

# Better diabetic foot disease care would save taxpayers billions

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The QUT study found billions could be saved by investing in proven treatments for patients with diabetic foot disease. Credit: Queensland University of Technology

Australia could save billions of dollars in healthcare costs by investing in proven treatments for people with diabetic foot disease, according to QUT research.

The study, released during National Wounds Awareness Week (16-22 October), found the Australian health system could save \$2.7 billion over five years if sufferers of [diabetic foot ulcers](#) in particular had access to evidence-based prevention and treatment through Medicare.

QUT Senior Research Fellow and co-chair of Diabetic Foot Australia, Peter Lazzarini, said thousands of patients could also be spared lengthy

hospitalisations and amputations.

"This study shows if we simply fund proven recommended diabetic foot disease care we will not only save limbs and lives, but we will save billions of dollars for Australia, even after factoring in the increased investment in proven care," Mr Lazzarini, a co-author of the study, said.

"There are about 50,000 Australians suffering with a diabetic foot ulcer today and hundreds of thousands that are at high risk of developing one.

"Unfortunately, many Australians with diabetic foot ulcers don't receive the best care available and one major reason is the lack of reimbursement through Medicare or the Pharmaceutical Benefits Scheme (PBS) for recommended treatments."

The study, led by health economists, Dr Rosana Norman and Qinglu Cheng at the QUT-based Australian Centre for Health Services Innovation (AusHSI), was published in the International Wound Journal.

It found more than \$9,000 per person could be saved over five years if each patient at high risk of a diabetic foot ulcer received proven treatment and prevention based on official Australian diabetic foot disease guidelines.

These treatments included receiving regular care by a multi-disciplinary team including a doctor and podiatrist, patient education, appropriate wound dressings, appropriate footwear, and moonboots to offload pressure under the foot.

"We firstly found data from the best Australian and international studies to determine the probabilities of patients healing, ulcerating, needing hospitalisations, amputations and dying when they received best care and when they received the usual care provided in Australia," Dr Norman

said.

"We then entered these data into a widely used economic model to forecast the costs and quality of life associated with best care compared with usual care over five years.

"What we found was quite startling - not only do patients receiving best care have faster ulcer healing, fewer recurrent ulcers, hospitalisations and amputations, but they also have a better quality of life and we still save thousands of dollars per patient.

"These findings suggest an investment in proven diabetic foot care is a 'no brainer', not only do you get better clinical outcomes but you also save money."

A previous QUT study found diabetic foot disease to be in the top 20 causes of hospitalisation in Australia with 27,600 hospitalisations each year caused by diabetic foot disease. The direct cost to Australia's hospital system was \$350 million and up to \$1 billion to the country's health system overall.

"For years clinicians have been advocating investment in evidence-based diabetic foot care recommendations but unfortunately this investment is still to be fully recognised," Mr Lazzarini said.

"This is disappointing as all other evidence-based recommendations in the [Australian diabetes guidelines](#) are quite rightly subsidised through Medicare or the PBS.

"These findings confirm that simply subsidising the recommendations in the [official Australian diabetic foot guidelines](#) will vastly improve the lives of thousands of Australian and boost Australia's budget."

**More information:** Qinglu Cheng et al. A cost-effectiveness analysis of optimal care for diabetic foot ulcers in Australia, *International Wound Journal* (2016). [DOI: 10.1111/iwj.12653](https://doi.org/10.1111/iwj.12653)

Peter A Lazzarini et al. Direct inpatient burden caused by foot-related conditions: a multisite point-prevalence study, *BMJ Open* (2016). [DOI: 10.1136/bmjopen-2015-010811](https://doi.org/10.1136/bmjopen-2015-010811)

Provided by Queensland University of Technology

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