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**Foot care of haemodialysis patient is inadequate despite a higher prevalence of lower limb amputation**

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**Background:** Subjects on haemodialysis have high prevalence of foot problem and amputation due to their co-existent peripheral vascular disease and diabetes. These patients may not access podiatry service regularly possibly because they spend considerable time on the dialysis unit. To overcome this we recently appointed a podiatrist, who visits the dialysis unit twice a week to assess and treat patients with foot problems. As this is a new service we wanted to appraise the foot care received by patients in other haemodialysis centres. **Aim of the Study:** The aim of this study was to gather data of patients who attend haemodialysis unit across England regarding the prevalence of amputation, diabetes status and the type of foot care they received and wish to receive. **Subjects and Methods:** We wrote to sister in charge of adult haemodialysis units across England early this year regarding the foot care received by their patients. Of the replies received from 17 centres till date, the average number of patients dialysed was 116.5 by each centre and 20.5% of these subjects had diabetes. 4.3% of all subjects undergoing dialysis had amputation of which 1.6% was minor (Toe or Ray amputation) and 2.7% major (Below or above knee). 2.6% had active foot ulcers (0.8 % ischaemic and 1.8 % neuropathic). All subjects received foot care either by a hospital or a community podiatrist and the care was felt to be sub-optimal (Average Score 2.6 out of 5). They also felt that specialized foot service to the dialysis unit through a dedicated podiatrist was important (Average score 4.5 out of 5) and were keen to have a dedicated podiatrist visit their unit (Average score 4.2 out of 5). **Discussion:** Our survey shows that there is a higher prevalence of amputation in haemodialysis unit across England, but the foot care received by these patients was felt to be inadequate. This could be enhanced by the provision of a dedicated renal podiatrist who visit haemodialysis unit regularly. This could improve foot care of these vulnerable patients and may also possibly reduce amputations.