

# Corns and Calluses

## **Podiatry Department**

## **Patient Information Leaflet**

### Introduction

This guide is for patients who have a corn or callus and will explain about what treatment you may receive, the potential issues of not treating and what you can do to help yourself.

#### What is a callus?

A callus, sometimes called a hyperkeratosis in the medical world, is an area of skin that has become tough, hard and/or discoloured due to repeated friction, pressure, dry skin or other irritation. Most common on the hands and feet, calluses are usually diffused and flat in shape, which is one of the main things that differentiates them from corns and blisters, which are generally conical or circular in shape.



#### What is a corn?

Corns are caused by pressure or friction, often over bony areas such as a joint, and they have a central core which may cause pain especially if it presses on a nerve.

There are five different types of corns, the most common of which are 'hard' and 'soft' corns:

- Hard corns these are the most common and appear as a small area of concentrated hard skin up to the size of a small pea usually within a wider area of thickened skin or callus. This may be a symptom of the feet or toes not functioning properly
- Soft corns these develop in a similar way to hard corns but they are whitish and rubbery in texture and appear between the toes where the skin is moist from sweat or from inadequate drying
- Seed corns these are tiny corns that tend to occur either singly or in clusters on the bottom of the foot and are usually painless
- Vascular/neurovascular corns these are corns that have both nerve fibres and blood vessels in them. They can be very painful and can bleed profusely if cut
- Fibrous corns these arise when corns have been present for a long time and are more firmly attached to the deeper tissues than any other type of corn. They may also be painful.

#### How can corns and calluses be treated?

A podiatrist can treat it in the following ways;

- Enucleation using scalpel blade all podiatrists are welltrained in handling a sterile scalpel blade and we are able to cut the corn out safely – it must be noted that due to the way corns are formed that it is more common than not for corns to return after enucleation unless the source of pressure is removed in some way.
- Padding and insoles to reduce the pressure at the site of the corn and reduce the chances of it returning / causing pain

Advice on footwear to reduce pressure on bony areas or squeezing of toes

#### What can I do to look after corns and calluses?

You can:

- Check the corn daily look for any bleeding under the skin/ redness/ swelling/ pus – contact us as soon as possible if you see any of these signs
- File the area with a foot file or pumice stone to keep the bulk of it down and your foot comfortable
- Apply foot cream or an emollient daily to keep your skin in good condition and the skin softer and more supple, ureabased creams can be particularly effective
- Never cut corns yourself or apply 'over the counter' corn removal treatments (those that you can buy without a prescription) to them.

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Podiatry Department

Call **01384 321427** (9am-5pm, Monday to Friday) or e-mail <u>dgft.podiatry.appointments@nhs.net</u>

#### This leaflet can be downloaded or printed from:

http://dgft.nhs.uk/services-and-wards/

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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