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Neuropathic vs. Neuroischaemic Diabetic Foot in a Specialised Centre: Survival of the Fittest?

N. Papanas[1,2], E. Maltezos[2], M. Edmonds[1]
[1]Diabetic Foot Clinic, King's College Hospital, London, UK
[2]Outpatient Clinic of the Diabetic Foot at the Second Department of Internal Medicine, Democritus University of Thrace, Greece

Objective: To examine the frequency of neuropathic and neuroischaemic foot and also to ascertain if there is a difference in patient characteristics between those presenting with one or the other condition. **Patients and methods:** This work is an audit of patients who presented to a specialised foot clinic between 1981 and 2005 with foot ulceration. Patients were classified as neuropathic (evidence of neuropathy with normal peripheral circulation) or neuroischaemic (presence of neuropathy and peripheral arterial occlusive disease). **Results:** Overall, 1798 patients were identified, of whom 1050 patients were still alive at the time of recording, while 748 patients had meanwhile died. Among the living subjects, 739 patients (70.4%) were classified as neuropathic, whereas 311 (29.6%) were diagnosed as neuroischaemic. Among the dead subjects, 180 patients (24.1%) were classified as neuropathic, whereas 568 (75.9%) were diagnosed as neuroischaemic. Frequency of neuroischaemic ulcers was significantly ($p< 0.001$) higher among the dead patients. Neuroischaemic patients were significantly ($p< 0.001$) older at presentation than neuropathic patients. Among the dead subjects, survival since the initial presentation to the foot clinic was significantly ($p< 0.001$) higher in neuropathic (6.87 ± 4.95 years) than in neuroischaemic patients (3.08 ± 3.11 years). **Conclusions:** A substantial part of patients presenting with foot ulceration are neuroischaemic. These patients are significantly older and have a significantly reduced survival as compared to neuropathic patients. Thus, neuropathy prevails in surviving patients.