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Screening for Diabetes-Related Distress in People with Type 2 Diabetes and Diabetic Foot Ulcers

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Introduction: Previous research has shown that people with type 2 diabetes often develop diabetes-related distress set off by psychosocial factors. There is a risk of this triggering a major depression, which may again influence adherence to treatment and appropriate life style in a negative way. Leading researchers point towards the need of means of assessing diabetes-related distress in the individual. **Objective:** In order to enhance the quality of treatment of type 2 diabetic people admitted to a surgical department with diabetic foot ulcer (a frequent late complication of diabetes), a pilot study was set up to investigate whether diabetes-related distress plays a role in the lives of these patients. The "Problem Areas In Diabetes-scale" (PAID, a validated questionnaire) was chosen as a tool for screening type 2 diabetes patients admitted to the surgical department or treated in our outpatient clinic. **Methods:** A survey among type 2 diabetic patients with diabetic foot ulcers in the department and outpatient clinic during a period of two weeks using PAID combined with a number of demographic questions covering diagnose and medical treatment. **Results:** 18 patients (87 %) answered the questionnaire. The findings were scored according to references from Joslin Diabetes Centre (total PAID scores and scores of four PAID-subgroups. 22 % showed high emotional distress or emotional distress above average. The remainder (78 %) all had psychosocial problems in living with type 2 diabetes, mostly so in the PAID-subgroup of negative feelings concerning diabetes. The major part of the respondents (15) had received education in diabetes. There were no indications that diabetes education influenced the results. **Conclusion:** PAID is useful in screening type 2 diabetic patients (both in the department and in the outpatient clinic) for psychosocial distress. In addition to identifying people moderately or highly distressed by diabetes and at risk of developing a depression, PAID is a useful tool in addressing the general problems of living with diabetes, at the level of the individual. PAID is a useful tool of communication when addressing preventive measures. A more extensive study is needed in order to assess possible advantages for the patient population and financially for the society.