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.
**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

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

NON-MODIFIABLES

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

1. Secara umum, kesehatan anda boleh dianggap berada di tahap:
   In general would you say your health is...
   - Sangat-sangat baik
   - Sangat baik
   - Baik
   - Sederhana
   - Teruk

2. Berbanding dengan setahun yang lalu, bagaimana anda nilai kesehatan anda sekarang secara keseluruhan?
   Compared to 1 year ago, how would you rate your health in general now? Would you say it is...
   - Jauh lebih baik dari setahun yang lalu
   - Lebih baik dari setahun yang lalu
   - Sama dengan setahun yang lalu
   - Kurang baik dari setahun yang lalu
   - Jauh lebih buruk dari setahun yang lalu
   - Lebih buruk dari setahun yang lalu
   - Sama dengan setahun yang lalu
   - Kurang buruk dari setahun yang lalu
   - Jauh lebih buruk dari setahun yang lalu


¹ Sararaks et al., Validity and Reliability of the SF·36: The Malaysian Context
## Physical Health Component Summary

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Physical Health Summary (PCS)</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Mean (SD)</td>
<td>(56+11.8)</td>
</tr>
<tr>
<td>Marital Status**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>76.1</td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>52.59</td>
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</tr>
<tr>
<td>Divorced</td>
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<td></td>
</tr>
<tr>
<td>Widower</td>
<td>38.62</td>
<td></td>
</tr>
<tr>
<td>Income**</td>
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<td>0.043</td>
</tr>
<tr>
<td>low income</td>
<td>48.99</td>
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</tr>
<tr>
<td>middle income</td>
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<td></td>
</tr>
<tr>
<td>high income</td>
<td>67.11</td>
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<tr>
<td>Hypertension*</td>
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<tr>
<td>Yes</td>
<td>44.19</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>61.83</td>
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</table>

<table>
<thead>
<tr>
<th>Clinical</th>
<th>Physical Health Summary (PCS)</th>
<th>p value</th>
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</thead>
<tbody>
<tr>
<td>Types of Amputation*</td>
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<tr>
<td>Major</td>
<td>15.81</td>
<td></td>
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<tr>
<td>Minor</td>
<td>32.34</td>
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</tr>
<tr>
<td>Chronic Kidney Disease*</td>
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<td>0.005</td>
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<tr>
<td>Yes</td>
<td>32.3</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>55.9</td>
<td></td>
</tr>
<tr>
<td>Preventive Measure</td>
<td></td>
<td>0.003</td>
</tr>
<tr>
<td>Wheelchair*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>40.85</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>59.08</td>
<td></td>
</tr>
</tbody>
</table>

*Mann-Whitney U test, **Kruskal-Wallis test
### Physical Health Component Summary

**Demographic**

<table>
<thead>
<tr>
<th>Age Mean (SD)</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(56+11.8)</td>
<td>0.031</td>
</tr>
</tbody>
</table>

**Marital Status**

- Single: 76.1
- Married: 52.59
- Divorced: 14
- Widower: 38.62

**Income**

<table>
<thead>
<tr>
<th>Income Type</th>
<th>p value</th>
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<tbody>
<tr>
<td>low income</td>
<td>0.043</td>
</tr>
<tr>
<td>middle income</td>
<td></td>
</tr>
<tr>
<td>high income</td>
<td></td>
</tr>
</tbody>
</table>

**Hypertension**

- Yes: 44.19
- No: 61.83

### Clinical

**Types of Amputation**

- Major: 15.81
- Minor: 32.34

**Chronic Kidney Disease**

- Yes: 32.3
- No: 55.9

**Preventive Measure**

- Wheelchair:
  - Yes: 40.85
  - No: 59.08

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


Above knee amputation patients had low quality of life, (Hogg et al. 2012)


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


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

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