

AN ANALYSIS OF THE QUALITY OF LIFE AMONG DIABETIC FOOT ULCER PATIENTS IN KUANTAN, PAHANG

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Conflict of Interest: None

6.3%

Prevalence worldwide¹

50%

Recurrence rate¹

15-25%

Risk to develop DFU²

¹Zhang, P., et.al Annals of Medicine, 49(2), 106–116.

²Kossioris A., et.al Determinants of Health-Related Quality Of Life In Patients With Diabetic Foot Ulcers: A Systematic Review And Meta-Analysis. Health Science Journal, 9(6), 1–7.

OBJECTIVES

1

To describe the sociodemographic characteristics of diabetic foot ulcer patient in Hospital Tengku Ampuan Afzan, Kuantan.

2

To determine risk factors associated with quality of life among diabetic foot ulcer patients.

3

To investigate the relationship between HRQoL, the sociodemographic status and the selected clinical characteristic of diabetic foot ulcer.

METHODOLOGY

- Cross sectional, convenient sampling
- Study period: 17th July 26th August 2017
- Sample population: Diabetic foot ulcer patients under follow-up, warded or first visit to HTAA

Inclusion Criteria:

- Diabetes Mellitus Type 1 or 2
- Ability to communicate in Malay or English
- Consented adult (18 years and above)

RISK FACTORS

MODIFIABLES

Quality of Life

NON-MODIFIABLES

Marital Status
Occupation
Household Income
Academic Level
Smoking Status
Vape Status
Types of Diabetes
Treatment
Glycaemic Control
Preventive measure taken

Age
Sex
Ethnicity
Type of Diabetes Mellitus
Duration of Diabetes
Mellitus
Comorbidity
Wagner Classification
Amputation status
Limb involvement
Ulcer Status

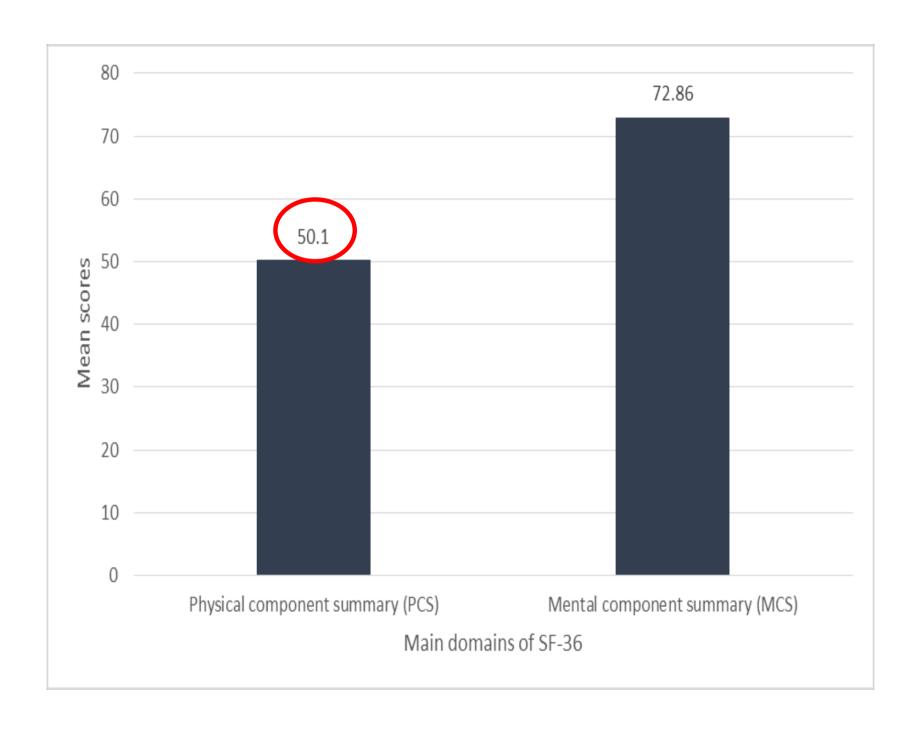
METHODOLOGY

■Research Tool: guided self-administered questionnaire of

SF-36¹

QUALITY OF LIFE SURVEY / KAJIAN KUALITI HIDUP				
Sila tandakan 🔼) satu jawapan sahaja bagi setiap soalan pa				
anda tidak pasti tentang jawapan bagi sesuatu soalan, pilihla	ıh jawapan yang paling hampir			
berdasarkan pendapat anda sendiri.				
Tick (N) one answer for each question as indicated. If you are unsure ab	out how to answer a question, please			
give the best answer you can.				
 Secara umum, kesihatan anda boleh dianggap berada ditahap: In ganeral would you say your health is 				
Sangat-sangat Sangat Baik Sede	rhana Teruk			
baik baik				
Excellence Very good Good Fai	r Poor			
 Berbanding dengan setahun yang lalu, bagaimana anda nil. secara keseluruhan? 	aikan kesihatan anda <u>sekarang</u>			
secara keselurunan: Compared to 1 year ago, how would you rate your health in general n	ow? Would you say it is			
	g baik dari setahun yang lalu			
1414	hat worse now than one year ago			
Much better now than one year ago				
	ebih teruk dari setahun yang			
Somewhat better than one year ago lalu				
Aduc n w	orse now than one year ago			
C 1 1-1-				
Sama dengan setahun yang lalu About the same as one year ago				
33.00				
3a. <u>Adakah kesihatan anda sekarang menghadkan anda</u> daripada melakukan aktiviti-aktiviti				
berat? Contohnya berlari, mengangkat barang-barang berat, mengambil bahagian dalam				
acara sukan lasak dan seumpama dengannya.				

¹ Sararaks et al., Validity and Reliability of the SF·36: The Malaysian Context



Physical Health Component Summary

		Physical Health	
		Summary(PCS)	
Demographic		Mean rank	p value
Age	Mean(SD)	(56+11.8)	0.031
Marital	Status**		0.008
Sin	gle	76.1	
Mar	ried	52.59	
Dive	orced	14	
Wid	lower	38.62	
Income [*]	**		0.043
low	income	48.99	
mid	dle income	69.15	
higl	n income	67.11	
Hyperte	nsion*		0.003
Yes		44.19	
No		61.83	

	Physical Health Summary(PCS)	
Clinical	Mean rank	p value
Types of Amputation*		0.001
Major	15.81	
Minor	32.34	
Chronic Kidney Disease*		0.005
Yes	32.3	
No	55.9	
Preventive Measure	•	
Wheelchair*		0.003
Yes	40.85	
No	59.08	

^{*}Mann-Whitney U test, **Kruskal-Wallis test

Physical Health Component Sy

Individuals with two or more chronic conditions having more pronounced lower HRQoL, Rothrock et al. (2010)

* Rothrock, et al. (2010). Relative to the General US Population, Chronic Diseases are Associated with Poorer Health-Related Quality of Life as Measured by the Patient-Reported Outcomes Measurement Information System (PROMIS). *Journal of Clinical Epidemiology*, 63(11), 1195–1204.

On-S		
Married	52.59	
Divorced	14	
Widower	38.62	
Income**		0.043
low income	48.99	/
middle income	69.15	
high income	67.11	
11 (000

Hypertension*

Disease itself impose a heavy economic burden to the patient as they required comprehensive wound care (Madanchi et al., 2013).

Above knee amputation patients had low quality of life, (Hogg et al. 2012) * Hogg, et al.(2012). Measures of health-related quality of life in diabetes-related foot disease: a systematic review.

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Wheelchair*		0.003
Yes	40.85	1
No	59.00	

Moving around with wheelchair restrict their movement and daily activities (Hogg et al. (2012)

^{*} Madanchi, N., et al(2013). Who are diabetic foot patients? A descriptive study on 873 patients. Journal of Diabetes & Metabolic Disorders, 12(1), 36.

^{*}Hogg, et al.(2012). Measures of health-related quality of life in diabetes-related foot disease: a systematic review.

CONCLUSIONS

- ■Diabetic foot ulcer significantly affects physical aspect of patients' quality of life
- ■Closer attention among the lower social economy background with multiple co-morbidities

Thank You