

Foot care and Parkinson's

Symptoms

Find out more about foot problems in Parkinson's and what can help to manage them



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 dystonia.

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's important to be aware of some of the main issues you may experience in your feet and ankles. This might include:

- difficulty with balance
- your posture getting worse
- mobility problems, such as stiffness in your muscles

These issues can mean that your pattern of walking changes.

For example, some people find that their stride gets shorter. You may also experience freezing, where your feet feel glued to the ground and it's 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 'normal' pattern of walking more difficult. This means that, rather than touching the ground with your heel and then pushing off with your toes, you may shuffle, or walk in a more flat-footed way.

Flat-footed gait

Flat foot happens when the arches of your feet (the curved, inside part of the foot) have fallen, either partly or completely.

A flat-footed gait can cause foot, leg and even knee pain.

It can also lead to stiffness or tightness in muscles.

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

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

Swelling

Swelling is a common problem for people with Parkinson's, particularly if you have difficulty moving.

If you're not very physically active, fluid can build up in your feet, ankles and lower legs. This is known as oedema.

In Parkinson's, swelling may affect one side of your body. For example, if one leg is more stiff than the other, it may stop you from moving it as much.

This can cause more fluid to build up in the affected leg.

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 'gravitational oedema' because gravity can cause fluid to build up around the ankles when you stand up.

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

Wearing footwear that can be loosened may help. But it's important to make sure your shoes still fit well 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 how much urine you pass.

Being active and gentle exercise can help reduce swelling. You could try the following:

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

See the 'Being active and foot care' section for more information.

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 also cause repeated twisting movements (spasms), which create unusual postures in the affected body part. You may find this uncomfortable or painful. For some people, the pain can be severe, and can make it more difficult to carry out daily tasks.

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

You may also have 'hyperextension' of the big toe, which causes it to stick up. This can lead to your toe 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 dose might help.

Dystonia and foot drop

Dystonia can also cause foot drop in people with Parkinson's. This is where you have difficulty lifting and moving the front part of your foot and toes. It can make your foot drop down and cause it to drag on the floor when you walk. This can increase your risk of tripping and falling.

Foot drop in dystonia is caused by weakness in the ankle and foot muscles. It can be treated with a foot brace and other aids, such as insoles (see the 'How can a podiatrist or chiropodist help with foot care?' section). Changes to your medication may also help.

If you think you have foot drop, you should talk to your specialist, Parkinson's nurse, podiatrist or physiotherapist.

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

Toe splints

Splints are aids that stop a body part from moving and protect it from injury.

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

If your toes are stuck in a curled position, the silicone will stop them from rubbing against your shoes when you're walking or doing physical activity. This can help prevent blisters.

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 or chiropodist help with foot care?

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

Anyone with the job title 'podiatrist' or 'chiropodist' must have a BSc degree, or equivalent, in podiatric medicine. They must also be registered with the Health and Care Professions Council. You can check if a podiatrist is registered at www.hcpc-uk.org/check-the-register.

Podiatrists look after all areas of foot care. This includes how the foot should work during 'normal' walking and the problems caused by not walking in a typical pattern.

They 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 help reduce the effects of stiffness or rigidity in your feet. They can also show you, and anyone who supports or cares for you, simple massage techniques to improve your movement and circulation.

A podiatrist can also design tailor-made insoles to fit the shape of your feet. These include inserts or arch supports that you can place in your shoes.

Insoles can help with foot and leg pain and improve the way you walk. They do this by supporting your feet and reducing pressure on them. There are also ankle and foot insoles, which can be helpful if you have balance problems.

Where can I find a podiatrist?

Podiatrists work in a variety of places, including community health centres, nursing homes, GP surgeries and hospitals. If you have serious mobility problems, a podiatrist may be able to visit you at home. They work either in the NHS or privately.

To see a NHS podiatrist, you'll need a referral from your GP, Parkinson's nurse or specialist. How easily you can get a referral will depend on podiatry services in your area and how they're funded by your local health authority.

If you think your foot problems put you at risk of trips, slips and falls, let your specialist know. These are key things that may help them refer you.

Some NHS hospitals also accept self-referrals, without you needing to see your GP or specialist first. You should check your local NHS trust's website to see if self-referrals are available in your area.

You don't need a referral to see a private podiatrist. The Royal College of Podiatry (RCOP) can advise you on how to find one in your area. See the 'More information and support' section for their contact details.

Making the first appointment

If possible, try to make your appointment for a time when you think your symptoms will be well managed. 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.

It would be helpful to take an up-to-date list of what medications you're taking with you, and details of what they're for. This should include all the medication you're currently taking (not just for Parkinson's) and what time you take each dose. You can order our medication card for free using the contact details at the back of this booklet.

You might also be asked to bring the footwear you normally wear for daily activities and physical activity.

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.

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.

This will help them to create an assessment of your foot, known as a gait analysis.

Footwear

Wearing comfortable footwear is important for helping you move around properly. It can also help ease Parkinson's symptoms in the feet and legs.

- Make sure your shoes fit well, as shoes that don't fit correctly can damage your feet and increase your risk of tripping over or falling.
- If you wear shoes that are too narrow, your toes can become cramped and may overlap. This can prevent your foot from staying balanced and moving around effectively.
- If you wear heels that are too high, too much pressure is put on the balls of your feet and knee joints. This can cause pain and affect movement.

- Try to choose shoes that have a low, wide 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 don't give the same support as shoes. You also should 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.
- Avoid wearing leather-soled shoes, 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've been prescribed a shoe insert, take it with you when you're buying shoes.
- Also remember that if a shoe needs 'breaking in', it might not fit you or be comfortable day-to-day.

Being active and foot care

The more physically active you are, the easier it is to live well with Parkinson's, and can have a positive impact on your symptoms.

If you have problems with your feet, it's important that you choose activities that are 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 from causing problems.

For any physical activity, make sure 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 activity you're 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 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: Find out more about the benefits of physical activity and what activities may be right for you at parkinsons.org.uk/physical-activity

General foot care tips

Here are some general tips that may help you day-to-day. If you and the person who supports and cares for you find it hard to manage your toenails or feet, speak to a podiatrist.

- Wash your feet daily in warm – but not hot – water with a gentle soap that doesn't irritate the skin. Try not to soak them for too long, as this may remove some of the skin's natural oils.
- Dry your feet carefully, especially between your toes. If your toes are curled or rigid, try not to get a towel between them – use 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 or foot file.
- If your skin is very thick or hard, a foot dresser (a metal file) can help. They're usually wide and have a handle which can give you a good grip. If you have hard skin that's 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's stronger with a rougher surface. This can help you deal with more difficult parts of your feet. You can buy these files from chemists or health and beauty shops on the high street.
- Use foot files when skin is dry. It's less easy to see hard skin when feet are wet, which can lead to over-filing.

- Avoid filing your nails too short, as this can lead to ingrown nails.
- Don't cut corns, calluses or ingrown nails yourself, or treat them with corn plasters. These contain strong acids, which, if not used properly, can lead to burns or ulcers.
- Try to avoid nail clippers or scissors because they're sharp, especially if you experience tremor or involuntary movements. Use a nail file instead, once or twice a week.
- Get treatment as soon as possible for burns, cuts and breaks in the skin, or if there are any unusual changes in colour, smell or temperature.
- Avoid exposing your feet to extreme temperatures and dampness.
- Do some light physical activity when possible to improve the circulation in your feet.
- Increase the life and fit of your shoes by using a shoe horn and shoe trees.
- Try not to wear the same shoes all the time. This will increase the life of each pair and can reduce your risk of getting a fungal infection.

More information and support

Health and Care Professions Council

0300 500 6184

www.hcpc-uk.org

Royal College of Podiatry

020 7234 8620

www.rcpod.org.uk

Parkinson's UK information and support

Whatever your journey with Parkinson's, you're not alone.

From the moment you or someone you care about is diagnosed, we have information and support for you.

Speak to one of our friendly expert advisers, including specialist Parkinson's nurses, care advisers, and benefits and employment advisers. We've got information and advice on all aspects of living with Parkinson's.

Get help managing your diagnosis. Our information packs, webinars, courses and support groups can help you and your loved ones understand your Parkinson's diagnosis and better manage your symptoms.

Read our up to date, reliable health information. Our website, booklets and magazines can help you better understand Parkinson's. They're full of tips and advice on managing your condition and supporting a loved one.

Find ways to get active, stay active and live well with Parkinson's. Whatever your fitness level, we'll help you find the right activities for you.

Connect with other people with Parkinson's, families, friends and carers. Across the UK, in your local area or online. We'll help you meet others who understand what you're going through, because they're going through it too.

Find out more

- Call our helpline on **0808 800 0303** or email **hello@parkinsons.org.uk** to speak to an expert adviser.
- Visit **parkinsons.org.uk/information-and-support** to read our information or find support that's local to you.
- Call **0330 124 3250** or visit **parkinsons.org.uk/order-print-booklets** to order free printed information.

Thank you

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

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

All of our information is checked by experts and other people with Parkinson's, so you know it's information you can trust.

Feedback

If you have any comments or feedback about our information, please call **0800 138 6593**, email **feedback@parkinsons.org.uk**, or write to us at Parkinson's UK, 50 Broadway, London, SW1H 0BL.

If you'd like to find out more about how we put our information together or be part of the team that reviews our health content, please contact us at **healthcontent@parkinsons.org.uk** or visit our website at **parkinsons.org.uk/health-content**.

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 Care team on **0800 138 6593** or visit our website at **parkinsons.org.uk/donate**.

Thank you.

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We're Parkinson's UK,
the charity that's
here to support every
Parkinson's journey.
Every step of the way.

Free confidential helpline **0808 800 0303**
Monday to Friday 9am to 6pm,
Saturday 10am to 2pm (interpreting available)
Relay UK **18001 0808 800 0303** (for textphone users only)
hello@parkinsons.org.uk | parkinsons.org.uk

Parkinson's UK, 50 Broadway, London SW1H 0DB



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