

[P31] TOTAL CONTACT CASTING IS EFFECTIVE TREATMENT MODALITY IN FOOT ULCERS IN NON-PLANTAR AREAS

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Aim: Total contact casting (TCC) is an established treatment modality for offloading plantar foot ulcers in high pressure areas. The aim of this study was to assess the effectiveness of TCC in the management of foot ulcers in non-plantar areas.

Methods: We studied 15 patients who presented to our Diabetic Foot Clinic with post-surgical wounds (9) and non-plantar foot ulcerations (6). Ulcer sites included: dorsal medial arch (6); posterior calcaneal heel (2); medial site of 1st metatarsal head (2); post-digital amputations (2), transmetatarsal amputation (1); anterior ankle (1) and interdigital (1). All patients were treated with standard wound care and casting therapy: non-removable TCCs – 10 patients (6 TCC were with a window); bespoke removable TCCs (4), and aircast (1). At each visit, ulcer healing was monitored with a 3D digital wound assessment technology.

Results: There were 12 men and 3 women with a mean age of 61 ±11.9 years. There were 3 patients with type 1 diabetes (1 had kidney and pancreas transplant) and 12 patients had type 2 diabetes. Their mean HbA1C was 8.1±2.9%. The average ulcer size prior casting was 22±16 cm². All wounds healed using casting treatment and the mean ulcer healing time was 22±12.3 weeks.

Conclusion: Below knee TCC is a successful method of treatment for diabetic foot wounds which are not always associated with elevated plantar pressure. This study has shown that TCC is an effective treatment modality in postsurgical wounds and extensive foot ulceration in non-plantar areas. The benefits of TCC in controlling friction, reducing leg oedema and providing foot and ankle stability are key factors for optimising foot ulcer healing in diabetic foot patients.