

Questions raised for telemedical monitoring of diabetic foot ulcers

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(HealthDay)—Telemedicine monitoring is not associated with any significant difference in amputation or healing, but may be linked to increased mortality for patients with diabetic foot ulcers, according to a study published online June 26 in *Diabetes Care*.

Benjamin S.B. Rasmussen, from the Odense University Hospital in Denmark, and colleagues compared telemedicine and standard outpatient monitoring in the care of patients with diabetic [foot ulcers](#). One hundred ninety-three patients were randomly allocated to telemedical monitoring, which consisted of two consultations in the patient's home and one in the outpatient clinic; 181 patients were randomized to standardized care, which included three outpatient clinic visits.

The researchers observed no difference with respect to wound healing (hazard ratio [HR], 1.11; 95 percent confidence interval [CI], 0.87 to

1.42; $P = 0.42$) or amputation (HR, 0.87; 95 percent CI, 0.54 to 1.42; $P = 0.59$) for individuals monitored through telemedicine or standard care. The incidence of mortality was higher in the telemedicine versus the standard care group (HR, 8.98; 95 percent CI, 6.93 to 10.88; $P = 0.0001$).

"The findings of no [significant difference](#) regarding amputation and healing seem promising; however, for telemedical monitoring, a higher mortality throws into question the role of [telemedicine](#) in monitoring [diabetic foot ulcers](#)," the authors write.

More information: [Abstract](#)
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