

**Does a pencil hold a promise? Impact of education on foot care practices in patients with type 2 diabetes (T2DM):** S R Aravind, Bhavana Sosale, Divyatha Arun, Suhas N, Ramyasree P, Edward Jude, Diacon Hospital, Bangalore, India; Tameside Hospital, UK

**Background and aim:** Foot problems are an important cause of morbidity in patients with diabetes. Most events responsible for precipitating a foot complication are largely preventable. Education on prophylactic foot care is pivotal to the management of diabetes. Earlier studies have highlighted poor foot care and footwear practices in India. The outcome of foot education in changing these practices has not been well studied. The aim of this study was to assess the impact of education on foot care and footwear practices, in patients with T2DM. **Methods:** This was an observational, cross sectional study of 400 patients with T2DM attending the outpatient of a specialized diabetes hospital. All patients had received comprehensive diabetes education including foot care at each prior hospital visit. Patients were socioeconomically stratified using the Modified Kuppuswamy Classification (education, occupation, monthly family income). They were interviewed and questionnaires assessing recall and current foot related practices were filled out. The data was analyzed using SPSS 18.0. **Results:** The mean age, duration of diabetes and HbA1c was  $56.77 \pm 11.85$  yrs,  $11.56 \pm 8.39$  yrs and  $8.1 \pm 1.8$  % respectively. M:F ratio was 56:44. 93.8% were aware of foot complications in T2DM. With progressive improvement in socioeconomic class, there was an increase in awareness on foot care and footwear practices, which was not statistically significant. Assessment of foot wear practices revealed that 98.5% wore footwear. 75.6% did not wear footwear inside the house. Family tradition (71%) and religion (18.5%) were cited as the common reasons. The time spent barefoot ranged from 8-16 hrs per day. This observation remained the same across all socioeconomic classes. None of the patients wore footwear at places of worship. 54.3% of patients had neuropathy. There were no differences between those with and without neuropathy, with respect to foot related practices. 53.3% of those with 'at risk feet' visited a place of worship barefooted more than once a week. 34.5% of patients with neuropathy were using prescribed footwear. More than two thirds of those who did not use footwear prescriptions gave casual negligence as the reason. **Conclusion:** This study demonstrates that though knowledge has improved through education, it is not being put into practice, even by those with high risk feet. Walking barefoot indoors is a deep rooted family belief. Frequent visits to places of worship provide innumerable opportunities to develop injuries, especially in patients with neuropathy. Does a pencil hold a promise? Yes, reinforced education on foot care can make a difference, but only if it overcomes apathy, lethargy and socio cultural attitudes. Motivation to break away from conventional customs is necessary. Large scale public health campaigns to overcome these barriers are hence imminent.