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**Illness, Normality and Self-management: Diabetic Foot Ulcers and the Logic of Choice**

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**Introduction:** In the literature diabetic foot ulcer patients are often described as particularly disadvantaged and demanding, and their difficulties complying with appropriate treatment are often attributed to various forms of non-compliance. Based on medical anthropological methods and approaches this study aims at moving away from the over-emphasized concept of 'compliance' as a key factor in the treatment of foot ulcers, and look towards the broader context of everyday events and social relationships that foot ulcer patients participate in. Based on three case stories it explores the experiences of people suffering from diabetic foot ulcers with a particular focus on the ways illness, normality and self-management appear as three different scenarios of choice that each patient must relate to and act upon. **Aim:** The overall purpose is to show how the perception of diabetes as a disease that can be relatively easily controlled, and therefore allows the person with diabetes to live a nearly normal life, has consequences for the diagnosis and treatment of foot ulcers. **Method:** This study is based on data collected during a Health Technology Assessment (HTA) made by the Danish National Board of Health in 2011. Three case stories have been selected to this study on the basis of the total volume of 16 interviews across gender, age and social status. They highlight the challenges patients with diabetic foot ulcers encounter when they try to make the right choices and find the right balance between normality, freedom of choice and self-care. In addition the cases show different stages of experience that the diabetic foot ulcer patients typically undergo during the disease course. **Results:** Based on three empirical cases this study paints a picture of a group of patients that are undergoing dramatic and sudden changes moving from normality to serious illness, from the care of hospitalization to the responsibility for self-care at home, and from the role of active to passive patient with diabetes. These experiences make the patients struggling with diabetic foot ulcers particularly vulnerable and expose them to greater burdens than those attributable to the disease itself.