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Long-term follow up of Charcot neuroosteoarthropathy.

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The aim of the study was to evaluate long-term follow up results of treatment patients with diabetic neuro-osteoarthropathy undergone comprehensive multidisciplinary care in time interval since 1994 till 2000 year. The mean duration of follow up interval was 8,4 (6-12) years since first visit to the center.

48 Type 1 and 15 Type 2 patients with clinical and roentgenoloical signs of Charcot foot were included into the study. The neurological examination was performed with NDS evaluation, autonomic functional tests (ADS) and standardized vascular assessment was applied at the time of first visit. Deformity were evaluated with clinical examination and X-ray, skin thermometry was performed for the determination of acuteness and monitoring of the decease.

Special protocol was created and it was send to patients.

On the moment it was revealed that 34 patients (54%) was died: 23 (48%) type 1 and 11(79%) type 2 patients. Causes of mortality listed in the table 1.

Table 1. Causes of mortality patients monitored with Charcot foot

Causes of mortality	DM Type 1	DM Type 2
Diabetic Nephropathy ESRF	56,6 %	9,3 %
MI	8,7 %	54,5 %
Insult	4,3 %	
Foot infection	13,0 %	18,1 %
Sudden death	8,7 %	
Others	-	18,1 %
Unknown	8,7 %	-

The others who were alive were examined with above described methodology. High severity of sensori-motor and in particular autonomic neuropathy disturbances were revealed. Progression of deformities and new Charcot event occurred in 24% of patients. Minor amputation performed in 7% of patients.

In conclusion: The mortality level in long term follow up study of patients with Charcot osteoarthropathy was high in particular with type 2 patients. Severe autonomic neuropathy may influence on high mortality level with both type 1 and type 2 patients.