

[O16] CHARACTERISTICS OF NEW-PATIENT REFERRALS TO SPECIALIST DIABETES FOOT CARE SERVICES ACROSS EUROPE

Claas Lüdemann¹, C.A. Manu², Raju Ahluwalia³, Jose Luis Garcia Klepzig⁴, Victor Rodriguez Saenz de Buruaga⁵, Benjamin Bouillet⁶, Elko Randrianarisoa⁷, Chiara Mattaliano⁸

¹*Franziskus Krankenhaus, Berlin, Germany*

²*King's College Hospital, Dept. of Diabetes and Endocrinology, London, United Kingdom*

³*King's College Hospital, London, United Kingdom*

⁴*Hospital Clínico San Carlos, Madrid, Spain*

⁵*Hospital Universitario Donostia, San Sebastian, Spain*

⁶*CHU Dijon, Dept. of Diabetes and Endocrinology, France*

⁷*Universitätsklinikum Tübingen, Tübingen, Germany*

⁸*Azienda Ospedaliero-Universitaria Pisana, Sezione Dipartimentale Piede Diabetico - Dipartimento DI Area Medica, Pisa, Italy*

Aim: There are different models of healthcare structures across Europe, with different referral pathways to specialist diabetic foot care services. We aim to analyze the referral patterns, indication and characteristics of new patients to different specialist diabetes foot services across Europe.

Method: We conducted a survey of all new patient referrals to 10 specialist diabetic foot centers in 5 countries, namely France, Germany, Italy, Spain and England. A standardized questionnaire was designed to collect data on demographics, source of referral, reason, duration of problem and wound characteristics if present. Data on consecutive new patient appointments was collected simultaneously in all centers over a 13 week period, from July to September 2015. Data reported as Mean±SD and comparison of proportions.

Results/Discussion: There were 569 patients included in the survey from the 10 centers. Italy had the highest representation with 38.3% of patients, then England with 27.6%, 18.5% from Spain, 10% from Germany and 5.6% from France. The overall mean age was 65±13 years, 64% male, 79.8% had Type 2 Diabetes, 15.6% with Type 1 Diabetes and 4.6% did not have diabetes. Most patients were referred from other specialist, 46.2%, then referrals from the General Practitioner (GP) 25%, then self-referrals 14.6%, then 14.2% from podiatrist. Foot ulceration was cited as the most common active problem for referral, representing 59.9% of referrals, followed by 25% for intact-ischemic foot and 15.2% with either acute Charcot arthropathy or its complications. Of those presenting with ulceration 59.4% had a Texas Wound Classification of 1b and above, and 35.6% had moderate or severe infection as per the IDSA infection grading. Overall 53.8% presented after having the problem for more than 1 month, only 8.4% had presented within a week of current foot problem.

Conclusion: This survey demonstrated that a majority of the patients presented after a month or more to the specialist foot service, with a severe clinical grade of pathology. This could represent a missed opportunity for early specialist intervention. Thus, more studies are warranted to further delineate the possible causes of these late referrals which are apparent across all centers surveyed.