

ANALYSIS OF MINOR AMPUTATION AND OTHER SURGICAL INTERVENTIONS IN PATIENTS WITH DIABETIC FOOT REGARDING TO NECESSITY OF THEIR RE-HOSPITALISATION.

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Aim: The financial costs of wound healing and patient stress, especially when re-hospitalisation is necessary, are high. In our previous multivariation analysis we proved that the healing of minor amputations depends on the parameters of infection (CRP) and ischaemia (TcPO₂). The aim of our study was to find out the factors which affect the prognosis of patients after minor amputation and other surgical procedures in respect to the necessity of early re-hospitalisation.

Methods: All patients after minor amputation and other surgical procedures admitted to our hospital in 2004-2007 were involved in our study (n=188, 23,6% of all patients with diabetic foot). This group was divided into patients without re-hospitalisation (n=130, 69,2%) and patients with whom at least one rehospitalisation in the follow up period was required as a sign of an unsuccessful treatment (n=58, 30,85%). The surgical procedures were divided into 5 types. 3 types of minor amputations according to the level of amputation, the resection of metatarsophalangeal joint and the excision of the ulcer.

Results: There was no significant difference in age (60±11 and 59±12 years), sex (male 30,5 and 30,9%), length of the first hospitalisation (20±14 and 21±11 days) and frequency of vascular interventions between both groups with or without re-hospitalisation. The highest re-hospitalisation rate was after excision of the ulcer 6/15 (40%) and the lowest one after resection of metatarsophalangeal joint 4/25 (16%), the other frequencies of re-hospitalisation were 16/53 (30%) for toe amputation, 31/92 (34%) for ray resection and 2/6 (33%) for midfoot amputation.

Conclusion: The results of our study show that the surgical procedure with the most risk in respect to re-hospitalisation was excision of the ulcer and the least risk procedure was resection of metatarsophalangeal joint; the other types of amputations were from this perspective without statistical difference.