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The diabetic foot in Africa
This edition of the AJDM includes a number of articles on the diabetic foot in an African setting. They range from an overall review of the subject to a report of diabetic foot ulceration caused by rat bites! It is appropriate that we have such an issue concentrating on the diabetic foot, as this complication has for too long played ‘second fiddle’ to other complications such as retinopathy and nephropathy. There is now worldwide recognition of the importance of diabetic foot ulceration—it is an enormously costly complication in terms of both in- and out-patient care, and patients with foot ulcers (both ischaemic and neuropathic) have a significantly increased short-term mortality.

In Africa, the prevalence of foot ulceration in diabetic populations varies geographically, and is between approximately 5 and 20%. In one study, the mortality without surgical intervention was over 50%. A major problem is that patients often present to hospital services late, and that doctors may underestimate the seriousness of the problem. Also, when gangrene develops, many African patients find amputation culturally unacceptable.

In both Europe and Africa, many countries are setting up national initiatives to highlight the problem of diabetic foot ulceration and its prompt and vigorous treatment, preferably by a multi-disciplinary team. One of the most important aspects of these programmes is to encourage patients to care for and inspect their feet regularly, and for diabetes health professionals to examine feet for neuropathy and ischaemia on a regular basis. As with many aspects of diabetes care, education is the key.

The title of the article from Dr Ogbera and colleagues in Nigeria is highly appropriate here—high costs, low awareness, and lack of care.

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References