

Diabetic Foot Ulcers and Vascular Insufficiency: Our Population Has Changed, but Our Methods Have Not

David G. Armstrong, D.P.M., M.D., Ph.D.,¹ Kelman Cohen, M.D.,² Stephane Courric, Ph.D.,³
Manish Bharara, Ph.D.,¹ and William Marston, M.D.⁴

Abstract

Diabetic foot complications are increasing in prevalence worldwide. Care and attention to these complications have improved greatly. Many advanced therapies are now being investigated or taken through final stages of clinical studies worldwide. However, the data upon which assumptions regarding morbidity, healing, and mortality have been based are grossly outdated. The purpose of this brief article is to report on current data regarding neuropathic and neuroischemic wounds and to propose that the latter category of advanced-stage diabetic foot wound may now be emerging as the most commonly encountered lesion in the developed world. Unfortunately, it is still systematically excluded from most clinical study criteria. Additionally, just as in the care of cancer, we call for therapy of these advanced-stage diabetic foot ulcers to be managed in similarly interdisciplinary centers where patients may have access to potentially beneficial clinical trials.

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Author Affiliations: ¹Southern Arizona Limb Salvage Alliance (SALSA), University of Arizona College of Medicine, Tucson, Arizona; ²Division of Plastic Surgery, Virginia Commonwealth University, Richmond, Virginia; ³Chemofrance, Sevres, France; and ⁴Division of Vascular Surgery, Department of Surgery, University of North Carolina School of Medicine, Chapel Hill, North Carolina

Abbreviations: (CI) confidence interval, (DFU) diabetic foot ulcer, (LEA) lower-extremity amputation, (PAD) peripheral arterial disease

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Corresponding Author: David G. Armstrong, D.P.M., M.D., Ph.D., Southern Arizona Limb Salvage Alliance (SALSA), 1501 N. Campbell Ave., Room 4318, University of Arizona, College of Medicine, Tucson, AZ 85724; email address Armstrong@usa.net