

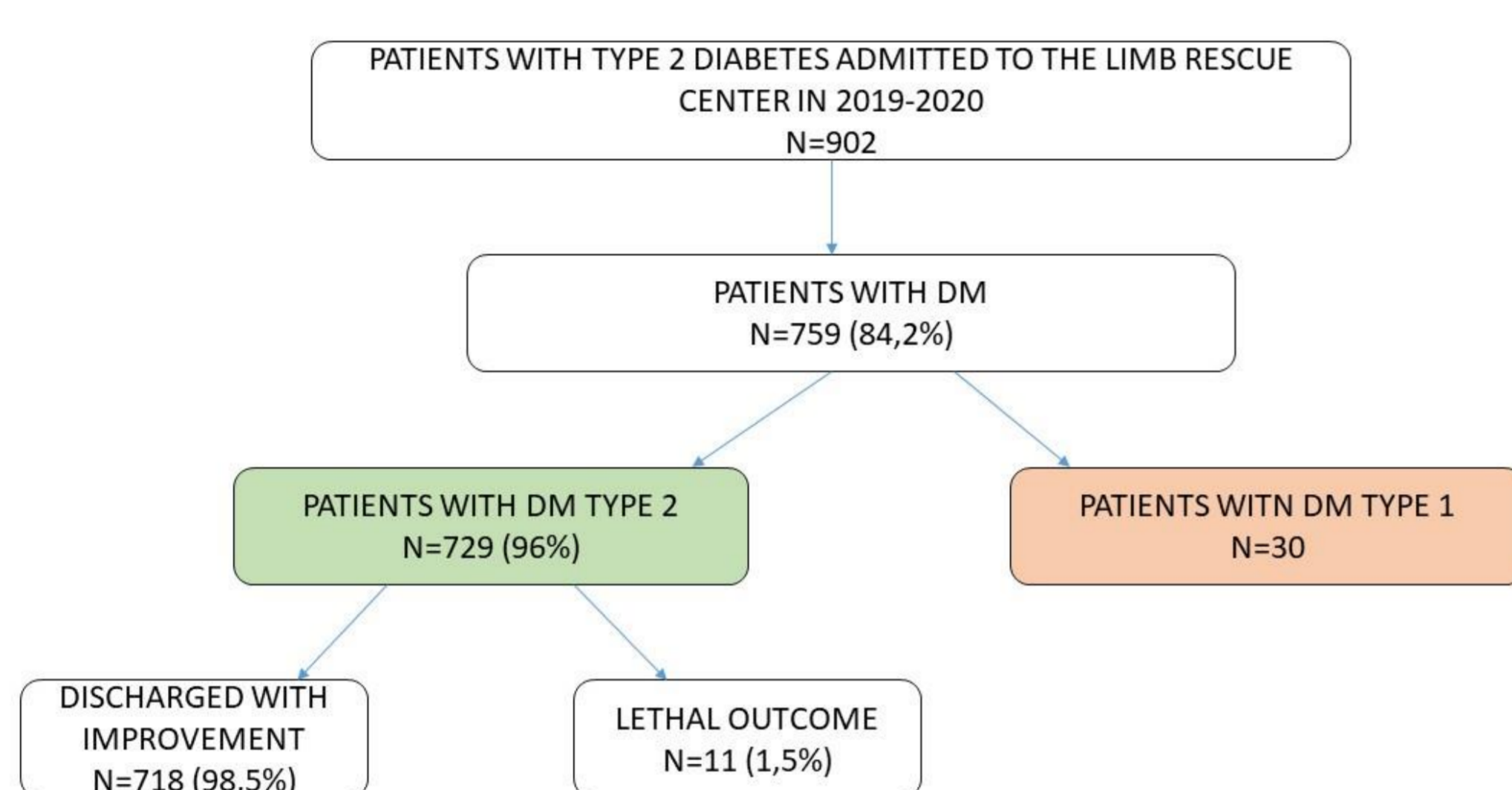
INTRODUCTION

The lesion of the lower extremities (LE) in diabetes mellitus (DM) is a common cause of amputation, which leads to a significant decrease in the quality of life of patients. The frequency of amputations in patients with DM is characterized by high variability and ranges from 46.1 to 9600 per 10 thousand patients, while the indicators in the general population are much lower: 5.8–31 per 100 thousand people [1]. Despite the wide range of modern methods of treating diabetes, a large number of amputations and its progressive growth in these patients is an urgent problem.

MATERIAL AND METHOD

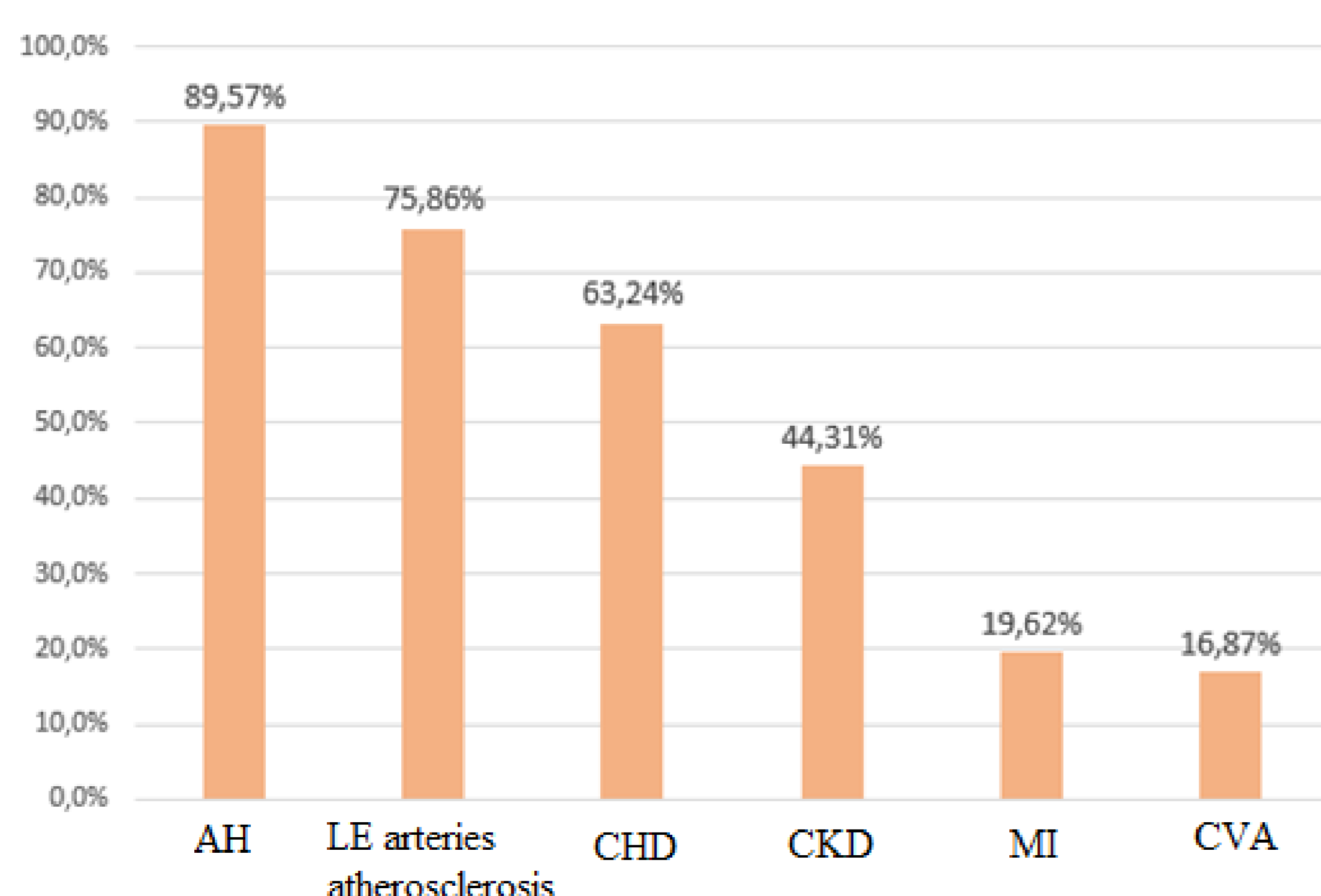
A retrospective analysis of 729 case histories of patients with DM2 hospitalized in the LRC of the State Clinical Hospital named after V.P. Demikhov (Moscow) in the period from 2019 to 2020 was carried out.

Study design



RESULTS

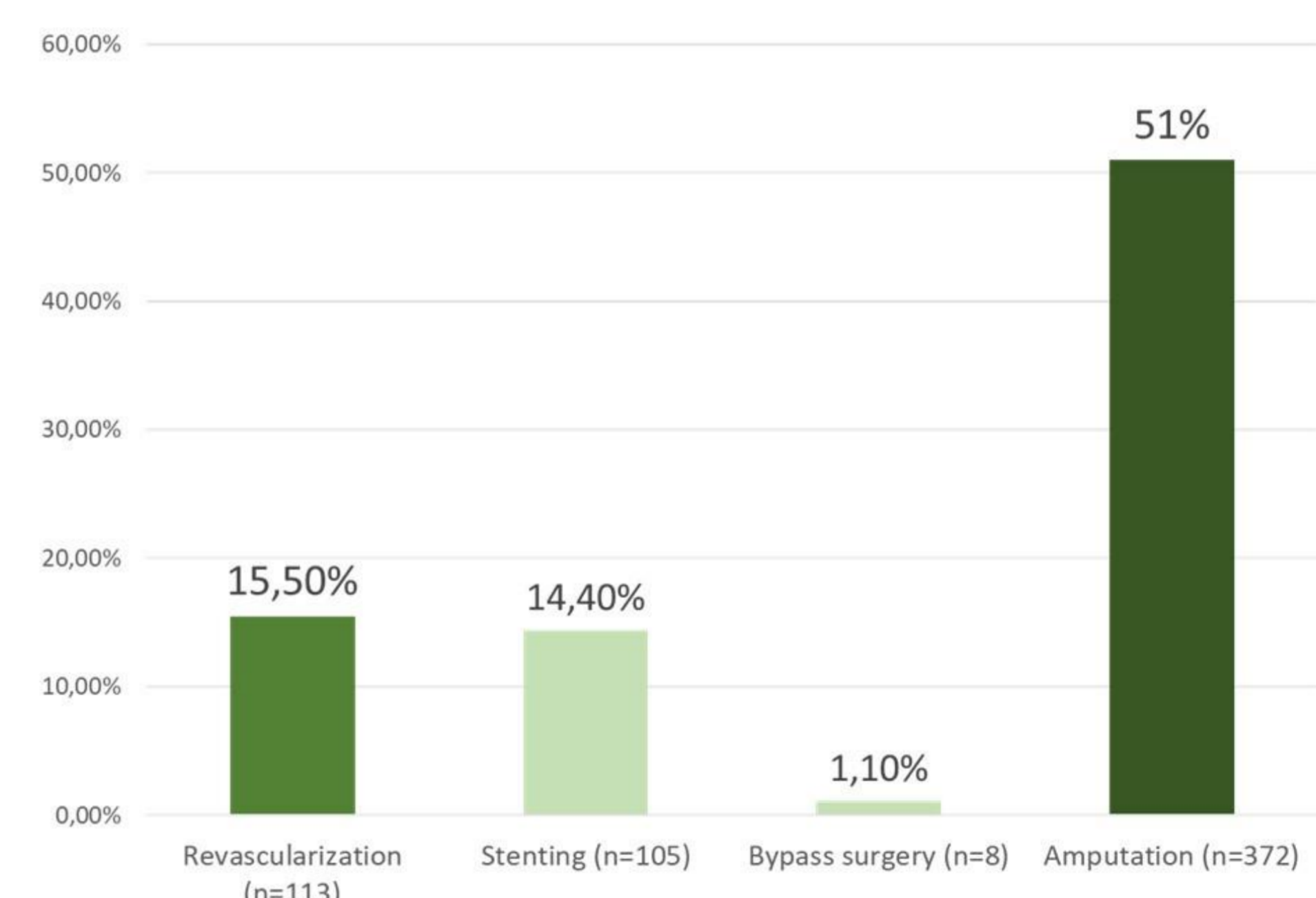
A total of 729 patients were included in the study. Median age is 66.0 years [59.0; 73.0]. Patients older than 60 years – 68.86% (n=502), younger than 60 years – 31.14% (n=227). 50.89% (n=371) of patients have more than 10 years of DM2 experience. The most common concomitant pathology was arterial hypertension (AH) – 89.57% (n=653). 75.86% had LE atherosclerosis. 63.24% (n=461) of patients had coronary heart disease (CHD), of which 19.62% (n=143) had a history of myocardial infarction. 16.87% (n=123) had acute cerebrovascular accident (CVA), 44.31% (n=323) had chronic kidney disease (CKD).



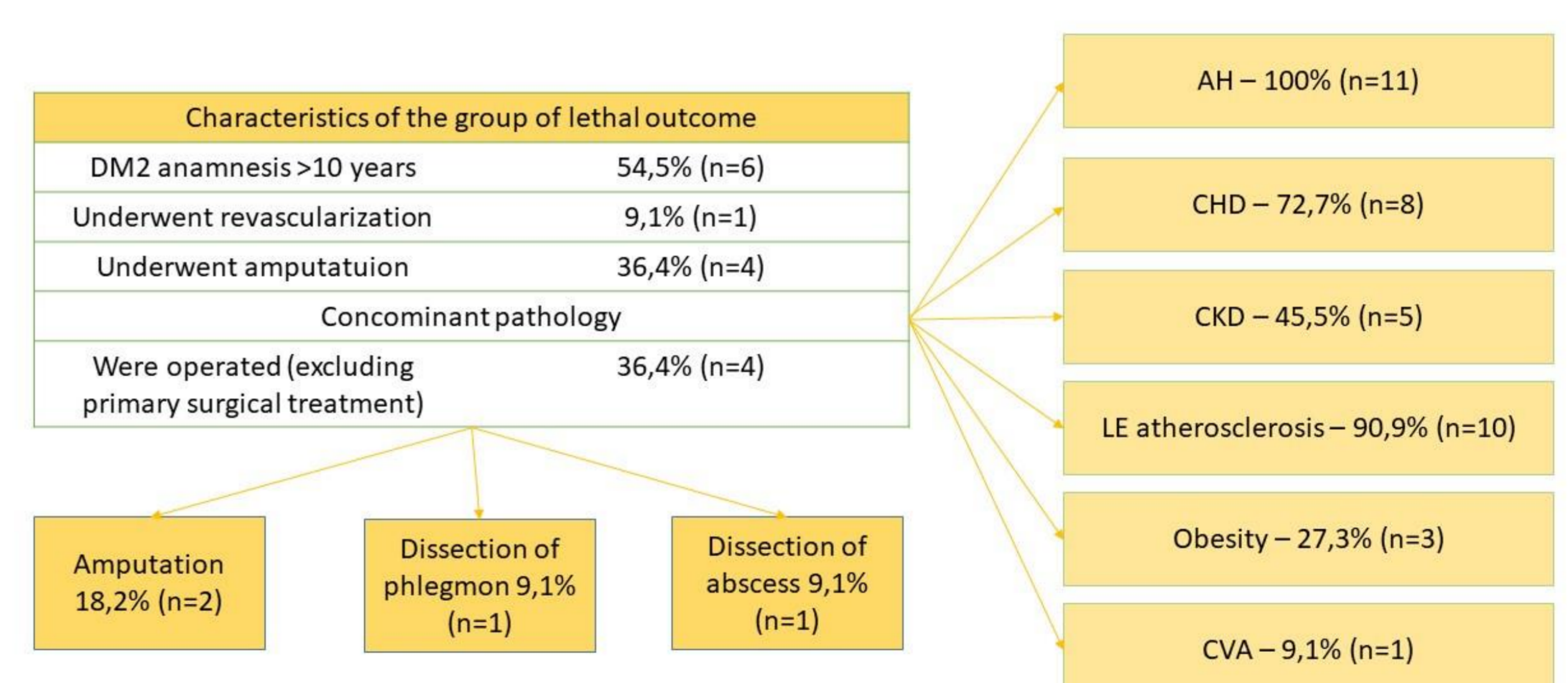
Among the patients 27% (n=197) had a history of diabetic foot syndrome (DFS), of which 84.7% (n=167) had lower limb amputation.

Upon admission 27.2% (n=199) had obliterating atherosclerosis of the LE arteries, of which 66% (n=133) had critical LE ischemia. Gangrene occurred in 26% of patients with DFS (n=244), ulcer in 34.5% (n=183), phlegmon in 23.9% (n=127), abscess in 9.05% (n=48), osteomyelitis occurred in 11.8 (n=63) patients of this group.

In the department, 15.5% (n=113) patients underwent revascularization, 14.4% (n=105) – stenting, 1.1% (n=8) – bypass surgery. LE amputation was performed in 51% of patients (n=372), of which 9.95% (n=37) – high amputation, 90.05% (n=335) – low amputation. Among patients with DFS only 33.5% (n=244) received local treatment, and 7.2% of patients received antibacterial therapy (n=53).



98.5% (n=718) of patients were discharged with improvement, mortality was the outcome of hospitalization in 1.5% of cases (n=11).



CONCLUSION

The majority of LRC patients with DM2 hospitalized in 2019-2020 were over 60 years old and had atherosclerotic cardiovascular diseases. The outcome of 51% (n=372) hospitalizations was LE amputation, which requires a more thorough approach to the prevention and timely diagnosis of LE lesions in patients with DM.

REFERENCES

1. Shestakova M.V., Vikulova O.K., Zheleznyakova A.V., et al. Diabetes epidemiology in Russia: what has changed over the decade? Therapeutic Archive. 2019; 91 (10): 4–13. DOI: 10.26442/00403660.2019.10.000364