

**Younger females get more foot problems in Egypt in comparison to the UK**

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**Background & Aims:** Diabetic foot problem is associated with significant morbidity and mortality but this is often neglected in developing countries like Egypt. Therefore a diabetic foot service was started in the Zagazig University Hospital of Egypt in April 2008. The aim of this study was to compare profile of subjects attending this clinic and established Foot Clinic of Lancashire Teaching Hospital, UK. **Method:** Subjects attending foot clinic between April 2008 and August 2008 at both centers were studied retrospectively and characteristics of patients who presented with active problem (new onset ulcer or Charcot Neuroarthropathy) were compared. **Result:** 199 patients attended foot clinic in Egypt and 281 in the UK of which 24 and 55 had active foot problems respectively (Charcot Neuroarthropathy in 2 cases at each site). There was higher proportion of female with active foot problem in Egypt (70.8% vs 45.5%;  $p=0.05$ ). Egyptian patients with active foot problem were younger (55.8 +/- 9.8 years vs 68.5 +/- 13.6 years;  $p < 0.001$ ) but duration of diabetes was similar (13.1 +/- 7.8 years vs 11.0 +/- 8.3 years;  $p = 0.3$ ). Although most had type 2 diabetes, higher proportion were on insulin treatment in Egypt (91.7% vs 23.6%;  $p = 0.006$ ). There was no difference in cardiovascular complications (37.5 % vs 40%) and smoking status (8.3% vs 5.5%). **Discussion:** New ulcers diagnosed in UK is significantly higher than in Egypt, this is probably due to the annual review by trained personnel who examine patient's feet to detect risk factors for ulceration (NICE 2004, Grade A evidence)(2). Females are more suitable to active foot disease in Egypt. This result is in concordance with a study in Pakistan by Syed M et al, 2008(1). As females had a higher BMI, systolic and diastolic blood pressure and total cholesterol Developing countries (Pakistan, India and Egypt) patients are affected with DFP in younger ages(1). On the other hand, Ince et al, 2007(3) found that older patients are usually affected in a trial done in UK which consolidate the current study results in UK. Similar duration of diabetes with earlier diabetes in developing countries is due to multiple risk factors and socio-economic influence. Boyko et al cohort study identified higher body weight, insulin use and history of poor vision as three additional independent predictors of foot ulcer (4)no difference in cardiovascular complications (37.5 % vs 40%) and smoking status (8.3% vs 5.5%). **Conclusions:** This study shows that more females develop foot problem in Egypt at a younger age. This may be due to survival advantage of diabetic females and further studies are needed.