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## Risks to feet in the east end: Outcomes of Diabetic foot complications

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**Background:** The foot affections in diabetes are usually severe, costly, disabling and have a prolonged hospitalization or morbidity. An understanding of the pathogenesis, disease spectrum, reporting to a health care provider early on, and the treatment efficiency in the main is poor. The disease prototype has been observed in this study: Reasons for good and bad outcomes have been identified and the specific management strategy useful for our setup has been proposed.

**Methods:** All patients presenting to the surgical clinics with diabetes and foot problems over a one year period were included in the present study. The details regarding the feet status, the demographics, their medical surgical treatment and their outcomes were documented on a prospective basis. Logistic regression analysis was undertaken to determine the association between factors of interest and outcomes of healing in the form of major or minor amputation has been done.

**Results:** 43 Patients were recorded and the male to female ratio was 5:1 where 20% had neuropathic ulcers and 59% had severe disease at presentation. Two types of diabetes foot pathology were recognized that are not usually classified: Acute injury without neuropathy and deep soft tissue infections; 41% required major and 34% required minor amputations respectively and 25% did improve with dressings and debridement. The total number of hospital bed days was 764 days. Major amputation was associated with ischaemia, severe disease at presentation and aging.

**Conclusion:** Patterns of diabetic foot which were not commonly recognized are described. The magnitude of disease and factors which lead to poor outcome are identified. Attention should be waged through a multidisciplinary team approach to timely referral from a primary care centre facility are: Patient education, early diagnosis and appropriate definitive management.

### Biography

Shailesh Adhikary qualified as a Surgeon from Post Graduate Institute in Chandigarh, India in 1994 and currently working as a clinical teacher and a Surgeon at the Community Based Medical College in Eastern Nepal for 12 years and has published 34 papers at national and international journals and is serving as an Editorial Board Member for Asian Journal of Surgery. He is also the Governor of Endoscopic Laparoscopic Surgeons of Asia working to promote the Minimal Access Surgery development across Nepal and in Asia.

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