

Morbidity of Methicillin Resistant Staphylococcus Aureus (MRSA) in Infected Diabetic Feet

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Purpose: Methicillin resistant staphylococcus aureus (MRSA) is frequently being identified as a causative organism in foot infections, often accounting for >50% of staphylococcus isolates in many institutions. The purpose of this study is review the outcomes of patients admitted to our service with microbiologically confirmed MRSA. The aim of this study is to see if those patients with MRSA have greater morbidity than those who did not have MRSA.

Materials/Methods: A retrospective chart review of patients admitted to the podiatry service at the Carl T. Hayden VAMC from the period of July 2003 to December 2004 was performed. Two cohorts were formulated and compared; those with MRSA, and those without MRSA. Multiple factors were analyzed including length of hospital stay, presence of osteomyelitis, incidence of recurring infection, diabetes status (DM), peripheral arterial disease (PAD), prior antibiotic use, and the rate of lower extremity amputation.

Results: We found that patients with MRSA had greater morbidity than those with non-MRSA infections including increased length of stay, longer antimicrobial duration of use, and increased tendency to require amputation. MRSA infections were also associated with prior antibiotic use.

Discussion/Conclusion MRSA infections are an increasingly frequent complication seen postoperatively and in chronic wounds. We found that there are several factors significantly associated with the development of MRSA infection and that these infections portend a worse prognosis for healing than do those persons with non-MRSA infections. These findings support the need for early aggressive treatment as well as for the judicious use of antimicrobial agents.