Objective.--Evaluation of the rate of healing of chronic and deep diabetic foot ulcers (DFU) by a windowed fiber glass cast (WFC) without opening the cast until healing.

Methods.--A prospective non-randomised study of 177 diabetic foot ulcers treated by a non-amovible windowed fiber glass cast. Patients were followed until complete healing.

Results.--Duration of the ulcers: 604 ± 808 days (64% more than 6 months). Average surface was 4.6 ± 6.5 mm² and depth: 10.4 ± 10.8 mm. The time of wearing of the WFC was 92.7 days ± 90.1. The healing rate was 83.6%. The duration of treatment by WFC was 96 days. Twenty-nine patients did not heal (16.4%). The inclusion of 21 patients with moderate peripheral vascular disease (12%) and 24 patients after osteotomy (14%) did not modify significantly the healing rate: respectively of 81% (P = 0.970) and 70.8% (P = 0.128). Complications: 26 changed WFC, 14 ulcers with moderate infection. The amputation rate of toes was 2% without major amputation and phlebothrombosis. Treatment of of DFU (even chronic and deep) by a WFC without opening the cast gives an excellent healing rate.

Conclusion.--The importance of off-loading the treatment of DFU is well confirmed by this study.

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Posters

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Diabetic foot: Clinical profile and prevalence of amputations

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Method.--Study of clinical and developmental profile of 77 diabetic patients admitted for diabetic foot during the year 2012. Descriptive cross-sectional survey.

Result.--The distribution by sex: F: 32% H: 68%. Mean age 62.6 years (± 11.3). Duration of diabetes: mean 12.9 years (± 8.9). Diabetes Type 2: 97%. Mean BMI: 24 (± 4.1). Balance Diabetes: average HbA1c 9.2 (± 2). Length of stay: average 37 days. Lesions were due to inappropriate footwear in 22% of cases and in 13% of fungal case. The types of lesions were dominated by gangrene (59%), followed by abscesses (19%) and ulceration (9%). There was a healing response to care in 38% of patients. 62% underwent amputation level amputations toes: 33%, legs 33%, metatarsal: 23%, thighs 11%.

Discussion.--The diabetic foot affects men. Most patients were unbalanced. Overweight had no impact on the appearance of lesions. The foot lesion revealed diabetes in 12% of cases. The diabetic foot requires a multidisciplinary approach and strengthening prevention through education of diabetic patients.

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