

## [P64] IMPACT OF A DIABETIC FOOT ULCER: THE PATIENT'S POINT OF VIEW

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**Aim:** The objective of this study is to investigate the reported quality of life (QoL) of patients with a diabetic foot ulcer (DFU), and to evaluate which factors affect the QoL.

**Method:** This was a prospective cohort study of patients presenting in a one year period (2015) with a DFU, Wagner 2 or more, at the Antwerp University Hospital. QoL was assessed using the Diabetic Foot ulcer Scale (DFS). A number of medical data (peripheral arterial disease -PAD-, chronic renal insufficiency, neuropathy, metabolic control), sociodemographic context of the patients (age, habitation, social contact, level of education), as well as ulcer-related factors (location, duration, Wagner grade) were recorded. Multiple logistic regression analysis was used. Participation was on a voluntary base. This study was approved by the local ethics committee; written informed consent was obtained.

**Results:** Forty patients agreed to participate. Mean age was  $69,8 \pm 9,9$  years. Female: male ratio was 7:33. Infection was present in 22 patients (51,2%), 28 patients had PAD (65,1%), 21 peripheral neuropathy (48,8%), 21 chronic renal insufficiency (48,8%). Ulcers were localized at the toes (n=19; 44,2%), forefoot (n=10; 23,3%), heel (n=8; 18,6%) or on other locations (n=3; 7,0%). Mean duration of the DFU was  $8,9 \pm 1,8$  months. Ulcers were classified according to the Wagner scale as: grade 2 (n=23; 53,5 %), grade 3 (n=12; 27,9 %), grade 4 (n=5; 11,6 %). Worse metabolic control, and renal insufficiency had a negative influence on the QoL ( $p < 0,05$ ). On the other hand, presence of neuropathy showed an increase in QoL ( $p < 0,05$ ). No effect of PAD was noted. A higher level of education had a positive influence on QoL.

**Conclusion:** Etiological factors, comorbidities and sociodemographic factors can have a significant influence on the QoL of the patient. More research is needed in this area. One of the perspectives of this study is to include more patients and to provide follow-up.