

# IDENTIFYING COMMON FOOT CONDITIONS



	Athlete's Foot	Fungal Nail Infection	Ingrowing Toenail	Verrucas	Corns	Blisters
SYMPTOMS	<p>Skin between toes is intensely itchy, red and flaky, white, cracked and soggy.<sup>1</sup> Infection can spread to sole and side of foot, the skin can be scaly.<sup>1</sup></p> 	<p>Discoloured white/yellow streaks or flaky white patches on toenails.<sup>5</sup> Thick, scaly nail with edges lifting away from the skin and the nail can crumble away.<sup>5</sup></p> 	<p>Sides of toenail have started to put pressure on/grow into the surrounding skin.<sup>8</sup> Skin can be red, swollen, inflamed, painful and may also bleed and ooze pus.<sup>8</sup></p> 	<p>A patch of skin on the sole that can be white with a dark dot in the centre.<sup>11</sup> Can be painful if it is on a part of the foot that carries their weight.<sup>11</sup></p> 	<p>Corns are small, round, thickened patches of skin.<sup>14</sup> Hard corns – pea sized, surrounded by a wider area of hard skin.<sup>15</sup> Soft corns – white and 'rubbery' and found between the toes.<sup>15</sup></p> 	<p>Small pockets of fluid that form in the skin that develop to protect damaged skin.<sup>17</sup> Blister fluid is usually clear but can fill with blood or, if infected, pus.<sup>17</sup></p> 
IMPACT	Customers say it has some impact on their quality of life. <sup>2</sup>	Can limit mobility and ability to do everyday tasks, as well as making them embarrassed, self-conscious. <sup>6,7</sup>	Causes pain and discomfort and can limit ability to do everyday activities. <sup>9</sup>	Can cause embarrassment and pain/discomfort and may limit their ability to play sports. <sup>12</sup>	Can be painful and can affect the way the foot works. <sup>16</sup>	Can be painful and can affect the way customers run or walk. <sup>18</sup>
DURATION	Without treatment, is unlikely to improve and can even spread to the toe nails. <sup>1</sup>	Without treatment, fungal nail infections do not improve. <sup>3</sup>	Left untreated, ingrowing toenails can become ingrown which can lead to infection. <sup>8</sup>	Most verrucas clear up without treatment, but it can take up to 10 years in adults. <sup>11,13</sup>	Corns won't clear up unless the cause of the corn is removed. <sup>14</sup>	Most blisters heal within a week. <sup>17</sup>
CAUSES	Fungal infection of the skin can be caused by organisms known as dermatophytes. <sup>3</sup>	An infection of the nail caused by fungal organisms called dermatophytes, or by yeasts, such as Candida. <sup>3</sup>	Most common cause is toenails being badly cut. <sup>8,10</sup>	A viral infection of the skin. <sup>13</sup> Customers can pick it up by touching infected skin or contaminated surfaces. <sup>13,11</sup>	Can develop when the bony parts of the foot are put under pressure or rub against shoes. <sup>14</sup>	Usually caused by friction, due to poorly-fitting shoes and socks rubbing against the skin. <sup>17,18</sup>
CUSTOMERS	Most common in teenagers and men, diabetics and customers with a poor immune system. <sup>4</sup>	Most common in people who are older, have a fungal skin infection, or have damaged their nails. <sup>5</sup>	Likely to develop in customers who wear shoes/hosiery that are too tight or have injured their toe. <sup>8,10</sup>	Most common in children/young adults and women plus customers using changing rooms, pools or share infected towels, socks etc. <sup>11,13</sup>	Most common in customers who wear poorly fitting shoes, are older or have other foot problems, such as bunions. <sup>14,16</sup>	They are also caused by moist feet and/or foot deformities. <sup>18</sup>
WHEN TO REFER	<p><b>Refresh your knowledge of all red flag symptoms at <a href="http://www.rbforhealth.co.uk/footcare">www.rbforhealth.co.uk/footcare</a></b></p>					

# TREATING COMMON FOOT CONDITIONS



	Athlete's Foot	Fungal Nail Infection	Ingrowing Toenail	Verrucas	Corns	Blisters
THE PRODUCT	Contains Olile-Active in a precision treatment pen plus a shoe spray to help prevent reappearance. 	Schollmed Once Weekly Fungal Nail Treatment 5% w/v Medicated Nail Lacquer contains Amorolfine. 	Contains cooling spray and toenail clips. 	Contains freezing treatment. 	Contains salicylic acid in a medicated disc and a cushioned pad. 	Waterproof gel plaster. 
HOW IT WORKS	Creates an environment on the skin that prevents fungus from multiplying or surviving.	Kills the fungus with just one application per week. <sup>†</sup>	A cooling spray to help soothe and straightening clips to encourage the nail to grow out straight. <sup>19</sup>	Rapid freezing method which destroys the cells that contain the verruca-causing virus. <sup>20</sup>	Targeted medicated action for effective corn removal.	Plasters are a waterproof gel plaster.
WHO IS IT FOR?	Who want an easy-to-use approach. Have had repeat infections and don't want to touch the skin.	Who want an easy-to-use, clinically proven treatment for fungal nail infections.	With early stage ingrowing toe nail (where the symptoms are mild and the nail has not broken the skin).	Who want a simple, easy-to-use verruca treatment.	Customers with painful corns.	With blisters that they wish to protect from friction while skin heals from within.
WHY RECOMMEND?	2-step solution. The pen effectively treats the condition. The spray can be applied to shoes to help prevent reappearance.	Clinically proven treatment. Penetrates into the nail bed and kills the fungus.	To encourage the nail to grow out straight and normally after 6 weeks the nail will have grown out sufficiently relieving the affected area.	Removes warts with just one treatment.*	The targeted medicated disc helps protect the surrounding healthy skin. The soft pad gives relief from pressure.	Provides an outer shield to protect and the soft gel island provides cushioning and accelerated healing.
CUSTOMER COUNSELLING	Advise customers to use the pen twice daily for 4 weeks with the spray applied to shoes once per week (3 spray per shoe).	File the infected areas of the toenail. Swab the nail clean then apply treatment once weekly for 9-12 months. <sup>†</sup> Treatment is limited to two nails. Can't be used in children <18 years.	Apply a new clip weekly. After around 6 weeks of use, the nail should have grown out sufficiently. <sup>19</sup> Only suitable for the big toe.	Treat multiple verrucas one at a time, leaving a two-week interval between each treatment. Do not treat the same verruca more than 4 times in total. Not for use in children <4 years.	Place the medicated disc over the centre of the corn and cover with the pad. Repeat daily until the corn can be removed. Not for use in diabetics.	Apply over the blister, taking care not to burst.

\* Verrucas may require more than one treatment. Do not treat the same verruca or wart more than 4 times in total † Treatment can take 9-12 months for toenails and around 6 months for finger nails to allow the infected nail to fully grow out.

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**ESSENTIAL INFORMATION: SCHOLMED ONCE WEEKLY FUNGAL NAIL TREATMENT 5% w/v MEDICATED NAIL LACQUER** PL 00063/0740. **ACTIVE INGREDIENTS:** Each 1ml solution contains 55.74 mg amorolfine hydrochloride (equivalent to 50 mg amorolfine). **INDICATIONS:** For the treatment of mild cases of distal and lateral subungual onychomycoses caused by dermatophytes, yeasts and moulds; treatment is limited to 2 nails. **DOSAGE INSTRUCTIONS:** For Cutaneous use (application on the nail) in adults and elderly. Before the first application the affected areas of nail should be filed down and cleansed with an alcohol cleaning pad. The nail lacquer should be applied to the affected finger or toe nails once weekly. Before every weekly application nail should be cleaned with a cleaning pad and filed down as required. Not recommended for use in children and adolescents below 18 years. **CONTRAINDICATIONS:** Hypersensitivity to the active substance(s) or to any of the ingredients. **PRECAUTIONS AND WARNINGS:** Avoid contact of the lacquer with eyes, ears and mucous membranes. Patients with underlying conditions predisposing to fungal nail infections should be referred to a doctor such conditions include peripheral circulatory disorders, diabetes mellitus, and immunosuppression. Patients with nail dystrophy and destroyed nail plate should be referred to their doctor. When working with organic solvents wear impermeable gloves in order to protect the amorolfine lacquer on the nails. During the application of Scholl Fungal Nail 5% w/v Medicated Nail Lacquer no cosmetic nail lacquer or artificial nails shall be used. Use of nail varnish or artificial nails should be avoided during treatment. **CAUTION:** Nail files used for affected nails must not be used for healthy nails. Treatment should be continued without interruption until the nail is regenerated and the affected areas are finally cured. **PREGNANCY AND LACTATION:** Amorolfine should be avoided during pregnancy and breastfeeding. **SIDE EFFECTS:** Rare: (<1/10,000 to <1/1,000) patients may develop a nail disorder, nail discoloration, onychoclasia (broken nails) or onychorrhexis (brittle nails). Very rare: (<1/10,000) patients may experience skin burning sensation. Frequency unknown: erythema, pruritus, contact dermatitis, urticaria, blisters. **PRODUCT LICENSE NUMBER:** 00063/0740. **LEGAL CLASSIFICATION:** Pharmacy only. **LICENSE HOLDER:** Reckitt Benckiser Healthcare (UK) Limited, 103-105 Bath Road, Slough, SL1 3UH, United Kingdom. **MRRP:** £23.99 (2.5ml Medicated Nail Lacquer). **DATE OF PREPARATION:** July 2017

Adverse events should be reported. Reporting forms and information can be found at [www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard). Adverse events should also be reported to Reckitt Benckiser Healthcare (UK) Ltd on: 0333 200 5345.