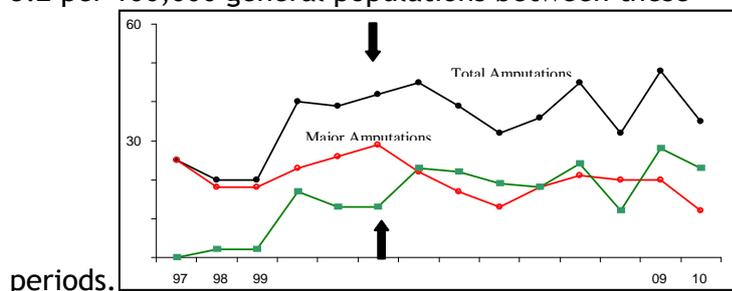


Multidisciplinary foot clinic reduces diabetic lower limb amputation but can not prevent it completely
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Background: Amputation, the most feared complication of diabetes, can be reduced by multi disciplinary foot clinics (MDFC). MDFC was started in the Central Lancashire area in 2002. The aim of this study was to analyse if the introduction of MDFC has reduced the incidence of amputation in subjects with diabetes. Methods: Retrospective data on subjects who had diabetes and underwent lower limb amputation was collected from hospital activity data from 1997 to 2010. Amputations were divided into major (above ankle) and minor (below ankle). The number of registered diabetes patients almost doubled during this time following introduction of Quality & Outcome Framework without any significant increase in population, therefore the incidence of amputation was expressed as per 100,000 general populations. As yearly amputation rate fluctuated, data of initial five years were averaged out and compared with that of last five years. Result: Between 1997 and 2010, a total of 498 lower limb amputations were performed on people with diabetes out of which 282 were major (Figure 1). The proportion of major amputation to minor amputations fell from 76.3% to 46.4% during this period. The total amputations rose from 8.2 per 100,000 general populations to 11.2, which was mostly due to 3 fold rise in minor amputation from 1.9 to 6. There was 17% drop in major amputation from 6.3 to 5.2 per 100,000 general populations between these



Discussion: The introduction of MDFC in our area was effective in reducing major amputation with associate increase in minor amputation as observed in other places. These effects are more pronounced in the first few years but as the clinic is established, further reduction is hard to achieve. Prolonged survival of patients with high risk foot may be the factor for those residual amputations.