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## Research Summary

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**Title** 10 Years of amputations In Santo Should The First Cut Be The Deepest?

### Abstract

#### Background

Surgery for diabetic foot sepsis is a substantial burden on the acute surgical workload. There is always a struggle in diabetic foot sepsis to preserve function but achieve adequate debridement to cure the sepsis and avoid multiple operations. This study aimed to determine how this could be improved.

#### Methods

The theatre log book was used to identify all people who had had amputations of the lower limbs/toes in last 10 years from June 2011 to May 2021. This records name, age, date, time, amputation site, and reason for amputation. An amputation was judged as a success if the patient did not return for a further amputation for the same problem within 6 months. Data was recorded in an Excel spreadsheet and this was used for analysis.

#### Results

290 amputations in 218 patients were performed. The median age was 56 (6-92) (Men 55.5% Women 44.5%). 96% of amputations were for diabetic sepsis. In 218 patients, 161 had just one operation, 44 had 2 operations, 11 had 3 operations and 2 had 4 operations. 26% of patients had multiple operations. First up Toe and Forefoot amputations were only successful 66% of the time. In rescue operations further toe or forefoot amputations were only successful 50% time the other 50% needing additional surgery. There was no significant increase in patients requiring surgery over time. First up successful operations improved from 70% to 80% over this decade

#### Discussion

These findings imply more aggressive surgery should be considered first time particularly with toe amputations. This information can help guide patients and surgeons in decision making.