SUMMARY

Diabetes mellitus is a world-wide health problem with a high cost. Diabetic foot is one of the most threatening & disabling complications for diabetic patient, these patients have a 15% life-time risk of developing foot’ ulcers, which are major factor in the casual pathway leading to lower limb amputation. A half of all non-traumatic lower extremity amputation are done for diabetic foot, More over, one third of all diabetic patient who needed hospitalization did so for diabetic foot problems.

Review of the literature pointed out to a group of factor that may increase the risk of diabetic foot complications uncontrolled diabetes, peripheral neuropathy, a peripheral vascular impairment are all important factors that are topped by foot ulceration, the patient-related factor that predispose to uncontrolled diabetes are improper diet & non-compliance to treatment regimen. Also smoking is linked to vascular impairment & lack of exercise is linked to uncontrolled diabetes.

The aim of this study was to assess the prevalence of these factors & their influence on the diabetic foot complication among the non insulin dependent diabetic patient & also aimed to assess their knowledge & beliefs about these factor. The study included 200 patients with noninsulin dependent diabetes mellitus males or females, the study was conducted at out patient diabetic clinic at Banha university hospitals & also medical private clinics.

In this study, a structured questionnaire was presented to the subjects through an interview technique. The questionnaire collected data regarding the patients bibliography, diabetic history, knowledge
background, health habits, & foot care practices & health beliefs scale which reflecting patient beliefs in relation to foot care & also observational check list including patient practices in relation to prevention of diabetic foot complication.

The results showed that:-

Part I: Socioeconomic characteristics:

It was noticed that
1- more than half (52.5%) of the diabetic patients their age ranged from 50:64 years and most of them were female.
2- More than three quarter (79%) of diabetic patients were married.
3- It was found that the majority (85.5%) of the sample, their educational levels ranged from illiterate to low level.
4- Also (81%) of the sample reported that they were practicing manual works.
5- Family income were less than 300 pound per month for the majority of the sample (81.5%) which is considered to be low socio economic state.
6- Family size of more than 6 individuals were found in one third of the sample.
7- The majority (81.5%) of the sample, the rooms of their houses ranged from 1-3.
8- Slightly less than half (46%) of the sample live at moderate & less than level standard.

- Part (II): Family and Medical History.
The patients were classified into two groups:-

Group (I):

The duration of diabetes for the first group was (> 10 years) And for the second group was (<10 years).
1- There was statistical significant difference between both groups as regard family history for diabetes mellitus. The incidence of diabetes mellitus among relatives was (72.6%) higher incidence for the second group (<10 year duration) than the first group (>10 years duration) which was (39.4%).

2- Mothers were having higher percentage of diabetes mellitus than other family members. Also the percentage of mother who had the disease was higher in the second group (60.4%) than the first group (40%).

3- There were no statistical significant differences between both groups regards associated diseases with diabetes mellitus. It was noticed that high blood pressure was higher in both groups than the other associated diseases (55.1% - 61.6%).

4- The difference were significant between both group as regards occurrence of hyper or hypo glycemic coma than other associated complications and was higher in the second group (23.6 — 67.1%), while neuropathy was higher in the first group than the second group (49.6% - 13.7%).

Treatment and follow up:

1- No statistical significant difference were found between both group as regards information related to treatment and follow up.

2- It was observed that most of diabetic patients among both group were on oral treatment (68.5% - 53.02%).

3- It was found that less than half of the diabetic patient among both groups had irregular follow up (44.09 — 41.1%).

4- The important causes of irregular follow up among both group were: financial barrier (53.6% - 56.76%) fear of occurrence of any treatment complications (25% - 33.3%) and did not know the importance of regulation of taking medication (14.3% - 6.7%).
5- It was noticed that one third of the diabetic patients among both group do not performed the routine medical follow up (31.5% - 34.3%).

6- The important causes for regular routine follow up among both groups were: as needed (35.4% - 13.7%), for sugar analysis (58.3% - 27.4%), adjust medication (21.3% - 5.5%), and for feet examination (15.75% - 49.32%).

7- Also one third of diabetic patient among both groups performed their follow up every two months and more (31.5% - 39.7%).

Part III: Information of the diabetic patients among both group toward diet, smoking and exercises:

(1) Diabetic regime:

1- The majority (85.04% - 82.2%) of diabetic patients among both group were had information regarding diabetic diet, the basic source for information was physician (63.1% - 76.9%).

2- The minority (17.6% - 18.3%) and (7.9% - 8.2%) respectively of diabetic patients among both group were not followed diabetic regime and also they had unsuitable diet for their cases.

3- Also it was found that (75.7% - 48.3%) of diabetic patient among both groups were had 3 diet or more per day.

4- The important cause for not follow the diabetic regime among both group was financial barrier (57.9% 45.46%).

(2) Smoking:

1- No statistical significant differences were observed among both group as regard smoking.

2- It was cleared that two third of diabetic patients among both group were practicing smoking process for (59.8% - 58.9%).

3- The majority of them were practiced the smoking process for many years (86.8 % - 40.7%).
4- The smoking rate was 20 cigarette daily for two third of the diabetic patients among both groups (69.7% - 60.5%).

5- It was cleared that slightly less than half (40%) of the non smoking diabetic patient in group one were had smoking practices before they had the diabetes disease as compared with (13.7%) in group two. Also the basic causes for stop smoking after they had a disease were their physicians advice (42.9% - 66.7%) and deterioration of their health (28% - 33.3%) in both groups.

(3) Their Information as regard their walking practices:

1- The majority (80.4%) of diabetic patients in the first group were practicing walking exercise as part of their daily work as compared with (50%) in the second group.

2- Also the majority (82.6%) of diabetic patient in the first group were had more than one hour daily walking as compared to (60%) in the second group.

Part IV: patients knowledge as regard diabetic foot:

(1) In formations concerning diabetic foot and feet examination:

1. It was found that more than half of diabetic patients among both groups were not had any information as regard diabetic foot (57.5 - 54.8%).

2. Also less than one quarter of diabetic patients among both groups were had wrong information about diabetic foot (16.53%-17.81%).

3. It was noticed that one quarter of diabetic patients in the first group were had incomplete knowledge as compared with (8.2%) in the second group.

4. Also one third (34.6%) of diabetic patients who had callus were used cutting instrument for removing their foot callus in group two.
5. The result indicated that very low percentage of diabetic patients among both groups were had low sensation in their feet (18.9 % - 5.5 %).

6. The rate of occurrence of fungal feet infection were very higher (91.7 %) in the second group as compared to (76.4 %) in the first group.

7. The majority of diabetic patients among both groups were had hot sensation at their feet (96.06 % - 84.9 %).

8. The rate of toes and ankle deformity were higher (49.3 % - 31 %) in the second group than the first group (11.8 % - 7.9 %).

(2) Information of diabetic patients concerning foot care:

1. The minority of diabetic patients among both groups were reported that the diabetic foot problem was not avoided (10.2 % - 9.6 %). And they mentioned that the basic cause of their avoidance was not follow the diabetic regime (53.9 % - 57.1 %).

2. The percentage of diabetic patients who were neglected their feet examination was higher in first group (25.9 %) than the second group (13.7 %). One third of these patients considered that the feet examination were not necessary.

- Also (39.4 % - 24.2 %) of diabetic patients in first group reported that week vision and they not know how they examine their feet as compared with (10 % - 40 %) in second group.

(3) Information concerning patients with diabetic foot:

1. The majority of diabetic patients in the second group were suffering from diabetic foot for more than two years (74.9 %) as compared with (30 %) in the first group.

2. It was noticed that nails cutting, inflammation between foot toes, injury in their feet and wearing tight shoes were considered the basic causes for foot injuries.
(4) Information concerning foot care practice:
1. The results indicated that the majority of diabetic patients did not wear stocks (110 patient), they were really wear tight shoes (130 patient).
2. Also the majority of patients are not concerning with softening their feet skin, not moving their feet during standing for long period and not cutting their feet nails by straight way.
3. The majority of patients do not choose the suitable shoes.