

THE THERAPEUTIC ATTITUDE IN TREATING LESIONS OF THE ARTERIOPATHIC PREDOMINANT DIABETIC FOOT

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Abstract

Background. The diabetic foot is a complex pathologic entity that includes modifications occurred at the foot level, which can be found either at the layer of nerve, skin, bone or muscle tissue, either on blood vessels. A special issue is that of tardiness in coming to the doctor in such patients that have severe lesions, for the most part requiring the performance of a minor or major amputation, long periods of treatment and permanent social assistance. Data from the medical literature are showing that early and adequate care given to diabetic foot lesions may prevent amputation of the injured limb in as many as 80% of cases. The aim of the research is to clarify the surgical indication for the arteriopathic predominant diabetic foot lesions.

Material and methods. A retrospective analysis was performed on a number of 320 predominantly arteriopathic diabetic patients, from the case records of the Cantacuzino Hospital, “I. Juvara” Surgery Clinic, taking into account all aspects related to the compensation and evolution of the diabetic disease, as well as the study of diabetic foot lesions, the surgical therapeutic attitude and the results obtained.

Results. An examination of the obtained results reveals the fact that a large number of amputations were performed in 93% of cases (298 patients), of which minor amputations (transphalangeal, transmetatarsal, toe/s and foot) accounted for 69% of cases (220 patients), and major amputations (lower leg and upper leg) accounted for 24% of cases (78 patients). For the rest of the patients, excisional debridements were performed, accompanied by complementary therapy, namely done by applying local topicals. The post surgery evolution has been unfavourable in 7% (22 patients) of the transphalangeal amputation cases, in 16% (51 patients) of the toe amputation patients (transmetatarsal toe/s) and in 4% (13 patients) of the transmetatarsal foot amputation cases, the surgical solution has consisted of a major amputation.

Conclusions. The arteriopathic terrain of the diabetic patient, evaluated with the ankle-brachial index, is a major factor in determining the evolution towards amputation.

Key words: diabetes, gangrene, diabetic foot

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