

**Revisiting the “FOOT AT RISK” in Nigerians with Diabetes Mellitus**

Ogbera AO, Fasanmade OA Department of Medicine, Lagos State University Teaching Hospital, Ikeja, Lagos, Nigeria Department of Medicine, Lagos State University Teaching Hospital, Idi-araba, Lagos, Nigeria

**Background/ Objectives:** The disease burden of foot ulceration in diabetes mellitus (DM) is known to have far reaching effects on not only the sufferer but to the larger society. It is therefore imperative that in resource poor countries like Nigeria, people with DM who are at risk for foot ulceration be identified in order to provide much needed preventative therapy against foot ulceration for them. This it is hoped will go a long way in reducing the incidence of foot ulceration in Nigerians with diabetes mellitus. The main objective of this study is to identify this at risk group and also to document the pattern of risk factors for foot ulceration in them. **Subjects and Methods:** This was a cross-sectional study carried out at the Diabetes Clinic of the Lagos University Teaching Hospital Lagos. (This is one of the biggest government owned hospitals providing diabetes care in the south West of Nigeria). The duration of the study was one year (2001-2002). 1140 patients with diabetes mellitus (DM) were screened for the foot at risk ulceration. The “foot at risk” refers to the foot with intact skin which may have bony deformities or pre-ulcerative lesions such as claw toes, hammer toes, hallux valgus, prominent metatarsal heads, callus formation, bunion, bunionette, charcot/bony prominences, dry skin, warm foot with prominent vessels, previous ulceration and or amputation, onychomycosis, features of neuropathy and vasculopathy. Data was analyzed using the Statistical package for the social sciences (SPSS) version 10. The test statistics used were Student’s t test and Chi square. **Results:** The prevalence of DM subjects with the foot at risk for ulceration was 474(41.5%). Of these, 9(1.9%) had type 1 DM and 465 (98.1%) had type 2 DM. More than half of the patients were elderly (>61years) and overweight or obese. The mean (SD) duration of DM was about 10(6.2) year and the glycaemic control was generally poor. In both types of diabetes, more than 50% of the subjects had poor glucose control. The commonest risk factor was neuropathy while peripheral vascular disease was seen in less than a tenth of the study subjects. Of the various foot deformities documented, the presence of prominent metatarsal bones was the commonest of the deformities. Limited joint mobility (depicted by the presence of the “prayer sign”) was noted in 20% of the subjects while Tinea pedis was seen in 65(16%) .

**Conclusions/Recommendations:** The prevalence of the foot-at-risk for ulceration among nigerian patients with diabetes mellitus is high. A cost effective and accessible preventative/interventional foot program should be put in place to address these risk factors for ulceration of the feet.