

## PRIZE P4

Ulcer prevalence after surgical approach of the metatarsal head osteomyelitis in diabetic foot.

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Aim: To analyse ulceration rate in patients who have been treated with surgical removed of central metatarsal head. Methods: 68 patients were included in a prospective longitudinal settings during 6 and 12 months after surgical during 2007 October and 2009 March. Total surgical removal of the metatarsal head was done. Patients were treated with standard shoes and insole during the first 6 months. New ulcer development has been registered. Patients with new lesions were treated with customized shoes and insole. A new register of the new lesions has been done at 12 months. Results: New lesion rate after 6 months due to pressure transfer syndrome it was 47.1% (32 lesions). More frequent location it was 2<sup>nd</sup> metatarsal head (14 cases; 43.8%). 1<sup>st</sup> metatarsal head (8 cases; 25 %), 3<sup>rd</sup> and 4<sup>th</sup> with 4 cases each ones (25%) and 5<sup>th</sup> metatarsal with 2 cases (6.3%). Univariate analyzed showed like risk factors of new lesions: Retinopathy (p=0.03 OR=3.3 IC 95%: 1,09-9,96); Nefropathy (p=0,027 OR=1.18 IC: 1.035-1-36), HCL (p=0.027 OR=3.08 IC:1.11-8.52); neuroischemic ulcer (p=0.03 OR=3.3 IC:109-9.96) and previous ulcer (p= 0.02 OR=9.45 IC:1,95-45,71). Ulcerated patients have been received customized orthopaedic treatment of his feet with insole and therapeutic shoes. After 12 months new lesions rate was 8.8% (6 patients). High decreased of the ulceration rate have been demonstrated after customized treatment. Discussion: Ulceration risk after surgical metatarsal head osteotomy was very high due to pressure transfer syndrome to the adjacent metatarsal head. Customized orthopaedic treatment is very important in the management of this patient.