

HOW LONG WILL IT TAKE FOR MY DFU TO HEAL?

Adherence to your physician's treatment for your DFU will have a critical impact on how long it takes to heal the wound. Total Contact Casting is the gold standard of therapy and can provide healing within 6 weeks.



WHAT CAN I DO TO PREVENT A DFU FROM COMING BACK?

Reducing additional risk factors, such as smoking, drinking alcohol, high cholesterol, and elevated blood glucose, are important in the prevention and treatment of a diabetic foot ulcer.

Learning how to examine your feet will play a key role in preventing recurrence. Daily inspection of your feet will help you find a potential problem as early as possible. Examine the soles of your feet and between the toes—for cuts, bruises, cracks, blisters, redness, ulcers, and any sign of abnormality. If you discover any issues, contact your doctor as soon as possible.

DID YOU KNOW...



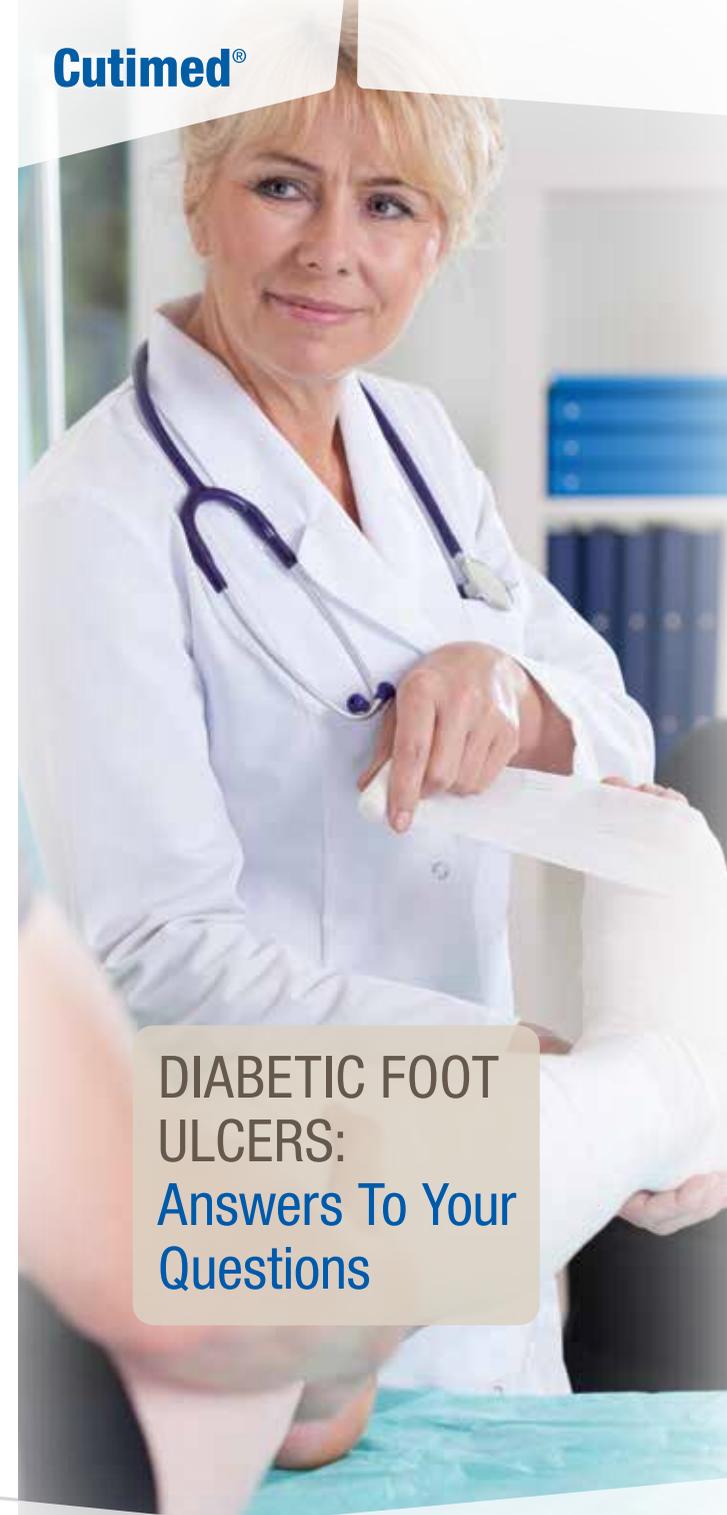
Total contact casting provides a **higher percentage** of ulcers healed versus other methods of off-loading¹

ASK YOUR PHYSICIAN ABOUT
CUTIMED® OFF-LOADER SELECT
A PROVEN LEADER IN DIABETIC
FOOT ULCER HEALING

1. Armstrong Diabetes Care 2001; 24:1019-22. [RCT]

BSN medical Inc. 5825 Carnegie Blvd. Charlotte, NC 28209-4633
Tel. (+1) 704 554 9933 Fax (+1) 704 358 4558 www.bsnmedical.com
To order toll-free: BSN medical (+1) 800 552 1157

Cutimed®



DIABETIC FOOT
ULCERS:
Answers To Your
Questions

You have been diagnosed with a diabetic foot ulcer (DFU). This brochure provides some basic information about diabetic foot ulcers and answers some of the most frequently asked questions.

WHAT IS A DIABETIC FOOT ULCER?

Diabetic foot ulcers are commonly located at increased pressure points on the bottom of the foot and appear as red, swollen, slow-healing open sores. A DFU is a common side effect for individuals with diabetes.

WHAT CAUSES A DFU?

Anyone who has diabetes can develop a diabetic foot ulcer. Diabetics on insulin are at a higher risk of developing a foot ulcer, as are those with diabetes-related kidney, eye, and heart disease. Being overweight and using alcohol and tobacco also play a role in the development of diabetic foot ulcers.

Diabetics often experience neuropathy, a reduced or complete lack of ability to feel pain in the foot due to nerve damage caused by elevated blood glucose levels over time. Ulcers form on the foot due to a combination of factors, such as lack of feeling in the foot, poor circulation, foot deformities, irritation (such as friction or pressure), and trauma, as well as duration of diabetes. These unnoticed sores could go on unattended and can worsen without the proper care. Without proper medical attention, these conditions can lead to foot lesions.

WHAT SHOULD I EXPECT IF I HAVE DFU?

Pain is not a common symptom, since many people who develop foot ulcers have lost the ability to feel pain. The first thing you may notice is some drainage on your socks. You may also experience redness and swelling with the foot ulcer, and if the DFU has progressed significantly, an odor may be present.

If left untreated, DFUs can become serious, placing you at risk of infection and amputation. Call your doctor when you first notice the signs of a diabetic foot ulcer because you may be able to prevent further complications.

HOW CAN MY DFU BE TREATED?

Your doctor will examine your foot and determine the best way of healing your ulceration and preventing recurrence. The primary goal is to obtain healing as soon as possible to minimize the risk of infection.

The majority of diabetic foot ulcers, especially those on the bottom of the foot, must be “off-loaded” with a Total Contact Cast (TCC) in order to heal. Off-loading is a casting technique that is used to reduce or “off-load” pressure/weight from the wound by shifting some of the weight to the lower calf and distributing the rest to the sole of the foot. Studies have proven that Total Contact Casting provides a higher percentage of DFUs healed versus other methods of offloading such as a removable cast walker or half shoe.¹



HOW CAN I HELP MYSELF?

Here are other things you can do to reduce the risk of a DFU:

- Health begins on the inside. Eat a healthy diet and keep your blood sugar levels within a normal range.
- Lose weight if you are overweight, as increased weight can play a role in the development of a diabetic foot ulcer.
- Daily foot exercises can help to relax the feet and promote circulation.
- If you smoke, stop smoking as this damages the arteries that supply blood and oxygen to your legs and feet. Additionally, smoking delays the healing process.
- Regularly wash and lotion your feet to avoid dry skin, which is more easily damaged.
- Wear comfortable shoes and consider diabetic socks that are designed especially for the needs of diabetic feet, offering both comfort and protection.
- Regular assessment of your feet is critical to helping prevent diabetic foot ulcers.
- Call your doctor if you damage your skin. Delaying treatment can increase your risk of developing a DFU.