

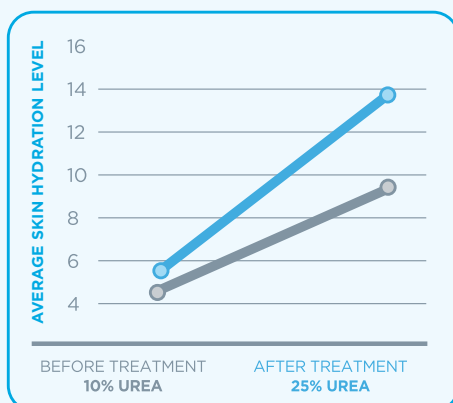
Heel Balm

SPECIALIST DIABETIC FOOTCARE

- FOR DRY, CRACKED FEET
- NON-GREASY FAST ACTING
- CLINICALLY PROVEN MEDICAL DEVICE



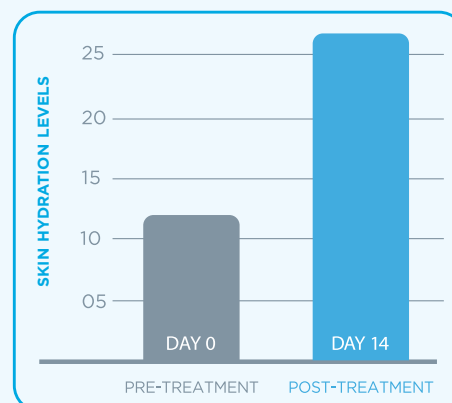
EFFICACY OF DERMAL THERAPY HEEL BALM ON SKIN HYDRATION LEVELS



Significantly more effective than creams containing 10% or less Urea²

In a double blind comparative study, 26 outpatients with evidence of bilateral anhidrosis applied a 10% Urea cream to the left foot and a 25% Urea cream (Dermal Therapy Heel Balm) to the right foot, twice daily. Results indicate that the 25% Urea cream increased skin hydration levels significantly more than the 10% Urea cream.²

DERMAL THERAPY HEEL BALM PROVEN EFFICACY



25% Urea in an effective highly concentrated, moisturising and emollient base¹

In a controlled 14 day trial, 27 subjects suffering dry, cracked heels applied Dermal Therapy Heel Balm twice daily.

Results indicate that regular use of Dermal Therapy Heel Balm increases the mean hydration levels in the heel skin and thus helps keep feet healthy and well moisturised.¹

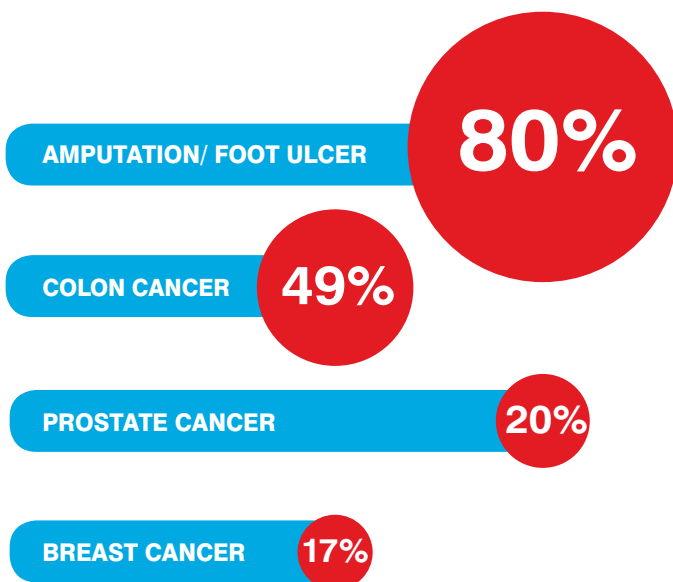
PUTTING FEET FIRST

— Heel Balm —



“ I LOST MY LEG AND IT WAS BECAUSE OF MY DIABETES. I DIDN'T KNOW THIS WOULD HAPPEN AND NO-ONE WARNED ME. BY THE TIME I KNEW IT WAS TOO LATE. ”

Worldwide, diabetes-related complications result in the amputation of a lower limb every 30 seconds². And it's estimated that people living with diabetes are 30 more times more likely to have an amputation compared to the general population³.



The relative likelihood of death following amputation or foot ulcers within five years is greater than colon, prostate and breast cancer¹.

PEOPLE WITH DIABETES SHOULD HAVE ANNUAL FOOT CHECKS MANAGE YOUR FEET AT HOME:

STEP 1

Daily foot examinations

Examine your feet for any trauma, deteriorating calluses or dry damaged skin. Notify any abnormalities to your physician or Podiatrist.



STEP 2

Daily maintenance

Use Dia-Balm™ every day, or as directed by your healthcare professional, to moisturise, protect and prevent dry skin from cracking and forming sores. Cut toe nails with care using clippers not scissors. Do not at any time use physical abrasion on your feet.



STEP 3

Footwear

Wear comfortable, properly fitted, covered shoes to protect your feet from surroundings. Wear cotton or wool socks. Avoid elastic socks and hosiery - these may impair circulation.



STEP 4

Exercise

Exercise regularly for general health and to promote circulation to your legs and feet.



STEP 5

Regular health check

See your Podiatrist every 6 months and visit your Doctor regularly.



1 Derived from: Office of National Statistics (2010). Cancer survival in England: one year and five year survival for 21 common cancers, by sex and age. Moulik K., et al. (2003). 2 Apelqvist, J., Agardh CD. (1992). The association between clinical risk factors and outcome of diabetic foot ulcers. Diabetes Research and Clinical Practice 18:43-53 3 Khanolkar M.P., et al. (2008). The Diabetic Foot.