

**Moderate to severe diabetic foot infection: data from a Portuguese diabetic foot clinic**

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**Introduction:** Diabetic foot infections (DFI) cause substantial morbidity in persons with diabetes. There are few data on pathogens or risk factors associated with important outcomes in diabetic patients hospitalized with moderate to severe DFI. **Aims:** To describe clinical and microbiological features of the diabetic population admitted for treatment of moderate to severe DFI and their potential impact on outcome. **Methods:** Retrospective study obtaining demographic and clinical data of patients who were discharged from our clinic for moderate to severe DFI during 2011 and their follow-up at 6 months, assessing amputation, readmission and death rates. **Results:** Moderate to severe DFI were treated in 75 hospitalized patients, predominantly male (77.3%) with average age of 64.5 year-old (36-90, min-max). Type 2 diabetes mellitus was present in 89%, with mean HbA1c of 8.5% (from 4.7 to 14.8%). Neuro-ischemic foot was recognized in 56% and neuropathic foot in 41.3% (Charcot osteoarthropathy in 23%). At the time of hospitalization, 72% were under oral antibiotic treatment. Blood and/or wound cultures were collected in 89.3% of patients. Culture isolates were positive in 77.6% of cases. *Staphylococcus aureus* was isolated in 40.4% (MRSA: 52%), Enterobacteriaceae in 34.6% and *Enterococcus sp.* in 32.3% of patients. The rate of empirical antibiotic resistance was 19.2%. The median length of stay was 17 days (3-75). Readmission rate at 30 days was 9%. Major amputation and mortality rates at 6 months were 15% and 5%, respectively. **Conclusions:** Most of diabetic patients hospitalized with moderate to severe DFI in our clinic were elderly and with predominance of neuro-ischemic foot. Multiresistant pathogens were frequently isolated with empirical broad spectrum antibiotic treatment failing to be adequate in about a fifth of our patients. All these factors may have contributed to the presented high rates of major amputation and death.