



Drs. Keitley, Bromwich, Norman, Tiffney, Digby, Wickett & Mawdsley

The Avenue Surgery
1 The Avenue, Cirencester, GL7 1EH

St Peters Road Surgery
1 St Peters Road, Cirencester, GL7 1RF

www.cirencesterhealthgroup.co.uk

SELF-CARE INFORMATION ON CHILBLAINS

Chilblains, also known as pernio, is a medical condition in which defective blood circulation on exposure to cold results in damage occurs to capillary beds in the skin, most often in the hands, feet or ears, when blood perfuses into the nearby tissue resulting in redness, itching, inflammation, tenderness, a burning sensation and possibly blisters. An infection may occur should the skin break down. Dampness and cold winds when temperatures are around freezing, can cause damage to unprotected skin. The elderly and very young are most vulnerable. Chilblains usually go away over 7-14 day.

How common are chilblains?

Chilblains are common. It is thought that about 1 in 10 people in the UK get chilblains at some stage in their life. It is not clear why some people get chilblains when their skin gets cold. It is probably due to poor circulation in the extremities (toes, fingers, etc.). The tiny blood vessels under the skin narrow (constrict) when the skin becomes cold and the blood supply to areas of skin may then become very slow. As the skin re-warms there is some leakage of fluid from the blood vessels into the tissues which in some way causes areas of inflammation and swelling leading to chilblains.

Can I get chilblains?

Older people more commonly suffer from chilblains, but anyone can be affected. When extremities such as the toes and fingers are exposed to the cold, not enough blood gets through to them. As a result of this cold sensation, the extremities become very itchy, then swollen and red. The skin often feels like it is burning, and the area may feel painful to the touch.

Chilblains symptoms

The following are some signs and symptoms related to chilblains:

- chilblains appear as small itchy, red areas on the skin in some cases the skin over a chilblain may blister which may delay healing sometimes the skin breaks down to leave a small ulcer
- possible secondary infection finger skin inflammation
- the chilblain may become ulcerated chilblains become increasingly painful as they get congested and take on a dark blue appearance
- a burning sensation on the skin
- toe skin inflammation - the affected area is swollen

Chilblains and Raynaud's

Having chilblains does not necessarily mean that you have Raynaud's. However, as both conditions are related to the circulation many people with Raynaud's also have chilblains. Raynaud's is a condition in which the blood supply to the extremities, usually the fingers and toes but sometimes also the ears and nose is interrupted. The stimulus is usually a change in temperature or stress. During an attack they first become white, they may then turn blue and finally bright red. There may be considerable pain, numbness, or tingling.



Treatments

If chilblains have developed, cover them with a loose, dry dressing (e.g. Melolin) and try to avoid clothing that rubs. If the skin is unbroken, *1% hydrocortisone cream* from your doctor is soothing. There is some evidence that *Vitamin B (nicotinic acid)* helps to prevent chilblains. Vasodilator medication (e.g., *nifedipine*) which are recommended for improving the circulation in Raynaud's phenomenon by opening up the blood vessels, can also be useful in the treatment and prevention of chilblains. Other compounds, for example those derived from Vitamin K, may also help but you should discuss these with your doctor. *Calamine lotion* and *witch hazel* are both soothing and cooling, whilst antiseptic should be applied to broken chilblains until medical attention is sought. A steroid cream rubbed onto the chilblains may reduce itch and soreness. Creams and ointments containing *camphor* or local anaesthetic can also be used for relief of pain in unbroken chilblains. *Balmosa* cream, available from your local pharmacy, and some other topical creams can be effective.

Management

People often think that the more socks and tights they wear the warmer the feet will be. This is not really the case as it restricts the circulation and increases the chilling of the feet. Remember it is often the quality of the hosiery and the footwear and not necessarily the quantity, which is important. *Silver fibre socks* are recommended. Wear fleecy-lined shoes or boots, making sure they are not too tight fitting. Sheepskin is an ideal lining but a synthetic lining to a leather shoe will also help. Wear slippers which cover your ankles. Make sure that your shoes fit well and feel comfortable. If they rub, the skin may become damaged and then infected. This can be a problem due to the poor circulation as the time taken to heal could be much longer than normal.

Chilblains will itch and burn and become itchier still when warm. It is tempting to scratch, but this can break and ulcerate the chilblain.

- Do not walk barefoot on cold surfaces.
- Avoid extremes of temperature.
- Do not put feet in front of direct heat or on radiators or hot water bottles.
- Reflexology is good, especially for wheelchair users, as it will help to improve the circulation.
- Regular exercise, not smoking, and a healthy low-fat diet packed with fruit and vegetables, are essential to keep the circulation strong.

Useful contacts

- Ask your pharmacist
- Patient UK - www.patient.co.uk
- NHS Choices, www.nhs.uk/conditions/

If you have further questions:

Call the ***practice*** on ***01285 653184 or 01285 653122***
If you require ***urgent*** medical advice, call ***111 (24 Hrs)***
In an ***emergency*** call ***999***