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Health-related quality of life in patients with diabetic foot ulcers - a systematic review of the literature.

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Aims. The objective of this literature review is to investigate the reported quality of life (QoL) of patients with a diabetic foot ulcer (DFU). **Methods.** A literature search was done using the Pubmed database. All manuscripts (English language, from 2000 or later) with focus on Health-related quality of life (HRQoL) in patients with a DFU were selected. Publications with only focus on diabetes mellitus, charcot foot, or neuropathy were excluded. **Results.** 37 manuscripts met the inclusion criteria; 7 were review articles. Only 7 studies were prospective, and only 3 studies were multicentric. The number of patients included ranged from 14 to 1232. To discuss the HRQoL, either a generic or a disease-specific questionnaire can be used. In all studies, a generic questionnaire was used with the SF-36 being the most common (n=23/30). Other questionnaires, especially disease-specific questionnaires such as the Diabetic Foot Ulcer Scale (n=2) or the Cardiff Wound Impact Shedule (n=3), are less frequently used. All studies clearly showed a decrease in HRQoL of patients with an active DFU compared to diabetics without DFU, both in physical as well as mental health. This is mainly due to a reduced mobility. Patients with an active ulcer have a lower HRQoL score, compared to patients with a healed ulcer or even compared to patients who underwent a succesfull minor amputation. Only patients undergoing a major (below the knee) amputation had a similar (bad) HRQoL as patients with an active ulcer. On the other hand, ulcer healing is related with improvements in HRQoL (but a high QoL does not promote ulcer healing!). The severity of the ulcer (Wagner stage) and the number of ulcers adversely influence the HRQoL of patients. Factors improving HRQoL are a good metabolic control and the use of treatments promoting wound healing (negative pressure wound therapy, hyperbaric oxygen therapy); also a multidisciplinary approach leads to a better outcome and a better QoL. The data of the Eurodiale study clearly demonstrate that a low QoL on itself is predictive for major amputation and death. **Conclusions.** HRQoL of patients with a DFU is clearly reduced. However, all factors influencing this QoL are not well understood. More research in this area is needed.