

DIRECTIONS FOR TREATING CORNS & CALLUSES

CORNS:

Corns are thickening of the upper layers of the skin caused by friction and pressure over bony prominences. Frequently a corn may appear on the outer side of the small toe, but it may occur over any bony prominence where the footgear rubs. Corns can be painful because pressure forces the hard center of the corn into the deeper tissues.

The first step in treatment of corns is to change to properly fitted footgear with a wide toe box, which will allow adequate space for the painful areas.

CALLUSES:

Calluses are larger and broader thickenings of the skin over bony prominences, which usually form on or near the ball of the foot, the heel and the sides of the large toes.

Again, correctly fitted shoes may help as can the application of a “metatarsal bar” onto the soles of the shoes by a shoe repair shop.

Treatment: To treat both corns and calluses, cut out a piece of 40% Salicylic acid plaster slightly larger than the thickened area and apply it to the skin, sticky side down. Hold in place with adhesive tape. Leave overnight or for as long as 3-4 days for very thick lesions. Remove the dressing and soak the foot in water. Remove whitened, soft, and macerated skin with a pumice stone. Reapply plaster as often as necessary to keep the lesions flat. Patients with diabetes or circulatory problems should not use 40% Salicylic acid plaster.

After removal of a corn a protective felt padding (i.e., moleskin adhesive tape) is all that is necessary.

Calluses, but not corns, can also be treated by soaking the callus in water for 5-10 minutes and then rubbing the callus with a pumice stone lubricated with soap and water. Usually 3-5 treatments are required to remove the built up layers of skin. Regular use of the pumice stone will keep calluses small and soft. In addition, use of ammonium lactate 12% lotion or carmal lotion (OTC) may soften calluses.