

Decline in nontraumatic lower-extremity amputation slowing

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(HealthDay)—Decreases in nontraumatic lower-extremity amputation

(NLEA) have plateaued in recent years among adults with end-stage renal disease (ESRD) and diabetes, according to a study published online May 29 in *Diabetes Care*.

Jessica L. Harding, Ph.D., from the U.S. Centers for Disease Control and Prevention in Atlanta, and colleagues estimated annual rates of NLEA hospitalizations during 2000 to 2015 among adults with ESRD from the U.S. Renal Data System. NLEA rates were adjusted for age, sex, and race and were stratified by diabetes status, age, sex, race, and amputation level.

The researchers found that NLEA rates decreased 43.8 percent between 2000 and 2013 among adults with diabetes (from 7.5 to 4.2 per 100 person-years; annual percent change [APC], –4.9 percent) and then stabilized. Between 2000 and 2013, the rates of total NLEAs decreased 25.5 percent among [adults](#) without diabetes (from 1.6 to 1.1; APC, –3.0 percent) and stabilized thereafter. A slowing or stagnation in declines of minor NLEAs (toe and foot) in more recent years appeared to drive these trends, while the decline continued for major NLEAs (above the knee).

"This analysis documents a discouraging stall in progress in NLEA trends in recent years in a high-risk population with both ESRD and diabetes," the authors write. "Continued efforts to improve access to and uptake of preventive foot care, improve diabetes self-management, and promote education might be a priority for ESRD patients, particularly among those with [diabetes](#)."

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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