

Lupus patients should attend a chiropodist (now often called a podiatrist) on at least one occasion for foot care advice. Sometimes the chiropodist will recommend regular checkups even if there are no current problems. Availability of NHS chiropodists does vary in different areas but lupus patients should be able to have NHS chiropody or podiatry regardless of age. Some rheumatology departments employ specialist podiatrists. If looking for a private practitioner check they are HPC Registered (Health Professional Council www.hpc-uk.org).

THE LUPUS UK RANGE OF FACT SHEETS

A range of fact sheets are available as follows:

1. LUPUS Incidence within the Community
2. LUPUS A Guide for Patients
3. LUPUS The Symptoms and Diagnosis
4. LUPUS The Joints and Muscles
5. LUPUS The Skin and Hair
6. LUPUS Fatigue and your Lifestyle
7. LUPUS and Pregnancy
8. LUPUS and Blood Disorders
9. LUPUS and Medication
10. LUPUS and the Kidneys
11. LUPUS and Associated Conditions
12. LUPUS and the Brain
13. LUPUS The Heart and Lungs
14. LUPUS The Mouth, Nose and Eyes
15. LUPUS and Light Sensitivity
16. LUPUS and the Feet
17. LUPUS and Men
18. LUPUS and Mixed Connective Tissue Disease

LUPUS UK is the registered national charity caring for people with presently incurable lupus and has over 6,000 members who are supported by the Regional Groups.

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Please contact our National Office should you require further information about lupus. LUPUS UK will be pleased to provide a booklist and details of membership.

LUPUS UK

ST JAMES HOUSE, EASTERN ROAD
ROMFORD, ESSEX RM1 3NH
TEL: 01708 731251
www.lupusuk.org.uk

LUPUS and the Feet



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LUPUS and the Feet

Does lupus cause foot problems?

The foot is a complex structure and foot problems are very common in the general population especially amongst older people. Lupus, however, can cause specific joint and muscle pains in the feet; joints may ache even though there are no obvious signs of inflammation or swelling. Even a stiff hip or back can affect the way we walk, perhaps by causing us to favour one leg, and so cause trouble elsewhere. Abnormal walking patterns can lead to misshapen feet with toe deformities such as bunions and hammertoes. Toe deformities can then increase the risk of friction and pressure inside the shoes causing calluses and corns. Foot complaints tend to be under-reported amongst lupus patients, perhaps because other problems are more obvious and more important.

Can skin problems affect the feet?

Corns and callus occur frequently in older patients, those with problems walking, or those who wear badly fitting shoes. Lupus and the drugs used to treat lupus can aggravate the problem of this hard skin. Specific skin problems associated with lupus can occur on the feet but these are rare.

Verrucas can sometimes be a nuisance to people who are taking immunosuppressants. But,

contrary to popular belief, verrucas are not often very painful and although they are caused by a virus and can be spread they are not highly contagious. They tend to occur only where the skin is damaged. However, they can linger when the immune system is compromised and may need specialised treatment if they are troublesome.

Does lupus affect toe nails?

25% of people with lupus have some sort of nail problem. In some patients nail growth can be slow, leading to weak, thin nails sometimes with pitting in the nail plate and the nail may become loose. In others, inflammation around the nail or Raynaud's phenomenon can lead to thickened or ridged nails. Black or brown marks in the nail are sometimes seen due to tiny bleeding points in the nail bed. Nail problems are generally cosmetic although involuted (curved) or ingrown toenails are common. These can be very sensitive and it is important to get professional help to prevent ingrown toenails from becoming infected.

So what are the risks to the foot in lupus?

Serious foot problems are rare but any condition that can reduce the amount of blood reaching the toes can lead to ulceration and infection. This can be prevented with effective care.

About 20-30% of lupus patients develop Raynaud's phenomenon (spasms in the blood vessels causing cold or white fingers or toes). Chilblains (small, red, itchy swellings) are also common, often in association with Raynaud's. They can become painful and are an abnormal

reaction to cold, usually on toes and fingers. They can dry out leaving cracks in the skin, which expose it to infection. It is important to keep the feet warm but not to warm them up too quickly if they are cold.

Vasculitis occasionally causes very painful toes and feet and can lead to infections. It may cause small red lines in the cuticle or nail fold, or little red bumps on the legs; sometimes painful red nodules can form on the legs. Occasionally these red bumps can ulcerate.

Steroids can make the skin thinner and more prone to damage and infection. So it is especially important to look after the feet, which are prone to pressure, rubbing and damage from shoes.

How can I help myself?

Generally lupus does not cause major foot problems but no feet will stand up to too much abuse or neglect. Nails must be cut carefully - it is often easier and safer to file them rather than cut them, particularly if they are thick or uneven. The feet should be washed and examined daily for any damage or problems. Any dry skin should be kept moist with a good moisturising cream to prevent cracks from occurring.

It is vital to wear well-fitting, supportive footwear. Ideally, shoes should have a soft cushioned sole, a pliable yielding upper and fasten firmly round the instep, preferably with laces. There should be no high-pressure areas on the feet which rub the skin. Feet must be kept warm. Two thin pairs of socks are warmer than one thick pair and in cold weather thermal insoles should be put in shoes and bed socks worn at night.