

# Peripheral Neuropathy

Podiatry Department

Patient Information Leaflet

## What is neuropathy?

Orthoses are commonly known as insoles. Orthoses work to support the joints in the foot by reducing tissue stresses that may be causing discomfort. It is sometimes advised to use orthoses in conjunction with a stretch or strengthening regime as they may be part of a combined treatment therapy.

Neuropathy is damage to the nerves that send signals to and from the brain and spinal cord to muscles, skin, blood vessels and other organs. This damage results in a reduction of feeling especially in the extremities (e.g. feet and hands).

This damage can occur and spread very slowly, and you may not notice it happening until you have an assessment or develop a problem.

## Who is most at risk?

Diabetes is the most common cause of neuropathy especially in individuals who:

- have found it difficult to keep their diabetes controlled
- have high blood pressure
- have high levels of cholesterol in their blood
- who smoke.

Other causes of neuropathy include:

- excessive alcohol intake
- low levels of vitamin B12 or other vitamins
- physical damage to the nerves – such as from an injury or during surgery
- an underactive thyroid gland (hypothyroidism)

### What are the symptoms?

- Reduced feeling of touch, pain, temperature or vibration. This is tested during your annual review appointment, but you should contact your GP or podiatrist as soon as you notice any changes.
- Foot and lower leg muscle strength may reduce, this can cause your foot to change shape and your toes to become clawed.
- Your feet may sweat less, and your skin may become dry; cracks can develop, especially around your heels.
- Small blood vessels to the skin may not work properly and the foot may feel cold.
- Some people also experience unpleasant symptoms such as ‘pins and needles’, uncomfortable numbness, stabbing or burning pains. This is sometimes called ‘painful neuropathy.’ These symptoms are often worst at night-time and may interfere with normal sleep patterns. These symptoms may be a temporary effect if your blood sugars have been abnormally high

**If you are diabetic, keeping your blood sugars well controlled can help to slow down the development of neuropathy.**

**This includes following a healthy balanced diet, trying to keep active and taking any medication prescribed to you**

## Neuropathy increases your risk of foot ulceration

The loss of protective pain sensation (your normal warning system) may not alert you to skin damage which can easily go unnoticed and quickly develop into deep injuries, infections and ulceration. All of these may occur without pain.

Toe and foot deformities can cause problems getting shoes to fit correctly and pressure areas can develop. Shoes can easily damage less sensitive, deformed feet as it's difficult for you to tell if they fit you correctly.

You may cause skin damage while caring for your skin and nails as you won't experience discomfort that would tell you when to stop.

### How is it treated?

Unfortunately, there is no treatment to regain lost sensation; but you can reduce your risk of foot ulceration by making the changes we discuss later in this leaflet.

Whether you need to see a podiatrist or not will depend on your symptoms and your risk of foot ulceration.

The symptoms of painful neuropathy may be controlled with daily medication provided by your doctor, although these symptoms can be difficult to control.

### Can I do anything?

#### Be "foot aware"

- Look for changes in colour, temperature and signs of skin damage.
- Ask someone to check your feet for you if it is difficult.
- Think about what could have caused the problem and remove it or seek advice.

## Take care of your feet

- Avoid using any sharp implements or corn plasters.
- Keep nails tidy using an emery board or file.
- Use a moisturising cream daily to keep skin in good condition but avoid applying in between the toes as this can encourage fungal infections.
- Take care shoes fit properly by getting your feet measured if possible and choosing soft seamless uppers. Shoes should protect your feet, not do damage to your skin.
- Gradually increase the wear time of new footwear and check your feet more often.
- Be especially careful on holiday- walking barefoot, sunburn and wearing different footwear can cause serious problems

## Where can I get further advice and support?

- Your GP
- Your podiatry department
- Diabetes UK [www.diabetes.org.uk](http://www.diabetes.org.uk)
- The Neuropathy Trust [www.neurocentre.com](http://www.neurocentre.com)

## Spotting a foot attack

- Is your foot red, warm or swollen?
- Is there a break in the skin or any discharge (or oozing) on to your socks or stockings?
- Do you feel unwell?

**You may not have pain even with a visible wound.**

Contact your GP, podiatrist or nurse immediately (or a member of the Foot Protection Service). If they are unavailable, go to your nearest out of hours healthcare service or your A&E department.

### Specific Advice


If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

**Podiatry Department**

Call **01384 321427** (9am-5pm, Monday to Friday) or e-mail [dgft.podiatry.appointments@nhs.net](mailto:dgft.podiatry.appointments@nhs.net)

**This leaflet can be downloaded or printed from:**

<http://dgft.nhs.uk/services-and-wards/>

If you have any feedback on this patient information leaflet, please email [dgft.patient.information@nhs.net](mailto:dgft.patient.information@nhs.net)

**This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.**

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