The Diabetic Foot Journal



Level 1

Well hydrated heels, with little or no signs of drying.

Note that whilst our photographs are of the heels only, the whole foot and the toes should be checked and that the level applied must be in accordance with grading applicable to the worst skin on the foot

Management

Suggest the patient applies a standard emollient for prevention, to be applied in accordance with manufacturers instructions. Inform the patient that neuropathy poses a risk to the sweat glands in the feet and to monitor any changes in skin condition and report back if these happen



Level 2

Drying skin but no callus.

The foot may have some fissuring but no apparent callus

Note that whilst our photographs are of the heels only the whole foot and the toes should be checked and that the level applied must be in accordance with grading applicable to the worst skin on the foot

Management

Advise/prescribe a standard emollient for prevention, if an effective Once-A-Day emollient for footskin is available that would be our recommendation. If the patient has moved from Level 1 to Level 2 make them aware that their footskin condition has deteriorated and that their risk of ulceration may have increased. Instruct the patient that neuropathy poses a risk to the sweat glands in the feet and to monitor any changes in skin condition and report back if these happen.



Level 3

Drying skin combined with Callus. The foot may have some fissuring but no apparent open splits

Note the whole foot and the toes should be checked and that the level applied must be in accordance with level applicable to the worst skin on the foot

Management

SIGN 116 (For Scotland) requires a patient plan which will include an appropriate emollient and NICE NG19 requires prescribing of skin care. We suggest a 25% urea cream with proven Once-A-Day usage profile for all patients, and with excellent efficacy. Currently we strongly recommend Dermatonics Once Heel Balm. Make patient aware that their footskin condition has deteriorated and that their risk of ulceration may have **significantly** increased. Discuss treatment plan with Community Podiatry Service.



Level 4

Callused skin with open splits. The splits may be wider than those shown

Note the whole foot should be checked and the grading applied must be in accordance with the level applicable to the worst skin on the foot

Management

NICE Guideline NG19 and SIGN 116 (Scotland) require referral to your Community Podiatry Foot Protection Service. Prescribe a 25% urea cream with proven once a day efficacy. Currently we strongly recommend Dermatonics Once Heel Balm. Make patients aware that their footskin condition has deteriorated and that their risk of ulceration has **significantly** increased.

Dermatonics Once Heel Balm is Best Emollient Practice for High Risk Neuropathic Feet * ***)

*Young et al A photographic scale to aid appropriate skin care for people with Diabetes The Diab Foot Jnl 2014;17(2):70-73

For further detail and emollient suggestions please see overleaf

Dermatónics
Heel Balm
www.dermatonics.co.uk

The Diabetic Foot Journal

The Young Townson FootSkin Hydration Scale for Diabetic Neuropathy

Level 1

Hydrated skin

Recommended Footskin Action

Recommend a standard emollient, preferably with a **ONCE-A-DAY** regime, for prevention



Level 3 High Risk

Callused skin - Drying skin combined with Callus. The foot may have some fissuring but no apparent open splits

Recommended Footskin Action

NG19 requires all diabetes patients with callus to be prescribed skin care. **Prescribe Dermatonics Once Heel Balm** due to proven efficacy and **ONCE-A-DAY** regime. In the case of neuropathic patients discuss treatment plan with Community Podiatry Service



Level 2

Drying skin but no callus - The foot may have some fissuring but no apparent callus

Recommended Footskin Action

Prescribe a standard emollient preferably with a **ONCE-A-DAY** regime to prevent deterioration



Level 4 High Risk

Callused and cracked skin - These splits are open to the epidermis rather than being indentations/ fissures in the skin

Recommended Footskin Action

NG19 requires all diabetes patients with callus to be prescribed skin care. **Prescribe Dermatonics Once Heel Balm** due to proven efficacy and **ONCE-A-DAY** regime. Discuss treatment plan with Community Podiatry Service



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Dermatonics Once Heel Balm is Best Emollient Practice for High Risk Neuropathic Feet*