



THE PROFESSIONAL ASSISTANT LEARN & ADVISE



MODULE 40: AUGUST 2018

Footcare

The average person takes some 10,000 steps every day and with the feet taking the weight of the whole body, it's no wonder that foot problems are a common occurrence. And while some conditions will go away on their own, there are self care tips and products that pharmacy teams can recommend to ease pain, provide relief and make life a little more comfortable.



OBJECTIVES

After studying this module, assistants will:

- Know the common conditions that can affect the feet
- Understand the products available to treat these conditions
- Be able to answer customers' footcare concerns with confidence.



A quarter of all the bones in the human body – 52 in total – are in the feet, along with 33 joints, 107 ligaments and 19 muscles in each foot. This means there's a lot that can go wrong with the feet, and that's just on the inside. Throw verrucas, cracked heels and fungal infections into the mix too, and there's potential for a lot of discomfort.

What's more, if left untreated, these foot problems can cause pain and affect the way people walk, which in turn can cause knee, hip and back problems. Treating foot conditions as soon as possible is therefore important to limit the long-term impact on the body.

This module is suitable for all members of the pharmacy team who wish to increase their knowledge of common conditions and treatment options. This module has been endorsed with the NPA's Training Seal as suitable for use by pharmacy teams as part of their ongoing learning. This module can also form part of your Team Tuesday training.



Understanding the problem



DID YOU KNOW?

Nine in 10 people experience some sort of foot problem, with one in five admitting to suffering with foot pain often or constantly.

1

Fungal infections

A contagious condition caused by a fungus called *Tinea pedis*, athlete's foot flourishes in the warm, moist environment between the toes. It is often picked up from damp changing rooms and swimming pool floors.

Symptoms usually start between the fourth and fifth toes and the skin appears red and itchy, later becoming white, inflamed and weepy. It may also crack and peel.

Although not a serious condition, if left untreated athlete's foot can spread to other areas of the foot and toenails.

If infection spreads to the nail, it may look thickened or discoloured at first. If the infection gets worse, white or yellow patches can appear where the nail has come away from the nail bed. The nail may also become soft and crumble and the skin next to it may be inflamed or scaly. Left untreated, the infection can destroy the nail and nail bed and become painful.

2

Verrucas

A verruca (plantar wart) is caused by the human papilloma virus, which gets into the skin through a minor cut or abrasion. They appear as flattened, discreet lesions, usually on the ball of the foot, the underside of the big toe or the heel, either alone or in clusters. Multiple small black spots may be visible on the verruca, which are caused by bleeding in small blood vessels. Verrucas can be tender when squeezed and may cause discomfort when walking.

When to refer to the pharmacist

- If the customer has diabetes as they are more susceptible to further complications
- If athlete's foot has persisted after treatment
- If any condition involves weeping skin
- If symptoms may be due to an infection (e.g. if the foot is hot and painful).

3

Corns and calluses

Corns are caused by rubbing or pressure from ill-fitting shoes. Hard corns are layers of dead skin that build up on the tops of toes and the outside of the little toes. The base of the corn is on the skin's surface with the tip pointing inwards, pressing on nerve endings and causing pain. Soft corns are white, rubbery lumps found between the toes.

Calluses are caused by friction and pressure when the skin rubs against shoes or the ground. These have no centre and are less sharply defined than corns. They commonly appear on the ball of the foot, outside of the big toe and the sides of the heel. They produce a burning sensation, are yellowish in colour and are hard and rough.

4

Cracked heels

If the skin on the heels is particularly dry, it becomes thickened, hard and less flexible. When walking, pressure is put on the heel, causing the skin to stretch and spread out. If the skin is too inflexible to stretch, it will crack. Symptoms include dry, scaly areas of skin and vertical cracks or splits in the heel. In severe cases, the cracks may bleed or become inflamed or infected. Dry skin worsens with age as the skin loses elasticity and moisture.

5

Bunions

A bunion is a bone deformity of the joint at the base of the big toe. The toe will point inwards and forces the bone to stick out. The cause is unknown but is thought to be linked to family history and wearing ill-fitting shoes can worsen the condition.

6

Heel pain

The most common cause of heel pain is plantar fasciitis – inflammation of the plantar fascia, which is a tough band of connective tissue that supports the arch of the foot and also acts as a shock absorber. It is often described as a stabbing or aching pain about 4cm forward from the heel, although it can occur anywhere on the underside of the heel. It may be tender to touch and is often worse when walking first thing in the morning or after long periods of rest. Plantar fasciitis usually goes away with time but steps can be taken to ease any discomfort.



? DID YOU KNOW?

Women have about four times as many foot problems as men.

Treatment options

1

Fungal infections: feet should be washed daily with soap and dried thoroughly. An antifungal treatment can then be applied and there are two types available over the counter. Fungistatics slow down the rate at which the fungus grows. Most fungistatics (e.g. miconazole, clotrimazole and tolnaftate) should be applied two to three times a day for around two weeks and for bifonazole, treatment is once daily. Treatment should be continued for a couple of weeks after the infection has cleared to stop it returning. Example: Canesten Bifonazole Once Daily 1% w/w Cream. Some products also contain hydrocortisone to treat inflammation. Examples include Canesten Hydrocortisone Cream and Daktacort HC.

Fungicidal treatments kill the fungus and are usually applied once or twice a day for a week. The only fungicidal available over the counter is terbinafine. Examples include Lamisil AT 1% Gel.

For fungal nail infections, oral antifungal tablets are available on prescription and antifungal nail solutions (e.g. those containing amorolfine) or those that reduce the nail's pH to make the environment hostile to fungal growth are available OTC for mild infections. Examples include: Curanail and Nailner. These treatments can take months to work, with toenails typically needing nine to 12 months of treatment. A healthy nail growing from the base is a sign that the treatment is working.

2

Verrucas: salicylic acid, silver nitrate, and lactic acid in combination with salicylic acid destroy verrucas. Most take up to 12 weeks to work. Examples include Bazuka Gel. Freeze treatments may be suitable for stubborn cases and when rapid relief is desired, as they can remove verrucas in one treatment. Examples include Scholl Freeze Verruca and Wart Remover, Bazuka Sub-Zero.

3

Corns and calluses: salicylic acid can be used to remove layers of hard skin, along with a foot file or pumice stone. Salicylic acid should not be used on healthy skin. Cushioning products help relieve pressure on the affected area, reducing pain and preventing reoccurrence. A moisturising cream containing ingredients such as urea can also help. Examples include Scholl 2 in 1 Corn Express Pen and Carnation Callous Caps.



4

Cracked heels: the affected skin should be removed using a foot file, pumice stone or exfoliating product. Examples include Micro Pedi. The skin should then be rehydrated using a foot cream. Examples include Flexitol.

5

Bunions: painkillers, shoe insoles, bunion pads and correctly fitting shoes can help to minimise pain.

6

Heel pain: usually, the pain will ease in time, but customers should be advised to rest their foot/feet and avoiding running, excess walking or standing. Painkillers such as paracetamol may help ease pain. Wearing shoes with cushioned heels and a good arch support is important and walking barefoot should be avoided. Heel pads and arch supports may be suitable.



Additional advice

In order to help keep their feet healthy, customers should be advised to:

- Wear properly-fitting shoes that don't rub and aren't too tight
- Wear flip-flops in communal areas such as changing rooms and showers to avoid verrucas and athlete's foot
- Keep the feet clean, dry them properly after a bath, shower or swimming and let air get to the toes when possible
- Wear cotton socks and change them everyday
- Alternate between different pairs of shoes so that they have chance to dry out before being worn again
- Don't share towels when they have an infectious foot problem such as a verruca, athlete's foot or a fungal nail infection.

! Important

Having diabetes increases people's risk of developing foot problems as the condition can reduce blood flow to the feet and damage nerves. It's therefore important to encourage customers with the condition to check their feet every day and seek treatment for any problems straight away.



SIGNPOSTING

For more information, see:

- Use your *Counter Intelligence Plus* training guide
- NHS Choices – foot pain: [nhs.uk/conditions/foot-pain](https://www.nhs.uk/conditions/foot-pain)
- NHS Choices – foot problems, a visual guide: [nhs.uk/Tools/Pages/Foot-problems-a-visual-guide.aspx](https://www.nhs.uk/Tools/Pages/Foot-problems-a-visual-guide.aspx)
- The College of Podiatry – common foot problems: [scpod.org/foot-health/common-foot-problems](https://www.scpod.org/foot-health/common-foot-problems)
- Diabetes UK: [diabetes.org.uk/Guide-to-diabetes/Complications/Feet/Taking-care-of-your-feet](https://www.diabetes.org.uk/Guide-to-diabetes/Complications/Feet/Taking-care-of-your-feet)

TEST YOURSELF ONLINE

GOOD PRACTICE KNOWLEDGE IS IMPORTANT WHEN ADVISING CUSTOMERS



Questions

1. What percentage of people experience some sort of foot problem?

- a) 30 per cent
- b) 75 per cent
- c) 90 per cent
- d) 100 per cent

2. Which of the following statements about verrucas is **FALSE**?

- a) They are caused by *Tinea pedis*
- b) They are often found on the ball of the foot
- c) Small black spots may be visible
- d) They can appear in clusters

3. Which of the following statements about heel pain is **TRUE**?

- a) It is known as a plantar wart
- b) It is often worse when walking last thing at night
- c) It only goes away with treatment
- d) None of the above

4. Which of the following customers should be referred to the pharmacist?

- a) A customer who has had athlete's foot for more than a month and treatment hasn't worked
- b) A 30-year-old woman who has cracked heels that are weeping
- c) A 12-year-old boy with several verrucas
- d) All of the above

5. Which of the following treatments should **NOT** be used to treat athlete's foot?

- a) Miconazole
- b) Bifonazole
- c) Salicylic acid
- d) Terbinafine

6. Which of the following is good advice to give to someone looking to implement a good footcare routine?

- a) Wear cotton socks and change them everyday
- b) Wear flip-flops in communal areas
- c) Dry feet properly after a bath, shower or swimming
- d) All of the above



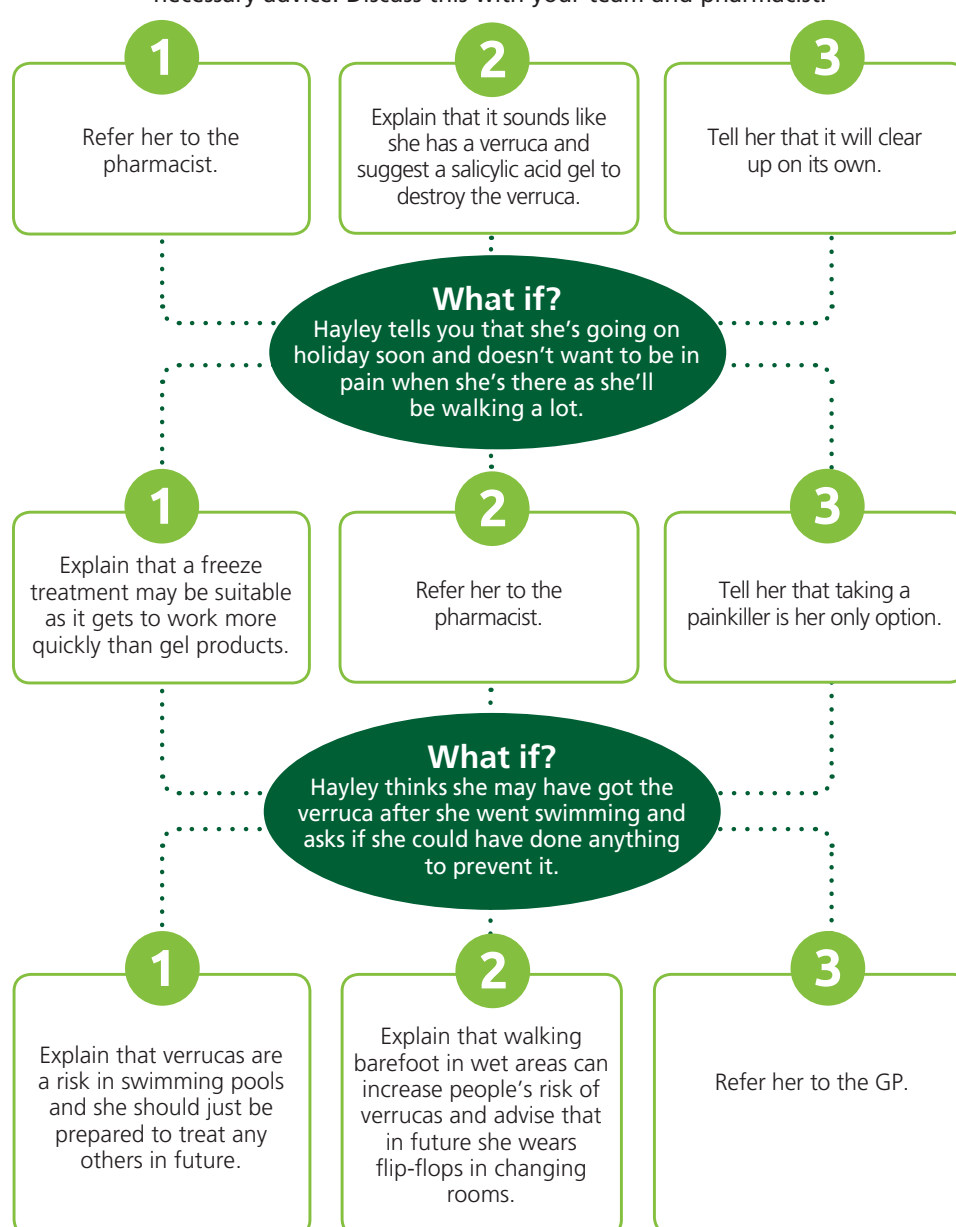
Scenario

Hayley, 34, comes into the pharmacy and asks for a word about a problem she's got on her foot. It's a patch of skin that's got black dots on it and it's quite uncomfortable when she walks. She wants to know if there's anything she can do about it.



What would you recommend?

For each part of this scenario, think about the decision you would make and, importantly, why you would choose that option. In addition, for each decision that you make, think about how you would talk to the customer and provide the necessary advice. Discuss this with your team and pharmacist.



Go to www.tmmagazine.co.uk to submit your answers to these questions. When you pass, you'll be able to download a certificate to showcase your learning. You can also add this to your online, personalised learning log.

www.tmmagazine.co.uk