

Managing Diabetic Foot Complications During COVID-19 Lockdown in India: A Survey

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Abstract

To understand the management of diabetic foot complications by the Diabetic Foot Research India (DFRI) members during the lockdown period. An online survey link was created in "Survey Monkey", and the link was sent to all the members of Diabetic Foot Research India (DFRI) who are staying in different parts of India and data were collected from May 2020 to June 2020. The survey included questions on the type of consultation they provided to their patients, management of a patient with an active foot ulcer, and the various difficulties encountered by the doctors during the lockdown. A total of 33 diabetologists from all over the country participated in this survey. Among them, 26 doctors had attended to active diabetic foot infection at the time of the online survey. Almost three fourth of the ($n = 24$; 72.7%) doctors recorded difficulties during the inpatient consultations. Difficulty in regular follow-ups, the facility's workforce shortage was reported to be a significant concern. In managing active foot ulcer cases, 15 doctors (45.5%) opted for in-person consultation in their hospital as they felt the infection cannot be handled over a tele-consultation. Amputation was not performed by 78.7% of doctors, 15% ($n = 5$) of the doctors performed less than five amputations, and 6% ($n = 2$) of the doctors performed more than five amputations during the lockdown period. In the case of SMBG (Self-monitoring blood glucose) values, the regularity of patients reporting the values varied significantly. Only 8 (24.2%) doctors reported that 75% of their patients regularly shared their SMBG values while all the others mentioned that their patients were not performing SMBG regularly. Most of the physicians were able to manage the diabetic foot complications by tele-consultation during the lockdown and only a few asked the patients to get hospitalized for surgical intervention. All doctors should recommend SMBG to continuously monitor patients' blood glucose levels and prevent complications of hyperglycemia, particularly during pandemic situations.

Keywords

COVID-19 lockdown, diabetologists, diabetic foot complications, teleconsultation

Introduction

COVID-19 pandemic has directed us to a remarkable change in medical practice. The majority of hospital admissions among people with diabetes was ordinarily due to lower extremity diseases.¹ The preferred treatment for an active foot ulcer patient was either in-person or through telemedicine during the pandemic to save their limbs. However, the mode of treatment largely depends on the severity of the ulcer, with telemedicine being preferred over or treatment in the outpatient department in the event of uncomplicated/less severe ulcer. If the patient has severe or life-threatening complications, hospital admissions are preferred.^{2,3} The

International Working Group on the Diabetic Foot (IWGDF), Diabetic Foot Australia, D-Foot International, European Wound Management Association (EWMA), College of Podiatry and Foot in Diabetes Care had joined

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