

Multidisciplinary Approach to Scheduling Surgery for Diabetic Foot

Xuying Xu*

*Department of Chinese Medicine Surgery, Beijing Hospital of Traditional Chinese Medicine, Affiliated to the Capital Medical University, No.23, Back Road of the Art Gallery, Dongcheng District, Beijing, 100010, China.

Received May 15, 2019; Accepted June 06, 2019; Published September 08, 2019

The treatment of diabetic foot, especially the diabetic foot of Wagner grade 3 or above, has been accompanied by the destruction of deep tissue structures such as bones, tendons and fascia, plus the degree of ischemia, pathogenic factors, infected bacteria, systemic status, patient education, etc. The interweaving of many factors has caused problems for clinical choices.

It requires the participation of multiple subjects, such as general surgery, orthopedics, vascular intervention, endocrinology, nutrition, cardio-cerebral vascular and even a large number of nursing staff such as psychological, wound repair and intensive education. Time is one-way and these treatments have a sequence of time and overlap, which creates a problem of multidisciplinary collaboration.

This article outlines the collaborative experience in multidisciplinary treatment through a clinically successful medical record.

First of all, for the first treatment of diabetic foot, it should be based on clinical observation, to determine the degree of ischemia of the foot, moderate surgical treatment, that is, to keep the circulation smooth, and to maintain the foot tissue and function to the maximum extent according to the purpose of treatment and at the same time treatment fights for time.

After the above treatment, we won the inspection and inspection time, a more complete understanding of the patient's condition, and create conditions for the next treatment.

Second, if the degree of ischemia can maintain local blood supply, surgical treatment can be performed to fully expose the infection spread of the wound surface and potential physiological cavity, and completely remove the bone tissue such as bone, skin and tendon that cannot heal and necrosis. If local blood supply cannot maintain the survival of the tissue, it requires intravascular treatment, balloon dilation, intra-arterial stents, vascular bypass, etc., to improve the surgical treatment of lower limb blood supply. If the circulation of the lower extremities is increased, it is still

necessary to perform a partial and thorough surgical treatment. Otherwise, amputation treatment is needed to preserve life.

Thirdly, through the above treatment, local blood circulation improvement, infection control and necrotic tissue removal, it is necessary to carry out wound repair treatment and give full play to the unique role of TCM topical drugs in wound repair to promote wound healing. In the process of wound repair, it is important to maintain the function of the foot and calf and exercise according to the specific conditions to maintain limb function and increase the quality of life of the patient.

In short, diabetic foot through multi-disciplinary treatment, remove the impact on the repair of tissue, maintain the ability of local tissue healing, to achieve a basic treatment, related care throughout the process.

Corresponding author: Dr. Xuying Xu, Department of Chinese Medicine Surgery, Beijing Hospital of Traditional Chinese Medicine, Affiliated to the Capital Medical University, No.23, Back Road of the Art Gallery, Dongcheng District, Beijing, 100010, China, E-mail: xxying7341@126.com

Citation: Xu X. (2019) Multidisciplinary Approach to Scheduling Surgery for Diabetic Foot. *Int J Clin Case Stud Rep*, 1(3): 66.

Copyright: ©2019 Xu X. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.