

A Comprehensive Overview of the Multidisciplinary Approach to Diabetic Limb Salvage

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INTRODUCTION

Diabetes mellitus is a non-communicable disease with multisystemic complications and has expanded in epidemic proportions. These complications include cardiovascular disease, renal failure, retinopathy, neuropathy, vasculopathy, limb complications, and death. The most serious morbidity caused by complications involving multiple organ systems is lower extremity loss, with its attendant burden on quality of life (QoL) and economic complications. Cardiovascular disease is a leading cause of mortality in diabetic patients, which also opens channels for other comorbidities. There is an estimated loss of 2,500 limbs per day or one limb loss every 30 seconds due to diabetes with additional deterioration of mental well-being, social isolation, and worsening physical health of amputees.

NEED FOR A MULTIDISCIPLINARY TEAM

A multidisciplinary team comprising orthopedic surgery, interventional radiology, plastic surgery, podiatry, physiotherapy, nutritionist, vascular surgery, and wound care specialist addresses each of the related system complications. The two terms interdisciplinary team and multidisciplinary are used interchangeably despite being different concepts. An interdisciplinary team works on the integration of knowledge to synthesize and combine knowledge across disciplines to attain a holistic approach. A multidisciplinary team functions rather independently as it draws knowledge from various domains of individual disciplines without significant overlap.

Historical references suggest that in 1951, Leland Sterling Mckittrick a general surgeon teamed up with other general surgeons and vascular surgeons