Leicestershire Partnership NHS Trust

Hard Skin (callus) and corns

Information for Patients



0116 225 5118

LLR.Podiatry@nhs.net

www.leicspart.nhs.uk/service/podiatry/

If you have a hot, red, swollen or painful foot with blood, pus or other discharge from an open wound, Please contact the department as soon as possible.

Podiatry Department contact details:
0116 2255118
LLR.Podiatry@NHS.net

What is hard skin/callus

Hard skin (also known as callus) is the thickening of the skin. This is the skins way of protecting itself, so the skin doesn't break.

It commonly occurs over the joints of your toes, the heels and the balls of your feet. If the skin dries, it may crack or split and may become infected.

If left untreated the build-up of hard skin can be painful and regular self-care can prevent this.

What is a corn?

Corns are caused by pressure and friction over bony areas. A corn is a plug of tough skin, often under hard skin and can be quite painful.

There are several different types of corns:

- Hard corn- This is the most common type and is caused by pressure. Normally they have a build-up of hard skin over them.



- Soft corn -These corns appear in between toes where the skin is moist from sweat or not drying your toes properly. They look white and feel rubbery to touch.



- Seed corn- these are very small and usually painless, normally caused by dry skin.
- Vascular/ Neurovascular corn- These are corns that can have a blood vessel or nerve attached to them. They can be very painful and tender to touch.
- Fibrous corns - Can be painful and occur if not treated or prevented for a long time.

Common causes of hard skin and corns:

- Ill-fitting footwear -causing pressure or rubbing over the skin.
- Foot shape/structure
- Dry skin
- Health conditions and medications causing dry skin
- Genetics
- Smoking including tobacco chewing substances.
- Obesity

What is the difference between a corn and a verruca?

- Verrucae appear to have small black dots (like a pepper pot) present in the skin.
- The lines of the skin are moved around the verruca.
- They can appear anywhere on the skin.
- Pain may be felt when squeezed from the side.
- Corns form over a pressure area on the foot. This most commonly happens over a bony joint.
- The lines of the skin are not disturbed and lie over the corn.
- The overlying build of up of skin may have a yellow appearance.
- Pain will be felt on direct pressure.



Corn Verruca

How to self- treat hard skin and corns:

DO	DON'T
Use moisturisers daily on feet - use a 25% urea based creams or heel balms. (see community pharmacy for advice on creams)	Do not apply cream between toes
When skin is dry use a pumice stone or file over the area of hard skin- file once or twice week.	Use corn plasters or paste that contain acids.
Wear well-fitting shoes with a wide toe box and Velcro/tie laces	Pick at corns or callus
Wear socks with your shoes	Apply any moisturising cream between toes
Dry your feet well after washing taking care in between the toes	Wear high heels, uncomfortable shoes or shoes that are wrong size
If in between the toes is moist use surgical spirit, apply with a cotton bud to dry area up. Never use on broken skin.	If your feet are at risk (you have diabetes or circulatory problems) don't use battery operated callus removers.
You can purchase toe supports,separators, and toe covers to prevent toes from rubbing- always remove at	

night.	

When and how to refer into NHS Podiatry:

A regular self-care routine should keep foot problems to a minimum. If your foot care issues are not improving with regular selfcare treatment and are becoming painful/ uncomfortable you should seek help from a private HCPC registered podiatrist.

Commented [LB1]: Could include page with further information and support re. how to find a podiatrist? (if we're able to?)

A referral to NHS podiatry should ONLY be made if you have:

- Any breaks in the skin.
- Infection (redness, pain any discharge etc.)

www.leicspart.nhs.uk/service/podiatry/

rcpod.org.uk/common-foot-problem

If you need help to understand this leaflet or would like it in a different language or format such as large print, Braille or audio, please ask a member of staff.

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