



Insufficient evidence for patient education in preventing diabetic foot ulceration

Clinical question

How effective is patient education in preventing diabetic foot ulceration?

Bottom line

There was little evidence to support the effectiveness of patient education for the prevention of diabetic foot ulceration or amputations. One randomised controlled trial (RCT) with good methodological quality showed limited patient education did not result in any beneficial effect on these primary outcomes. Patients' foot care knowledge was improved in the short term (one to six months) in five of eight RCTs in which this outcome was assessed, as was patients' self-reported self-care behaviour in the short term (six to 18 months) in seven of nine RCTs. The effects on callus, nail problems and fungal infections were described in five of the included studies, of which only two reported temporary improvements after an educational intervention. The effectiveness of more comprehensive and/or more intensive educational programmes, however, remains to be investigated further.

Caveat

Most of the RCTs included in this review were at high or unclear risk of bias. Only one of the included RCTs was considered to be at low risk of bias. Follow-up ranged from four weeks to seven years, with a median of six months.

Context

Foot ulcers are common in people with diabetes, especially those with peripheral neuropathy and/or peripheral vascular disease. They affect 15% to 25% of people with diabetes at some time in their lives.¹ Foot ulcers not only lead to physical disability and loss of quality of life but also impose a significant economic burden (healthcare costs, industrial disability).

Cochrane Systematic Review

Dorresteijn JAN et al. Patient education for preventing diabetic foot ulceration. *Cochrane Reviews*, 2010, Issue 5. Article No. CD001488. DOI: 10.1002/14651858.CD001488. pub3.

This review contains 11 studies involving over 2710 participants.

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Further references

1. Singh N et al. *JAMA* 2005; 293:217–28.

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