

[P29] DO DIABETES MULTIDISCIPLINARY FOOT CLINICS HAVE AN IMPACT IN REDUCING MAJOR AMPUTATION RATES-THE COUNTY DURHAM AND DARLINGTON EXPERIENCE?

Giridhar Tarigopula¹, Praveen Partha¹, Shafie Kamaruddin¹, Srikanth Mada¹, Paul Peter¹

¹*County Durham and Darlington NHS Trust, Darlington, United Kingdom*

Aim: To look at the major amputation rates over a 1 year period (2013-2014) in a district general hospital and compare with the previous years. To assess the impact of introducing multidisciplinary foot clinics and a 24 hour referral pathway on the major amputation rates in our diabetes patients. We also looked at the referral time in days between the patient reported symptoms and first contact with Multidisciplinary foot team (MDFT). We wanted to determine if these amputations were preventable.

Method: This was a retrospective audit over a one year period. Major amputation data was analysed using clinical coding. Data was analysed using systemOne and electronic clinical documentation. Regional audit tool was used comprising 58 key parameters.

Results/Discussion: 31 major amputations were identified during the audit period when compared to previous years when the major amputations were around 51. Majority of these were men (n=28) with the mean age being 68. The significant reduction of major amputations was due to introduction of the multidisciplinary foot team, 24 hours referral pathway and education raising awareness amongst patients and various health care professionals. Around 50% of the referrals were seen within 24 hours. Suboptimal diabetes control was noted in these patients. Ideally we would like to see all these patients within 24 hours. However lack of awareness among patients and healthcare professions about the need for immediate referral in active disease foot patients continues to be the main hurdle in the delay in reporting and referrals.

Conclusion: Introduction of the multidisciplinary diabetes foot team and an effective care pathway had a major impact in reducing major amputations in these patients. Majority of diabetes foot amputations can be prevented if these patients are seen and assessed within 24 hours by a multidisciplinary foot team. Raising awareness among patients and healthcare professionals in primary care about the importance of good diabetes control and the need to be referred within 24 hours is the only way in reducing the major amputation rates in these patients. Education about the importance of early recognition and rapid referrals to the MDFT is the only way of preventing major amputation in these patients.