Aim: Foot infection is a common cause for hospitalization and subsequent lower limb amputation among diabetic foot ulcer patient. Infection by Methicillin-Resistant Staphylococcus aureus (MRSA) in diabetic foot clinics is a growing medical problem linked with adverse clinic prognosis.

Methods: A retrospective analysis of wound swabs taken from infected foot ulcers in diabetic patients, selected from an outpatient diabetic foot clinic. This analysis occurred between January 2002 and July 2007 in a universe of 159 patients with positive wound swabs. Test susceptibility to antimicrobial agents, was done.

Results: 159 patients (63% male) had one or more cultures taken during the observation period. Among these patients, 75% had Type 2 Diabetes and the average HbA1c was 8.2%. Mean age of the population analyzed was 68 years and the average duration of the disease was 14.6 years.

The University of Texas Classifications System For Diabetic Foot Wounds was used to classify the ulcers, between grades 2 and 3. Gram-Positive aerobic bacteria were the commonest isolated micro-organism (63%), followed by Gram-Negative bacteria (37%, respectively). Among the Gram-Positive aerobes, Staphylococcus Aureus was found most frequently. Fifteen cases were confirmed to be Methicillin-Resistant Staphylococcus aureus infection.

All patients were treated previously for Chronic Foot Ulcer Infections with broad-spectrum antibiotics over 1 month and all the MRSA positive patients had history of hospitalization.

Conclusions: This is the first study of MRSA in a Diabetic Foot Community Clinic in Portugal. The prevalence of Methicillin-Resistant Staphylococcus aureus was less than the expected on previous studies. It shows the importance of a multidisciplinary ambulatory community care approach to diabetic foot clinic.