Total contact cast is safe modality for offloading patients with Charcot P. Katzman<sup>1</sup>, M. Löndahl<sup>1</sup>, A. Andersson<sup>2</sup>, P Flink<sup>3</sup>, J Apelqvist<sup>3</sup>, J Larsson<sup>2</sup>

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Background and aims: Off-loading is an importment treatment modality to avoid complications of Charcot osteoarthropathy. Total contact cast (TCC) is probably the most efficient method, but the use of this method is still restricted due to fear of iatrogenic complications of TCC. In several case series treatment periods between 6 and 12 months have been reported. Patients and methods: A retrospectice study was performed evaluating length and complications of treatment with TCC in patients with suspected osteoarthropathy visiting the Diabetic Foot clinic between 2003 and 2008. Results: 63 patients (34 males, 27 DM1 and 36 DM2) with a mean age of 60 years and a diabetes duration of 21 years were included in the study. On average casts were left in place for 7,7 days. TCC was used for a median period of 90 days (figure 1). Complications in terms of ulcer development were seen in 2 patients (3 %). 5 patients were unconfortable with their casts, mainly due to itsching or sweating. TCC was followed by treatment with leather-orthosis in 45 patients (71 %). Re-casting was needed in 3 patients. Conclusion: A frequently changed total contact cast is a safe modality for the offloading and immobilization of Charcot osteoarthropaty. Duration of TCC treatment was in our study shorter than previously reported.

