

DIABETIC FOOTCARE IN COMMUNITY-BEST PRACTICE

Every 30 seconds, 2 people get their lower limb amputated globally and in Indian scenario, diabetic foot care is largely neglected. Also, healthcare providers too aren't adequately aware of foot care. 65% of amputations could be prevented by proper foot care, early identification and treatment by people with diabetes mellitus. In an attempt to prevent this, under the World Diabetes Foundation in collaboration with Udupi district health authority project was implemented "Diabetic Foot Care Stepping Ahead" (WDF 15:941), we are trying to strengthen the diabetic foot care on a great scale. Capacity building trainings and workshops for different levels of health care providers on diabetic foot care, community survey of diabetic foot complications and screening of high risk population for diabetes, mass media awareness and development of IEC materials and establishment of diabetic foot clinics, have facilitated to render better care in this area. Advanced Centre for Diabetic Foot Care and Research in Kasturba Hospital, Manipal and other peripheral level foot clinics in few centres across the Udupi District has been started. Through this, we will strive to alleviate the suffering pertaining to foot complications among people with diabetes.

Project Activities:

- ❖ Capacity building for screening, prevention, identification and management of diabetic foot complications is the important goal of the project. Different health care professionals have been trained from across the Udupi district, predominantly from the government sector and few from private. Physicians (104), Nurses and Auxillary Nurse Midwives (ANM)s (226), Accredited Social Health Activists (ASHA)s(852), Physiotherapists(75) were the different health care providers trained. It is being found remarkable that a mean enhancement of average 18 percentage in knowledge is very significant. Ultimately capacity building among health professionals was endeavoured.



- ❖ A Series of seminars were conducted for Bharat Scouts & Guides, Volunteer Service Organization, National Cadet Corps, Youth Red Cross members at their college steps followed by walkathons and street play on lifestyle modifications and diabetes mellitus.



- ❖ Different varieties of validated Information, Education, Communication (IEC) materials on diabetes mellitus and diabetic foot care were developed in the forms of patient manual, videos, pamphlets, brochures and posters.

“ಮಧುಮೇಹದ ನಿಯಂತ್ರಣ : ಮಧುರ ಜೀವನಕ್ಕೆ ಆಮಂತ್ರಣ”

ಅಪಾಯಕಾರಿ ಅಂಶಗಳು

ಅನುವಂಶೀಕರಣ

ಜೀವನಶೈಲಿ

ನಿಯಂತ್ರಣ

ರೋಗಲಕ್ಷಣಗಳು

ಮಧುಮೇಹದ ಪರಿಣಾಮಗಳನ್ನು ತಡೆಗಟ್ಟುವುದು

ನಿಯಂತ್ರಣ

ಮಧುಮೇಹದ ತೊಂದರೆಗಳು

WDF 15 - 941 Diabetic Foot Care - Stepping Ahead

ಆರೋಗ್ಯಯುತ ಪಾದ : ಮಧುಮೇಹಿಗಳಿಗೆ ದಶ ಸೂತ್ರಗಳು

1

ನಿಯಮಿತವಾಗಿ ಕ್ಷೇತ್ರದ ಶೇಷ

ನಿಯಮಿತವಾಗಿ ಪಾದದ ಶೋಧನಾ ಕಾರ್ಯಕ್ರಮಗಳನ್ನು ಮಾಡಿ ಕ್ಷೇತ್ರದ ಶೇಷವನ್ನು ತ್ಯಜಿಸಿ.

2

ಪ್ರತಿದಿನ ಪ್ರತಿದಿನ ಪರಿಶೀಲನೆ

ಗಾಂಧಿ, ಬೆಟ್ಟಿ, ಮುಖ್ಯ ಪರಿಶೀಲನೆ, ಪಾದದ ತೋರಿಸುವುದು, ಕ್ಷೇತ್ರದ ಶೇಷವನ್ನು ತ್ಯಜಿಸಿ.

3

ಐರಿಗಾಣವನ್ನು ಸಂಪರ್ಕಿಸಬಾರದು

ಐರಿಗಾಣವನ್ನು ಸಂಪರ್ಕಿಸುವುದು ಕಣ್ಣಿನ ಸ್ವಚ್ಛತೆಯನ್ನು ಕಾಯ್ದುಕೊಳ್ಳುವುದು ಮತ್ತು ಕಾಣದ ಮುಂಚಿನ ಗುರುತು.

4

ಅಪಾಯಕಾರಿಯಾದ ಪಾದರಕ್ಷೆ

ಗಟ್ಟಿದ ಪಾದದ ಪಾದರಕ್ಷೆಯನ್ನು ಧರಿಸಬಾರದು ಮತ್ತು ಪಾದರಕ್ಷೆಯನ್ನು ಒಣಗಿಸಿ ಧರಿಸಬಾರದು.

5

ಮೃದುವಾದ ಕಾಲುಪರಿಚ್ಛೇದ

ಮೃದುವಾದ ರಂಗುಗಳಿಂದ ಮಾಡಿದ ಕಾಲುಪರಿಚ್ಛೇದವನ್ನು ಧರಿಸಬೇಡಿ.

6

ಕಾಲದ ಪರಿಚ್ಛೇದ

ಪ್ರತಿದಿನವೂ ಕಾಲುಗಳನ್ನು ಸ್ವಚ್ಛಗೊಳಿಸಿ ಮತ್ತು ಕಾಲುಗಳನ್ನು ಒಣಗಿಸಿ.

7

ಪಾದಕ್ಕೆ ಒತ್ತಿರುವ ಊಟ ಸಂಪರ್ಕಿಸಬಾರದು

ನಿರೀಕ್ಷಿಸಿದ ಪಾದದ ಪರಿಚ್ಛೇದವನ್ನು ಮಾಡಲು ಒತ್ತಿರುವ ಊಟ ಸಂಪರ್ಕಿಸಬಾರದು.

8

ಸಮೀಪದ ಮೈನುಮಾನದವು

ಕ್ಷೇತ್ರದ ಶೇಷಗಳಿಂದ ಮುಂಚೂಣಿಯಲ್ಲಿ ಪಾದದ ಸ್ವಚ್ಛತೆಯನ್ನು ಕಾಯ್ದುಕೊಳ್ಳುವುದು.

9

ಕಾಲದ ಆರೈಕೆ

ಕಾಲದ ಆರೈಕೆಯನ್ನು ಸ್ವಚ್ಛಗೊಳಿಸಿ ಮತ್ತು ಕಾಲದ ಆರೈಕೆಯನ್ನು ಮಾಡಬೇಡಿ.

10

ಮಧುಮೇಹದ ನಿಯಂತ್ರಣ

ಮಧುಮೇಹದ ಮಾರ್ಗದರ್ಶಿ ಮತ್ತು ಸ್ವಚ್ಛತೆಯನ್ನು ನಿಯಂತ್ರಿಸಿ.

11

ಪಾದದ ದಶ ಸೂತ್ರಗಳನ್ನು

ಪಾದದ ದಶ ಸೂತ್ರಗಳನ್ನು ಪಾಲಿಸಿ ಮತ್ತು ಪಾದದ ದಶ ಸೂತ್ರಗಳನ್ನು ಪಾಲಿಸಿ.

ಕಾಲಕಾಲಕ್ಕೆ ನಿಮ್ಮ ಪಾದಗಳನ್ನು ಪರಿಶೀಲಿಸಿ ಹಾಗೂ ಸಂರಕ್ಷಿಸಿ

ಕಾಲದ ಆರೈಕೆ ನಿಮ್ಮ ಕಾಲು ತುಕ್ಕಾಗುವುದನ್ನು ತಡೆಗಟ್ಟಿಸಿ

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❖ IEC materials were distributed to all health care centres, the television and radio program was conducted and broadcasted on diabetic foot complications and reached approximately 150000 population through local community radio and television. Publications of newspaper informative articles and educative videos on diabetes and

applicable to diabetic foot complications. Community screening for Diabetes Mellitus and Diabetic Foot Complications are the untainted service objective of the mission. Here the ASHAs and Auxiliary Nurse and Midwife's (ANMs) are empowered to do the door to door screening for diabetes mellitus and diabetes mellitus. They are facilitated by training, reviews and mentoring. All the screened participants were imparted with health education on diabetes mellitus. Newly diagnosed participants and people with diabetes were called for the special camps organized at respective primary health centers of community health centers for advanced assessment and conservative management. Self-sustainability of care and assessment procedures were adopted through capacity building trainings of different health professionals and establishment of a diabetic foot clinic. At present, we have screened more than one lakh populations through door to door survey, various camps, in collaboration with Non Communicable Disease division of Udupi District, Government of Karnataka. All participants were screened free of cost and those who requires further investigation were referred to Non Communicable Disease (NCD) clinic of Udupi District, and Kasturba Hospital for further diagnosis. The 16 foot clinic (01 advanced clinic, 02 intermediate clinic and 13 peripheral clinic) were established at different part of Udupi district. Those who require further care were referred to secondary clinic or centre for excellence to prevent amputation.





- ❖ Training program on self-management of diabetes mellitus and diabetic foot care was conducted for the people with diabetes. Which in turn assists in formation of diabetes club. Diabetes Management Task Force will be the byproduct of the mission.





- ❖ It is being found that absolute minimum services are available for diabetic foot care at multi-specialty hospitals and absolute absence of diabetic foot care services in peripheral level. Service generation is the important priority of this mission through the establishment of diabetic foot clinics at different levels, adopting a model of public private partnership (PPP). Centre for excellence diabetic foot clinic is established in KH, Manipal intended to cater all complex diabetic foot cases of Udupi district and also functions as a research and resource centre. There are three secondary level clinics established in Udupi, Kundapura and Karkala to cater intermittent foot care for the people. Basic level diagnosis, care, support and treatment rendered at community set up through 13 basic level diabetic foot clinics at selected Community Health Centres and Private Hospitals of Udupi District. This is how the mission is trying to generate all levels of services at door steps to alleviate the suffering from diabetic foot complications.

MANIPAL UNIVERSITY
WORLD DIABETES FOUNDATION (WDF 15-341)

ಮಧುಮೇಹ ಪಾದ ಚಿಕಿತ್ಸಾಲಯ

ಅಸಾಂಕ್ರಾಮಿಕ ರೋಗಗಳ ಕ್ಲಿನಿಕ್ ಸಮುದಾಯ ಅರೋಗ್ಯ ಕೇಂದ್ರ, ಬ್ರಹ್ಮಾವರ

Diabetic Foot Care : Stepping Ahead

MANIPAL UNIVERSITY
Diabetic Foot Clinic / ಮಧುಮೇಹ ಪಾದಚಿಕಿತ್ಸಾಲಯ

Available Services	ಲಭ್ಯವಿರುವ ಸೇವೆಗಳು
Assessment	ತಪಾಸಣೆ
Regular Foot Check-up	ಪಾದದ ಸಾಮಾನ್ಯ ಪರಿಶೀಲನೆ
Monofilament Testing	ಸ್ಪರ್ಶಾನ್ವೇಷಣೆ
Ankle Brachial Index (ABI)	ಹಿಮ್ಮಡಿ ತೋಳಿನ ಸೂಚ್ಯಂಕ
Vibration Perception Threshold	ಕಂಪನ ಗ್ರಹಿಸುವ ಪರಿಶೀಲನೆ
Infrared Temperature	ಪಾದದ ಸ್ವಲ್ಪಾಯ ಉಷ್ಣತೆ ಪರಿಶೀಲನೆ
Treatment	ಚಿಕಿತ್ಸೆ
Therapeutic Pedicure	ಪಾದೋಪಚಾರ ಚಿಕಿತ್ಸೆ
Debridement	ಪಾದೋಪಚಾರ ಅಂಗಾಂಶಗಳ ತೆಗೆಯುವಿಕೆ
Ulcer Care	ಪುನಶ್ಚೇದನ ಚಿಕಿತ್ಸೆ
Intrinsic Foot Muscle Exercise	ಪಾದದ ಮೂಲಕ ಮಿಂಡಗಳ ಮ್ಯಾಜಿಂಗ್
Foot Care Education	ಪಾದದ ಆರೈಕೆ ಬಗ್ಗೆ ಸಾಧಾರಣ ಜನರಿಗೆ





This is the till date triumph story of the mission, though there are challenges in the journey it was very enriching and encouraging beginning and experience of the unexplored avenues of new horizons of diabetic foot care in India.

Impact of the project:

This mission has strengthened the comprehensive care, support and treatment perspective of diabetes mellitus and diabetic foot care across the district in turn it has escalated Non-Communicable Disease division activities. Since the components of this mission encompassed primordial, primary, secondary and tertiary prevention of diabetes mellitus and diabetic foot complications primary beneficiaries of this project are general population and people with diabetes.

Culturally and local language tailored IEC materials developed under the project, radio programs, television interviews and videos filled the gap in dearth of IEC materials and educational programs specially in the area of diabetic foot, also it has sensitized the people of the district on diabetes mellitus and diabetic foot complications. These IEC materials were used as tool for diabetes mellitus & foot care health education and counselling.

Series of capacity building trainings on diabetes mellitus and diabetic foot care enhanced the knowledge, attitude and practice in care, support and treatment perspectives among health care providers. Enhancement in post test score are the good evidence of the same.

Initiation of peripheral level diabetic foot clinics in Non-Communicable Disease Clinic includes assessment and conservative management of diabetic foot complications using simple gadget by health care providers made availability and accessibility of specialist care at very peripheral which are virtually absent even in majority of private hospitals. Centre for excellence in KH Manipal made availability of advanced care for diabetic foot complications with in the district. Development of referral system and camp based approach in the mission triggered and speeded the accessibility of treatment service for the diabetic foot complications.

Community level screening was performed on more than one lakh individuals in Udupi. Further follow up of high risk individuals with Fasting Blood Sugar and referral to primary health centres revealed approximately 4% of total individuals are newly diagnosed for diabetes mellitus. 33.2% of people with diabetes who exhibited diabetic peripheral neuropathy symptoms were referred for further follow up and treatment.