

More diabetic foot amputations seen during COVID-19 lockdown

30 July 2020



of patients reporting a previous history of DFU. In the 2020 group versus the 2019 group, there was a significantly higher prevalence of gangrene (64 versus 29 percent) and a higher proportion of patients requiring amputation (60 versus 18 percent). For the 2020 group, the relative risk for amputation was 3.26 versus the 2019 group, and this number dropped to 2.50 when adjusting for sex.

"The higher risk of amputation observed during COVID-19 lockdown confirms the need for proper and timely management of DFU patients to prevent dramatic outcomes responsible for a reduction of quality of life and increased morbidity and mortality," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

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

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(HealthDay)—Patients with diabetes admitted to a tertiary care center for diabetic foot ulceration (DFU) during the COVID-19 lockdown in Italy had a more than threefold risk for amputation versus patients seen in 2019, according to a study published online July 23 in *Diabetes Care*.

Paola Caruso, from the University of Campania in Italy, and colleagues evaluated clinical features and [amputation](#) risk among individuals with [diabetes](#) and DFU admitted to a tertiary care center during the COVID-19 [lockdown](#) (March 9, 2020, to May 18, 2020; 63 patients) and compared findings with a population admitted in the first five months of 2019 (38 patients).

The researchers observed no significant differences in clinical and biochemical measures, except for [urinary albumin](#)-to-creatinine ratio, which was significantly higher in the 2020 group. There were no differences seen in ulcer duration; prevalence rate of peripheral artery disease, neuropathy, and osteomyelitis; or the percentage

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