

### The implementation of the integrated Diabetic Foot model in Moscow - is it effective?

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**Background.** The annual analyze of delivery of diabetic foot service in Moscow revealed a significant proportion of diabetic foot patients and patients with high risk feet was not receive the specialized care, whilst a high proportion of low-risk was. At the same time it was found that high level amputations rate was nine times lower among diabetic foot patients receiving specialized foot care compared with those who were not. So it was hypothesized that implementation of the integrated model of foot care service would increase the proportion of diabetic foot patients in specialized departments. The aim of this study was to analyze: 1) the proportion of diabetic foot patients in specialized departments and 2) the amputations rate among this group after three year of implementation of this program. **Materials and Methods.** The integrated model includes: 1) special educational programs for health care professionals aimed to clarify criteria for referral and management of diabetic foot 2) special brochures and posters for patients with detailed information about foot care and addresses of specialized department for referral. The posters were arranged in out-patients clinics, in-patient departments of endocrinology. The dates were analyzed through care-based annual reviews from each specialized outpatient department. **Results.** Table. The proportion of diabetic foot patients and amputations rate on the base and after 3 year of implementation of integrated model

	2005	2008
The overall quantity of pt/diabetic foot pt (%)	4491/409 (9%)	5355/809 (15%)
Diabetic foot pt/total amputations (%)	409/ 51 (12%)	809/95 (11%)
Diabetic foot pt/high level amputations (%)	409/14 (3.4%)	809/19 (2.3%)
% of high level amput <sup>1</sup> / % of high level amput <sup>2</sup>	17/3.4	13.9/2.3

High level amput<sup>1</sup>- among diabetic foot patients **do not** receiving specialized care

High level amput<sup>2</sup>- among diabetic foot patients receiving specialized care **Conclusion.**

The results obtained demonstrate that proportion of high level amputations are significantly lower among diabetic foot patients receiving specialized care. The implementation of integrated Diabetic Foot model have positive effect on proportion of diabetic foot patients in specialized departments and patients outcome.