

Foot care and Parkinson's

Parkinson's can cause problems with your feet. You may also find it more difficult to look after your feet if you have certain symptoms like a tremor. This information looks at issues you might have and things that can help.

What foot problems can people with Parkinson's experience?

Some foot problems, such as corns, bunions and verrucas, can affect anyone, whether they have Parkinson's or not. But there are other foot problems that are related to the condition.

Problems with walking

For many people, problems with gait (the way you walk) may be one of the earliest signs of Parkinson's. So it is important to be aware of some of the main issues you may experience in your feet and ankles.

- You may notice that you have difficulty with balance.
- Your posture may worsen.
- You may experience mobility problems such as stiffness in your muscles.

These issues can mean that your pattern of walking changes and some people find that their stride gets shorter. You may also experience freezing, where your feet feel glued to the ground and it is difficult to take a step.

Some people with Parkinson's experience ankle or foot stiffness. It can affect your ankle joint and how easy it is to bend your foot up and down.

If you experience stiffness in your feet and legs, it can make a heel-to-toe pattern of walking more difficult. Rather than striking the ground with your heel and then pushing off with your toes, you may shuffle, or walk in a more flat-footed way.

A flat-footed gait

A flat-footed gait can cause foot, leg and even knee pain. It can also lead to stiffness or muscle contractions. This is when the muscles tighten and shorten on their own.

If you have a flat-footed gait you may find it harder to move your feet around. You may also find it is more difficult for your feet to absorb the impact of striking the ground.

In the long term, these problems may affect your mobility. They may also lead to pressure problems such as too much hard skin on the soles of your feet.

A podiatrist is a healthcare professional specialising in the care of feet. They can give you tips to help with these issues. A physiotherapist can also suggest exercises to help ease any problems.

Find out more: see our information on physiotherapy and Parkinson's.

Swelling

Swelling is a common problem for people with Parkinson's, particularly for those who have movement difficulties.

If you don't exercise very much, fluid can build up in the feet, ankles and lower legs. This is known as oedema. Ankle swelling is also a side effect of some Parkinson's medication.

Swelling can get worse during the day and go down overnight. Sometimes this is called 'postural oedema' because gravity causes the build-up of fluid around the ankles when you stand up.

While the swelling is usually mild, some people describe their legs as feeling heavy. They may also have difficulty putting on shoes because they feel tighter than usual.

Wearing footwear that can be loosened during the course of the day may help, but it is important to make sure your shoes still hold firmly onto your feet to avoid the risk of falling.

Sometimes your healthcare professional may recommend a diuretic drug. Diuretics help to remove excess fluid from the body by increasing the amount of urine you pass.

Being active can help reduce swelling. You could try the following two activities:

- When sitting, have your legs raised on a footstool and exercise your ankles regularly (for example flex them up and down).
- Lie flat with your legs slightly raised on a pillow three to four times a day to help reduce excess fluid.

See our section on exercise and foot care further on in this information to find out more about staying active.

Dystonia and toe curling

Dystonia is a movement disorder that causes contractions in various muscles. This is when muscles become tighter and shorter than normal, making them difficult to stretch.

In Parkinson's, dystonia can cause repeated, twisting movements, (spasms) which create abnormal postures in the affected body part. You may find this painful.

Sometimes dystonia may cause your toes to curl under your foot. Your ankle may also turn inwards. This can put pressure on the top of your foot rather than the sole.

You may also have 'hyperextension' of the big toe, which causes it to stick up. This can lead to it rubbing on the top of your shoe.

One of the most common causes of dystonia and toe curling is Parkinson's medication – speak to your specialist or Parkinson's nurse to see if changing your dosage might help ease it.

Find out more: see our information on muscle cramps and dystonia.

Toe splints

A removable silicone splint can help to stop toe curling from getting worse and give the toes something to grip. It is made from silicone rubber and moulded around your toes to support them when they are straight.

If your toe curling causes you a lot of problems you may need surgery. Your specialist or podiatrist can advise you about this.

How can a podiatrist/chiropodist help with foot care?

If you have problems with your feet, you can visit a podiatrist or a chiropodist for advice – there is no difference between them. In this information we use the term podiatrist to cover both.

The titles ‘podiatrist’ and ‘chiropodist’ are protected. People who do these jobs must have a BSc degree, or equivalent, in podiatric medicine to be registered with the Health and Care Professions Council.

Podiatrists look at all areas of foot care including how the foot should work during ‘normal’ walking and the problems caused by not walking in a typical pattern.

Podiatrists often work with a physiotherapist to help with foot-related mobility problems and prevent falls.

Your podiatrist can train you to stretch and exercise your muscles to reduce the effects of stiffness or rigidity on your feet. They can also show you and your carer simple massage techniques to improve your movement and circulation.

A podiatrist can also design tailor-made insoles, known as orthoses. These include inserts or arch supports that you can place in your shoes.

There are also ankle and foot insoles, which can be particularly helpful if you have balance problems. Insoles can help with foot and leg pain and improve the way you walk.

Where can I find a podiatrist?

Podiatrists work in a variety of places including community health centres, nursing homes, doctors’ surgeries and hospitals. If you have serious mobility problems, they may be able to visit you at home.

Depending on the funding available from your local health authority, you may need a referral from your GP for podiatry care on the NHS.

If you think your foot problems put you at risk of ‘trips, slips and falls’, let your GP know – these are key things that may help them refer you.

You do not need a referral to see a private podiatrist. The Society of Chiropodists and Podiatrists can advise you on how to find one in your area.

Making the first appointment

If possible, you should try to make your appointment for a time when you think you are least likely to experience tremor or other involuntary movements. This will make treatment easier and help avoid the risk of injury.

Initial appointment

Your podiatrist will need to know your full medical history – not only your Parkinson’s symptoms, but also any other health problems you have, as these can affect your feet.

Your podiatrist will treat any immediate problems and agree a care plan with you. This may include follow-up appointments and advice on self-care.

If you take a number of medications, it would be helpful to take a list of them with you, as well as the details of what they are for. Parkinson's UK produces a medication card, where you can list all of your medications, which you may find useful.

Your podiatrist can assess the condition of your skin and nails, as well as doing some simple tests to check the circulation and the nerves in your feet. They will also watch the way you walk and move your feet into different positions, to create a gait analysis.

Footwear

Make sure your shoes fit well, as shoes that don't fit correctly can damage your feet and increase the risk of tripping up or falling.

If you wear shoes that are too narrow, your toes can become cramped and may overlap. If you wear heels that are too high, too much pressure is put on the balls of your feet. This can cause pain and affect mobility.

Try to choose shoes that have a low, broad heel, and that fasten over the top of your foot close to the ankle. Shoes with laces, Velcro or a strap and buckle will have a better hold on your foot.

Try to avoid wearing slippers, as these do not give the same support as shoes. You also need to make sure that you have enough room to wiggle your toes. Trainers made from natural or breathable fibres can often provide a good fit and strong support.

Leather-soled shoes should be avoided as they could increase the risk of trips and falls.

If you experience oedema, or other foot problems such as dystonia, try to shop for shoes when your symptoms are at their worst. This will help you find shoes that always fit well.

If you have been prescribed a shoe insert, take it with you when you are buying shoes. Also remember that if a shoe needs 'breaking in' it might not fit you or be comfortable day-to-day.

Exercise and foot care

Exercise is good for everyone and it's especially good for you if you have Parkinson's. It can help you manage your physical Parkinson's symptoms and continue doing day-to-day activities.

If you have problems with your feet it is important that you do exercise that is right for you. This could be as simple as chair-based exercises or muscle stretches.

A physiotherapist can show you foot and ankle exercises to help you with your balance and avoiding falls. This will keep your feet healthy and help prevent these issues causing regular problems.

When exercising, make sure that your footwear fits securely and has a supportive sole. A trainer-style shoe will give support, but it's important to choose trainers that are right for the type of exercise you are going to do. Good sports shops can help with this so it's worth asking.

A custom-made insole can also spread the impact of your foot hitting the ground over the whole of the sole of your foot. This will help to improve the way you walk and allow your foot and calf muscles to work more effectively.

Find out more about the benefits of exercise and the different types to focus on at parkinsons.org.uk/exercise

General foot care tips

- Wash your feet daily in warm, but not hot, water with a gentle soap that does not irritate the skin. Do not soak them for any longer than an average bath time, as this may destroy some of the skin's natural oils.
- Dry your feet carefully, especially between your toes. Do not try to get a towel between your toes if they are curled or rigid – try using a baby wipe instead.
- If your skin is dry, use moisturising cream all over your feet except between the toes. You could also use lanolin wax or olive oil.
- Apply moisturiser little and often – two times a day if possible.
- Remove hard skin by rubbing gently with a pumice stone.
- If your skin is very thick or hard, a foot dresser can help. They are usually wide and have a handle which can give you a good grip. If you have hard skin that is painful, speak to a podiatrist.
- You should file your toenails weekly with a nail file (emery board). You may also find a 'diamond deb' file useful because it is stronger with a rougher surface. This can help you deal with more difficult parts of your feet.
- Don't file your nails too short or down at the corners, as this can lead to ingrowing nails.
- Do not cut corns, calluses or ingrown nails yourself, or treat them with 'corn cures' or 'corn plasters'. These contain strong acids, which, if not used properly, can lead to burns or ulcers.
- It may be helpful to avoid nail clippers or scissors because they are sharp, especially if you experience tremor or involuntary movements.
- Get treatment as soon as possible for burns, cuts and breaks in the skin, or if you notice any unusual changes in colour, smell or temperature.
- Avoid exposing your feet to extreme temperatures and dampness.
- Exercise when possible to improve the circulation in your feet.
- Extend the life and fit of your shoes by using a shoe horn and shoe trees.
- Don't wear the same shoes all the time. This will lengthen the life of each pair and spread the pressures on your feet.

If you and your carer find it hard to manage your toenails or feet, speak to a podiatrist.

More information and support

Health and Care Professions Council
0300 500 6184
www.hcpc-uk.co.uk

The Society of Chiropodists and Podiatrists
020 7234 8620
reception@scpod.org
www.scpod.org

Parkinson's nurses

Parkinson's nurses provide expert advice and support to people with Parkinson's and those who care for them. They can also make contact with other health and social care professionals to make sure your needs are met.

The role of the Parkinson's nurse varies. Each will offer different services, aiming to meet local needs. Some nurses are based in the community, whereas others are based in hospital settings.

Many Parkinson's nurses are independent prescribers. This means they can prescribe and make adjustments to medication, so someone with Parkinson's doesn't always need to see their specialist for changes to or queries about their Parkinson's drugs.

Parkinson's nurses may not be available in every area, but your GP or specialist can give you more details on local services.

You can find out more at parkinsons.org.uk/nurses

Information and support from Parkinson's UK

You can call our free confidential helpline for general support and information. Call **0808 800 0303** (calls are free from UK landlines and most mobile networks) or email hello@parkinsons.org.uk.

We run a peer support service if you'd like to talk on the phone with someone affected by Parkinson's who has faced similar issues to you. The service is free and confidential – ring the helpline to talk to someone about being matched with a volunteer.

Our helpline can put you in touch with one of our Parkinson's local advisers, who give one-to-one information and support to anyone affected by Parkinson's. They can also provide links to local groups and services.

We have a self-management programme for people with Parkinson's, partners and carers. It is an opportunity to reflect on life with the condition, learn about self-management and think about the future. To find out if there is a group near you, visit parkinsons.org.uk/selfmanagement

Our website **parkinsons.org.uk** has a lot of information about Parkinson's and everyday life with the condition. You can also find details of your local support team and your nearest local group meeting at parkinsons.org.uk/localtoyou

Visit **parkinsons.org.uk/forum** to chat to other people with similar experiences on our online discussion forum.

Thank you

Thank you very much to everyone who contributed to or reviewed this information sheet:

Richard Walker, Consultant Physician, North Tyneside General Hospital

Fiona Lindop, Specialist Physiotherapist, Derby Teaching Hospitals NHS Foundation Trust

Thanks also to our information review group and other people affected by Parkinson's who provided feedback.

Can you help?

At Parkinson's UK, we are totally dependent on donations from individuals and organisations to fund the work that we do. There are many ways that you can help us to support people with Parkinson's.

If you would like to get involved, please contact our Supporter Services team on **0800 138 6593** or visit our website at **[parkinsons.org.uk/donate](https://www.parkinsons.org.uk/donate)**. Thank you.

Our information

All of our most up-to-date information is available at **[parkinsons.org.uk/informationsupport](https://www.parkinsons.org.uk/informationsupport)**

If you'd prefer to read one of our printed leaflets or booklets, find out how to place an order at **[parkinsons.org.uk/orderingresources](https://www.parkinsons.org.uk/orderingresources)** or by calling **0300 123 3689**.

We make every effort to ensure that our services provide current, unbiased and accurate information. We hope that this will add to any professional advice you receive and help you to make any decisions you may face. Please do continue to talk to your health and social care team if you are worried about any aspect of living with Parkinson's.

If you'd like to find out more about how we put our information together, including references and the sources of evidence we use, please contact us at **publications@parkinsons.org.uk**

Foot care and Parkinson's (FS51/2018)

Do you have any feedback about this information? Your comments will help us ensure our resources are as useful and easy to understand as possible. Please return to **Information Content team, Parkinson's UK, 215 Vauxhall Bridge Road, London SW1V 1EJ**, or email publications@parkinsons.org.uk. Thank you!

1. Please choose the option that best fits you.

- I have Parkinson's and was diagnosed in I care for someone with Parkinson's
 I have a friend or family member with Parkinson's I'm a professional working with people with Parkinson's
 Other (please specify)
-

2. Where did you get this information from?

- GP Specialist Parkinson's nurse Parkinson's UK local group Parkinson's UK local adviser
 Ordered directly from us Call to the helpline
 Other (please specify)
-

3. Has it answered all your questions?

- Yes, completely Yes, mostly Not sure Partly Not at all

4. How easy was it to understand?

- Very easy Easy Not sure Quite difficult Very difficult

5. Has it helped you manage your condition better, or make choices that have improved your life in some way?

- It helped a lot It helped a little No change It didn't help It made things worse

6. What is your ethnic background?*

- Asian or Asian British Black or Black British Chinese Mixed White British White other
 Other (please specify)
-

*We ask about your ethnicity to ensure our information is reaching a broad range of people. However, this question is optional.

Want to hear more from us?

- I would like a response to my feedback I would like to be a member of Parkinson's UK
 I'm interested in joining the Information review group, to offer feedback on Parkinson's UK information

If you've answered yes to any of these options, please complete your details below.

Name

Address

Email

Telephone

How would you prefer us to contact you?

- Email Post Phone

We will not pass on your details to any other organisation or third party. To find out more, read our privacy policy at parkinsons.org.uk/termsandconditions

Every hour, two people in the UK are told they have Parkinson's – a brain condition that turns lives upside down, leaving a future full of uncertainty.

Parkinson's UK is here to make sure people have whatever they need to take back control – from information to inspiration.

We want everyone to get the best health and social care. So we bring professionals together to drive improvements that enable people to live life to the full.

Ultimately, we want to end Parkinson's. That's why we inspire and support the international research community to develop life-changing treatments, faster. And we won't stop until we find a cure.

Together we can bring forward the day when no one fears Parkinson's.

Parkinson's UK

Free confidential helpline **0808 800 0303**

Monday to Friday 9am–7pm, Saturday 10am–2pm. Interpreting available.

NGT Relay **18001 0808 800 0303** (for use with smart phones, tablets, PCs and other devices).

For more information see www.ngts.org.uk

hello@parkinsons.org.uk

parkinsons.org.uk



Last updated January 2018. We review our information within three years.

Please check our website for the most up-to-date versions of all our information.

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