

A Descriptive Study to Assess Awareness and Practices of Diabetic Patients for Prevention of Foot Ulcer in I.G.M.C Hospital Shimla, H. P.

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Abstract: Diabetes has emerged as a major health care problem in India. The burden of diabetic foot complications poses a heavy challenge to both the patient and the physician, especially in developing countries like India. The most common causes of foot problems in people with diabetes are socio cultural risk factor like barefoot walking using improper foot wear and poor knowledge of foot care practices. **Aim:** the aim of study is to assess the awareness and practices of diabetic patients for prevention of foot ulcer. **Objectives:** to assess awareness and practices of diabetic patients for prevention of foot ulcer and to associate the awareness and practices with selected personal variables and health variables. **Methods:** a descriptive research design was adopted. Forty diabetic patients were selected from IGMHC hospital Shimla, who were attending diabetic clinic there. A structured questionnaire and questionnaire checklist were administered to selected diabetic patients, to assess awareness and practices of diabetic patients for prevention of foot ulcer. **Results:** the majority of the diabetic patients, 67.5% had moderate awareness, 27.5% of adequate awareness and 5% had inadequate awareness. Whereas 52.5% respondents moderate practices and 47.5% adequate practices for prevention of foot ulcer. The results revealed that there was no significance association of awareness and practices with selected personal variables and health variables. **Conclusion:** The study result shows that the majority of subjects had moderate awareness as well as practices for prevention of foot ulcer.as such there is a need to develop an intensive program to increase awareness and practices among diabetic patients for prevention of foot ulcer.

Keywords: Diabetic Foot Care, Patient Awareness, Foot Ulcer Prevention, Diabetes Management, Health Education

1. Introduction

The burden of diabetic foot complications poses a heavy challenge to both the patient and the physician especially in developing countries like India. The most common causes of foot problems in people with diabetes are sociocultural risk factor like barefoot walking using improper footwear and poor knowledge of foot care practices and lack of adequate and timely access to podiatry services. India has huge health care burden of managing more than 61 million diabetic persons, which is bound to increase further due to rapid urbanization and lifestyle changes occurring in the country. The real burden of the disease is, however due to its micro and macro vascular complications which lead to increased morbidity and mortality. It is also known that almost 50% of people with diabetes remain undetected and hence some may even present with micro vascular and macro vascular complications at the time of diagnosis. India faces several challenges in diabetes management including a rising prevalence in urban and rural areas, lack of disease awareness among public limited health care facilities high cost of treatment suboptimal glycemic control rising prevalence of diabetic complications. WHO estimates that mortality from diabetes heart disease and stroke costs about 210 billion in India in the year 2005. Much of the heart disease and stroke in these estimates was linked to diabetes. WHO estimates that diabetes heart disease and stroke together will cost about 333.6 billion over the next 10 year in India.

2. Need of the Study

According to the researcher lots of complications are associated with DM. Those complications arise chiefly from the disruption of the vascular system which can result in

inadequate circulation to the peripheral body. This places the foot at higher risk of ulceration and infection. foot complication are among the most serious and costly complication of diabetes mellitus. Amputation of the lower extremity or part of I usually preceded by a foot ulcer. Most of the patients of diabetes mellitus are not fully aware of the symptoms including foot ulcer. There poor knowledge foot care practices and lack of adequate steps to take timely help may result in to complex problems including fatal consequences. Chronic complications of diabetes mellitus are important implications for planning nursing care irrespective of whether the patient is at home or in hospital.

3. Statement of the Problem

A Descriptive Study to Assess Awareness and Practices of Diabetic Patients for Prevention of Foot Ulcer in I.G.M.C Hospital Shimla, H. P.

Aim: The aim of study was to assess the awareness and practices of diabetic patients for prevention of foot ulcer.

Objectives

- 1) To assess the awareness of diabetic patients for prevention of foot ulcer.
- 2) To assess practices of diabetic patients for prevention of foot ulcer.
- 3) To associate the awareness and practices with selected personal variables and health variables.

Research Hypothesis

H1: There is significance association between awareness for prevention of foot ulcer with selected personal variables and health variables.

H2: There is significance association between practices for prevention of foot ulcer with selected personal variables and health variables.

H01: There is no significant association between awareness for prevention of foot ulcer with selected personal variables and health variables.

Assumption:

- 1) The diabetic patients may have less awareness of prevention of foot ulcer.
- 2) The diabetic patients may not be following the practices for prevention of foot ulcer.

Research Methodology

Descriptive design with quantitative research approach. Purposive sampling techniques used to select sample of 40 from diabetic clinic IGMSC Shimla. The tool comprised of three Sections: Section A included question regarding Sociodemographic variables Section B structured questionnaire to assess the knowledge of diabetic patient for prevention of foot ulcer. Section C included questionnaire Checklist to assess the practices of diabetic patient for prevention of foot ulcer.

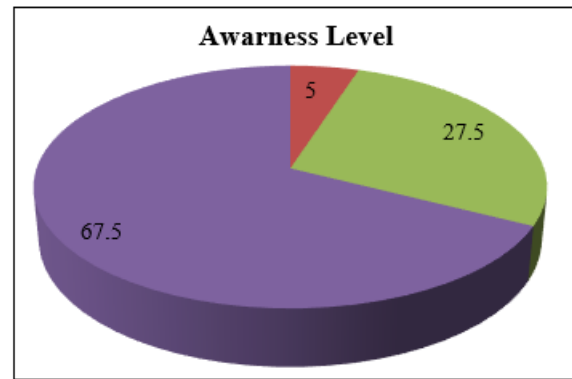
The data was collected by using demographic Performa, Structured knowledge questionnaire and structured checklist. The selected socio demographic variables are age, gender, education, occupation, habits, family history of diabetes, duration of diabetes, types of diabetes mellitus other health problems, and source of information, regarding foot ulcer. Section-B included structured knowledge questionnaire which consist of 15 questions regarding foot ulcer. Section-was included questionnaire check list which consist of 14 statements regarding practice of diabetic patient for prevention of foot ulcer. To ensure the validity of tool it was submitted to 7 experts. The data obtained was analyzed by using descriptive and inferential statistics, mean and standard deviation, Karl persons coefficient test, chi lsquare.

4. Results

Frequency and percentage wise distribution of subject according to their socio demographic variables revealed the major findings

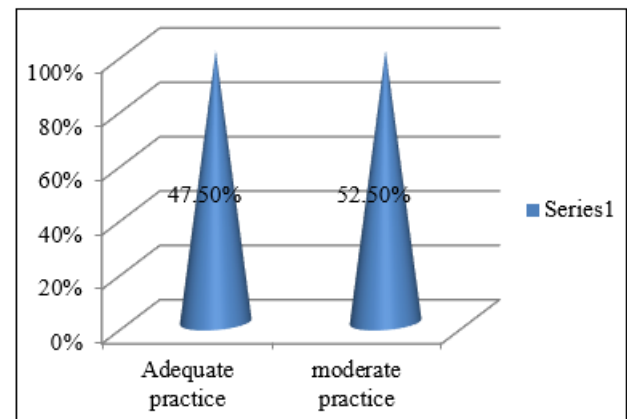
- 52.5% were in the age group of 50 to 59 years, 52.5% of patients were male.
- 40% subjects were primary education, 47.5% diabetic patients were mostly housewives.
- No habits of tobacco in any form and alcohol followed by 22.5% and 7.5% habit of smoking.
- 67.5% were no family history of diabetes, 30% patients were diabetes for periods of 1-5 years
- 92.5% patients belong to type 2 diabetes mellitus
- 62.5% received information about diabetes from professionals.

Section B: This section deals with the percentage of awareness score of subjects for prevention of foot ulcer.



This pie chart shows that 27(67.5%) patients were moderate level of awareness score, 11(27.5%) were adequate level of awareness score and remaining 2(5%) had inadequate level of awareness for prevention of foot ulcer in diabetic patients.

Section C: This section deals with the percentage of practices score of subjects for Prevention of foot ulcer.



Section D: Finding related to association of awareness and practices with selected Personal variables and health variables.

In the present study there was no significant association between awareness and practices with selected personal variables and health variables. Null hypothesis H01 and H02 are accepted.

5. Conclusion

The following conclusion was drawn based on the finding of this study. 27 diabetic patients had moderate level of awareness followed by 11 diabetic patients with adequate level of awareness and 2 were having inadequate level of awareness. Whereas 21 diabetic patients had moderate practice scores and 19 had adequate practice scores regarding prevention of foot ulcer. For inadequate awareness and practices various teaching on awareness can be started.

6. Recommendation

- The study recommended that awareness programme to improve patient awareness and practices about foot care, foot care activities by the nurse practitioners should be emphasized.

- Further interventional study is recommended to enhance foot care practice and diabetic patients should under go counseling session in order to develop their awareness regarding prevention of foot care.

References

- [1] Joshi SR, AK Das VJ Vijay, Mohan.Challenges in diabetes care in india.JAPI. 2008 June (accessed 2016 Feb 23);56: 447. Available from: <http://www.japi.org>.
- [2] Karri VVS, Current perspective in the management of diabetic foot ulcers-an overview on the indian scenario. international journal of pharmacy and pharmaceutical sciences(internet) 2014 Sept (Accessed 2015 Oct 16);6(9):1 Available from <http://www.innovarecademics.in>
- [3] Gholap MC, Mohite VR. To assess the knowledge and practice regarding foot care among diabetes patients. Indian j.sci.res [internet].2013 [accessed 2015 Oct 21];4(2):69-75. Available from: [http://www.ijsr.in/upload/99366923 } Chapter -12.pdf](http://www.ijsr.in/upload/99366923%20Chapter%20-12.pdf)
- [4] Subhash C. Diabetic Foot Ulcer –A Case Study. journal of exercise science and physiotherapy internet .2005 june [Accessed 2015 Sept 11];1(1) & (2):98-99. Available from: <http://www.medind.nic.in>