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Callosities are associated with never seeing the chiropodist, high BMI and high total cholesterol

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Background: We have previously reported a significant decrease in major amputations after the establishment of a multidisciplinary foot clinic. **The aim** of this study is a later estimate of the prevalence of 1)callosities, 2) previous and 3)present foot ulcers, 4) minor and 5) major amputations, and , moreover, an analysis for riskfactors.

Patients and methods: Cross-sectional study of 468 patients with diabetes mellitus (169 Type 1, 299 type 2) from an outpatient clinic. Multibel logistic regression analysis determined risk factors for each of the 5 outcome parameters.

Results: 32% had callosities. Risk factors: Never seeing chiropodist , intervals > 6 weeks, Odds ratio 0.31(CI 95% 0,16-0,60), intervals max 6 weeks OR 0.57(0,35-0,91). High BMI: OR 1,05(1,01-1,09). High total cholesterol: (OR 1.28(1,08-1.51)). Previous foot ulcers 24%, risk factors: type2 DM (OR2,27(1,34-3,86)), living alone (OR 1,72(1,10-2,70)), long duration of DM (OR 1,04(1,02-1,07)). Present foot ulcers 6,4%, risk factors: previous foot ulcers (OR 9.89(4.22-23,16)), duration of diabetes (OR 1,03(1,00-1,07)). Minor amputations 4,7%, risk factors male sex (OR 2.76(i,06-7,22)) and age> 60 years (OR 5,28 (1,91-14,54)). Major amputations only 2 (0,4%).

Conclusions: 1) The association between callosities and high levels of cholesterol have not previously been reported. 2) Only the risk factors for callosities are modifiable.3)The low number of amputations in spite of the high number of ulcerations is probably a result of the activity of the multidisciplinary foot clinic.