Background

- Lower limb amputation (LLA) is a significant public health and socio-economic challenge.
- Diabetes mellitus (DM) is one of the leading causes of lower limb amputation.
- LLA is largely preventable following adequate foot care practices, healthy lifestyles and vascular care.

Aim

- To assess the knowledge and practice of foot care and examination among individuals living with DM in rural Eastern Cape, South Africa.

Methods

Design: A descriptive, exploratory qualitative study.

Setting: A selected rural community in Eastern Cape, South Africa.

Participants: 13 individuals living with DM (8 non-amputees and 5 amputees) and 2 community representatives.

Recruitment: Participants were recruited through community contacts or from an operation database using purposive sampling.

Data collection: Face-to-face, semi-structured individual interviews.

Data analysis: Inductive content analysis.

Results

- Participants included 10 females and 5 males and age ranged from 53-73 years.
- Participants were not aware of the importance of foot care and examination.
- The few that had undergone foot examination were unaware of the importance.
- Some had the misperception that foot examination was only needed if they had symptoms.

Knowledge and practice of foot care

“I do not know at all that there is a need to go for foot examination because I was never told that I should go to check my feet and they [my feet] have never been checked”

“Yes, I have my foot examined when I visit a private doctor. He normally do like a complete check up for me including my feet though he doesn’t mention why he is checking my feet”

“No, I don’t check my foot or go for foot examination. I didn’t know I was supposed to check. I didn’t know at all”

“No, I don’t check my feet unless I feel some hotness. I don’t have anything on my feet or legs, I don’t have a wound or nothing I am fine it”

Discussion

- Knowledge and practice of foot care and examination among individuals living with DM in this setting was low.
- Interventions and community engagement programmes aimed to improve foot care knowledge among individuals living with DM in rural areas are required to reduce LLA incidence.