Avoiding amputation in diabetics

Diabetes often affects blood vessels below the knee joint which can lead to pain in the leg and ulcers that do not heal. Treatment would mean reestablishing blood flow, possible through angioplasty.

DIABETES IS a common problem among Indians and the number of cases run into several million. Most patients develop infection or ulcers in the foot that do not heal and eventually lead to amputation.

Diabetes affects all systems in the body. The blood vessels also change eventually leading to narrowing or blocks. Thus when the vessel supplying blood to a particular area is blocked or becomes narrow, the area shows changes relating to lack of blood and nutrition.

The earliest symptom of disease in the blood vessels in the limb is pain which occurs when walking. This pain is relieved when one takes rest for a while. This is the best time to investigate. The lesion at this point can often be treated by opening the block (angioplasty) or by by-passing the block (by-pass surgery).

When left untreated or if treated by medicines alone, the disease continues to progress further and the patient develops pain in the leg at all times. This is termed as rest pain and it is important investigations are carried out lest the disease progresses to a stage where angioplasty or surgery cannot be performed and the leg may have to be amputated.

Another problem patients face is ulcers that do not heal. This is termed as "non- healing ulcers". This occurs when there is not enough blood during the healing process after any injury. No medicine can be as effective as re-establishing blood supply to the affected area. Therefore, it is essential that attempts should be made to open the vessels that supply blood to the region, lest the leg is lost.

The common vessels which are affected in diabetes are below the knee joint. Until recently there was no way we could treat these vessels effectively. Today thanks to research and development, we can

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effectively open these small vessels leading to healing of the ulcers and control of pain. This is indeed a great boon to diabetics since a large percentage of these patients would otherwise have had no other option but amputation.

Unfortunately even today, people do not get the right treatment. Treating decreased blood flow to the leg with medicines should not be the first option but the last when there is nothing better to offer. The right combination is to re-establish blood flow and then treat with medicines to control the infection and further spread of the disease.

Angioplasty is a technique of opening a block in the blood vessel with a special balloon which is inserted into the blood vessel by a small puncture in the skin. The procedure is performed under local anesthesia and often does not require more than a day's stay in the hospital.

Angioplasty can be performed only if the vessel above and below the block is more or less normal, in other words angioplasty aims to connect two normal segments. Thus delay in treatment can result in extensive disease which cannot be cured.

Take the example of this 74-year-old diabetic businessmen. He had pain in the leg and finally developed an ulcer. The doctor he visited had heard about angioplasty of the vessels below the knee. An angiogram was done, the block located and the patient treated. Today the ulcer that showed no signs of healing is slowly but surely healing, the patient was saved an amputation and is back to normal work.

On the other hand we often see patients on whom medicines have been tried for months to years and finally by the time we get to see them, the vessels are damaged beyond repair. "A stitch in time does save nine".

Diabetes often affects blood vessels below the knee joint and this can lead to pain in the leg and ulcers that do not heal. Medicines rarely help. Effective treatment would mean reestablishing blood flow to the leg. Today, thanks to modern technology, these small vessels can be successfully opened by angioplasty. Without this, amputation would be the only recourse. ■

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