



# THE EFFECT OF COMPENSATION OF DIABETES ON ULCER HEALING IN PATIENTS WITH DIABETIC FOOT SYNDROME

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## INTRODUCTION

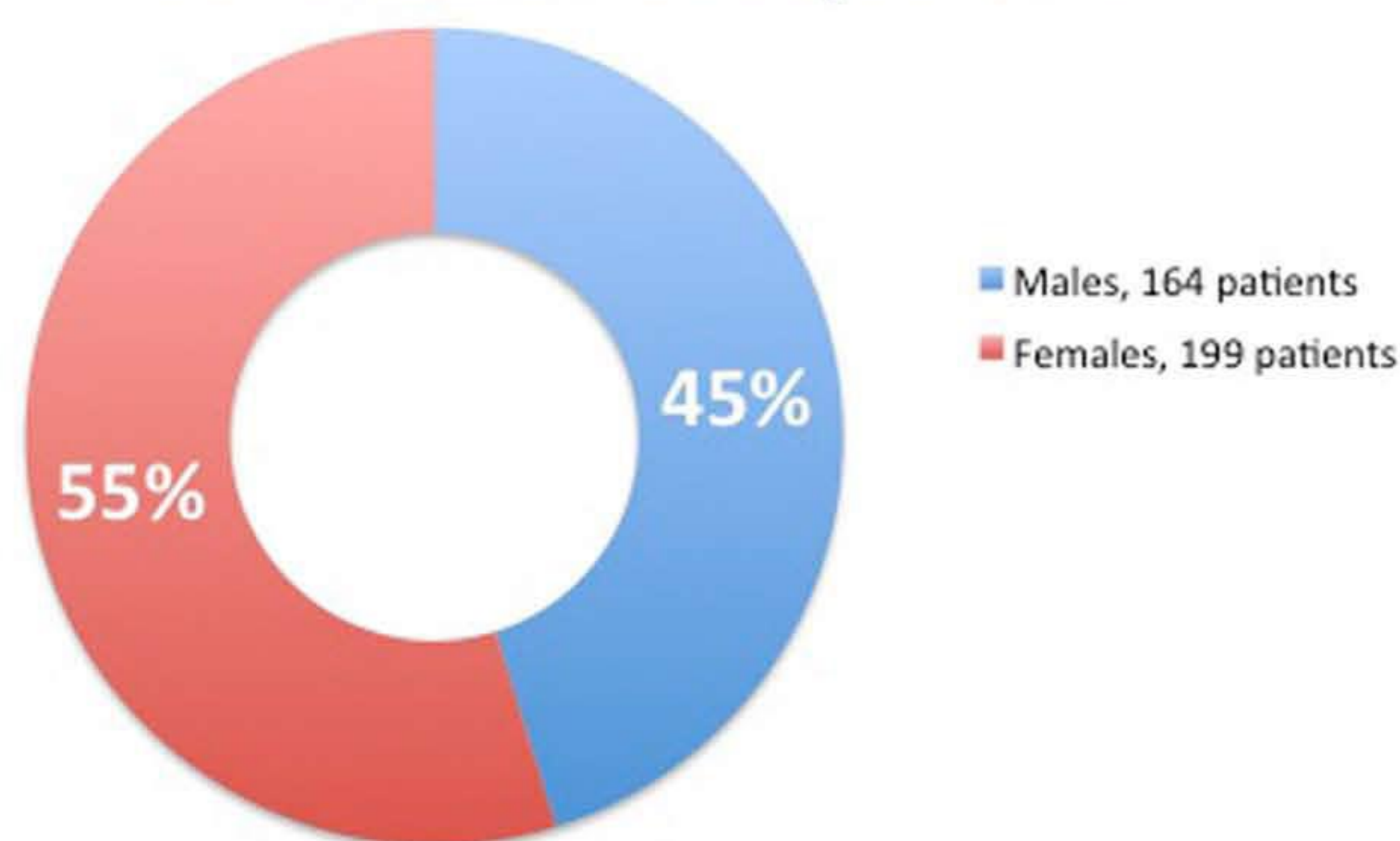
DIABETIC FOOT SYNDROME IS A COMMON SURGICAL PATHOLOGY. IT IS THE MAIN CAUSE OF LOWER LIMB AMPUTATIONS, WHICH CAN BE AVOIDED IN 85% OF CASES BY ACTIVE DETECTION AND LONG-TERM COMPENSATION OF T2DM, TIMELY DIAGNOSTICS OF PERIPHERAL NEUROPATHY.

## PURPOSE

TO STUDY RELATION BETWEEN COMPENSATION OF DIABETES (BY HbA1c) AND TIME NEEDED FOR HEALING OF ULCERS AND PURULENT PROCESSES IN PATIENTS WITH NEUROISCHEMIC FORMS OF DIABETIC FOOT.

## RESULTS

Our research involved 363 patients with diabetic foot syndrome



THE RESULTS OF TREATMENT OF 363 PATIENTS WERE WORKED OUT: 164 MALES (45%) AND 199 FEMALES (55%), THE AVERAGE AGE OF MEN  $65 \pm 0.20$  YEARS, WOMEN -  $70 \pm 0.22$  YEARS ( $P < 0.001$ ). BY ADMISSION, PATIENTS HAD BEEN TREATED BY ORAL HYPOGLYCEMIC MEDICINES IN COMBINATIONS OF UP TO THREE DRUGS AT THE TIME WITH MAXIMUM PERMISSIBLE DOSES. IN HOSPITAL ALL SUBJECTS WERE TREATED WITH INSULIN. THE MOST COMMON SURGERY WAS OPENING OF ABSCESSES AND PHLEGMONS IN 40% OF MALES AND 60% OF FEMALES. AMPUTATIONS OF LOWER LIMBS AND PHALANGES WERE PERFORMED IN 40% OF MEN (OVER 66 YEARS) AND 20% OF WOMEN (OVER 70 YEARS). IN TERMS OF POST-PRANDIAL GLYCEMIA, COMPENSATION OF DIABETES WAS ACHIEVED IN 22% OF MALES AND 32% OF FEMALES, STAY PERIOD IN HOSPITAL OF WHOM WAS THE LOWEST.

### Duration of Treatment of Neuroischemic Forms of Diabetic Foot

#### According to HbA1c level

HbA1c levels	Gender	Males	Females
HbA1c level $15.5 \pm 1.0\%$		$34.66 \pm 0.40$ days	$31.42 \pm 1.18$ days
HbA1c level $12.6 \pm 1.2\%$		$16.60 \pm 0.26$ days	$18.95 \pm 0.51$ days



## CONCLUSIONS

1. WITH HbA1c  $15.5 \pm 1.0\%$ , DURATION OF TREATMENT OF NEUROISCHEMIC FORMS OF DIABETIC FOOT LASTED  $34.66 \pm 0.40$  DAYS FOR MALES AND  $31.42 \pm 1.18$  DAYS FOR FEMALES, WHILE WITH HbA1c  $12.6 \pm 1.2\%$  IT LASTED  $16.60 \pm 0.26$  AND  $18.95 \pm 0.51$  DAYS RESPECTIVELY.
2. FASTING GLYCEMIA UP TO 6 MMOL/L AND POST-PRANDIAL GLYCEMIA UP TO 10 MMOL/L ARE THE BEST VALUES FOR ENHANCING REPARATIVE PROCESSES IN PATIENTS AND SHORTENING THEIR HOSPITAL STAY.
3. AMONG PATIENTS WITH UNCOMPENSATED DIABETES, NUMBER OF LIMB AMPUTATIONS IS SO HIGH THAT THIS SHOULD MOTIVATE PATIENTS FOR CONDUCTING ADEQUATE TREATMENT AND SELF-CONTROL OF DIABETES.

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