



St Margarets Foot Clinic

Podiatry / Chiropody services

- **Simple nail cutting**

For those patients who have simple nails which means they are not painful, damaged or contain any pathologies such as in-growing/fungal/thick etc. Patients will have no other issues including any underlying medical condition such as diabetes, poor circulation, loss of feeling in the feet, on steroids or any other high-risk medication. Patients will not require any intervention to any corns/callus/verruca etc.

All appointments start with an assessment to determine the patient is healthy and their feet are not at risk. The podiatrist will then inform you if you are eligible for a Simple nail cutting appointment in future. Simple nail cutting is a reduced-price appointment.

- **Fungal nails**

If you suspect you have a fungal nail infection, the podiatrist will give you advise on different management options. The appearance of the nail varies from small superficial which cloud like marks to extreme thickness, crumbly, pungent smelling nails. Please be informed that fungal nail infections are difficult to cure and treatment can be long. It is very likely that nail clippings will be taken to send to pathology for a positive diagnosis of the organism. This will ensure that the treatment is warranted as many fungal infections turn out to be miss-diagnosed. Advice leaflets will be provided.

- **Athletes Foot**

This is a fungal skin infection which can present as dry peeling skin, sometimes with red spots, small watery blisters with or without itching. Athletes foot can predispose fungal nail infections so its important it's dealt with quickly and thoroughly. The podiatrist will assess the level of infection and discuss treatment options with you. Please be informed that fungal infections are difficult to treat and if not treated correctly is very likely to return. Advice leaflet will be provided.

- **Thick or damaged nails**

These types of nails may have occurred with one trauma or repetitive trauma over many years. The nail appears thick, usually lighter in colour and may or may not be painful. The podiatrist will discuss the treatment options with you. The option of Nail Reconstruction can also be discussed (see below). Please be informed that once nails have been damaged, they are unlikely to ever grow back 'normally' again. The nail(s) can be managed and treated to keep then comfortable and appear aesthetically pleasing. Advice leaflet will be provided.

- **Cracked heels**

Due to the hot weather, backless sandals or dry central heating in the winter, the heels can become very dry, callused and start to crack. If the crack become deep, they can become very painful, they can sometime bleed and/or become infected. The podiatrist will assess the feet, remove the dry and hard skin to reduce the depth of the crack. Urea based emollients are used to moisturise the skin. You will be given advise on daily management to gradually help resolve the problem. Advice leaflet will be provided.

- **Callus/hard skin**

Due to the structure of the foot, poor fitting footwear, long-standing jobs, the foot may develop hard skin that builds and becomes uncomfortable. The podiatrist will assess the possible cause of the problem and help patients eliminate the cause. The hard skin will be removed and advise will be given on how best to maintain the foot to prevent future problems. Advice leaflet will be given.

- **Corns**

Corns are dense cones of hard skin predominately occurring on weight-bearing joints. The pressure from poor fitting footwear, abnormal structure of the foot causes hard skin to develop that can become very painful. The podiatrist will assess the cause of the problem and discuss ways to eliminate the cause to help prevent it occurring in future. The podiatrist will remove the corn and provide any padding if needed. Advice leaflets will be given.

- **Verrucae – chemical/Freezing/Needling under local anaesthetic**

Verrucae are viruses that enter the skin via a small abrasion, they can incubate up-to 8 months before a verruca develops. The virus switches off the cells immune system (your general immune system is likely to be normal). This allows the virus to live happily for a long time. The podiatrist will diagnose a true verruca and explain all the treatment options available, this may also include no treatment especially if the verruca is small and not painful. Please be aware that verrucae are difficult to resolve, it may take many appointments before the verruca has fully gone. Appointments are usually every 2 weeks for continued treatment. In some cases, Needling may be a good option for treatment. This procedure requires less down time and less re-visits. It requires the use of local anaesthetic, so the podiatrist will offer this if the patient is suitable. Advice leaflets will be given.

- **In-growing toe nails: non-surgical and nail surgery**

When the nail is cutting into the side of the skin causing pain, swelling, redness and possible discharge the nail is truly in-growing. Otherwise, it may well be an involuted nail. This is when the sides are curling and causing pain without breaking the skin. With a true in-growing nail, a non-surgical option will be sought first as it may be caused by a poorly cut nail. If the problem keeps re-occurring a surgical option may be advised.

- **Nail surgery under local anaesthetic**

If the nail is truly in-growing/ painfully involuted/thick and painful or unsightly the podiatrist will discuss surgery. This procedure is highly successful, it uses Local anaesthetic and phenol to prevent the nail re-growing along the sides. Unless the whole nail is being removed, the central part of the nail will be unaffected. Please be mindful that healing times can take longer if the toe is not looked after as instructed by the podiatrist. Nail surgery appointments are booked after an initial assessment to determine suitability for the procedure.

- **Plantar heel pain (sometimes called Plantar Fasciitis)**

Sometimes due to increased activity, increased body weight, poor footwear the heel can become acutely painful. Especially when trying to walk after long periods of rest. The podiatrist will assess the heel and explain any stretches that need doing as well as possible insole manufacturing to help support the foot. Plantar heel pain (previously called Plantar Fasciitis) needs time to resolve. Advice leaflet will be provided.

- **Nail Reconstruction**

If you feel your nail is unsightly due to thickness, fungal infection, trauma etc and require a temporary fix. Nail reconstruction is the use of a UV gel that is cured to build a false nail that can be aesthetically pleasing. The nail can last 4-6 weeks if the after care is followed correctly. The nail can be painted and cut as normal. Nail reconstruction appointments are booked after an initial assessment appointment to determine suitability, to carry out prep-work on the nail and provide a quote.

- **Diabetic assessments**

Diabetic patients' feet can become very vulnerable if the sugar levels are not kept under control or the patient has been diabetic a long time. A diabetic foot check will help to determine if the feet are at risk, this information can be used to liaise with other health professional and prevent any further damage. The podiatrist will discuss any concerns and give advice on management and maintenance of the feet. A report can be given to the GP on request.