
If you check your feet and discover any breaks in the skin, minor cuts or blisters, cover the area with a sterile dressing. Do **not** burst blisters. Contact your podiatry department or GP immediately. If they are unavailable and there is no sign of healing after one day, go to your local minor injuries or call 111 for advice. If you feel unwell, refer to the previous page regarding infection immediately for further advice.

Contact podiatry service - Chard booking office:

Tel: 01460 247555

Appointments for Bartec, Bridgwater, Burnham, Chard, Frome, Minehead, Parkgate House, Shepton Mallet, Wellington, Wells, West Mendip, Wincanton