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Limb salvage in ischemic diabetic foot: long-term outcomes of successful, isolated below-knee endovascular procedures

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Background: It has been shown that concomitant percutaneous transluminal angioplasty (PTA) of over-the-knee (OTK) and below-the-knee (BTK) arteries is highly beneficial for limb salvage in patients with critical limb ischemia (CLI), but no published studies have specifically investigated outcomes in diabetic patients with isolated BTK CLI. The aim of this study was to evaluate the long-term results of successful PTA for limb salvage in such patients. **Materials and methods:** From among the 634 patients with CLI in our database, we retrospectively selected a consecutive series of 93 diabetics (15%) with 100 critically ischemic limbs (30 Rutherford 5 and 70 Rutherford 6) and no critical OTK lesion, who underwent a successful PTA procedure on isolated BTK lesions. **Results:** The limb salvage rate was 95% after a mean follow-up of 1048 ± 525 days (2.9 ± 1.4 years). Transcutaneous oxygen tension significantly increased after one month (18.1 ± 11.2 vs 39.6 ± 15.1 ; $p < 0.05$). Target vessel restenosis occurred in 42% of the non-amputated limbs. Five patients (5%) died because of medical conditions unrelated to PTA. One patient underwent repeat PTA for recurrent CLI. **Conclusions:** Successful endovascular procedures save a very high percentage of limbs at follow-up in a highly selected patient population with ischemic diabetic foot and isolated BTK lesions.