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"Demographics of Lower Extremity Limb Loss at University Medical Center-New Orleans"

Introduction: Non-traumatic limb amputations are a pressing public health issue, with over 150,000 cases annually in the United States, most often linked to diabetes and peripheral artery disease (PAD). Descriptive statistics show that up to 20% of patients with diabetic foot ulcers progress to amputation, with recurrence rates reaching 65% within five years. Mortality following amputations due to PAD exceeds that of many cancers, underscoring the severity of these outcomes. The burden is unevenly distributed, with African American, Hispanic, and American Indian populations experiencing disproportionately higher rates, and African Americans facing a two- to four-fold greater risk compared to White populations. The purpose of this research is to describe the patient demographics and comorbidities associated with lower extremity limb loss in LSUHSC population.

Methods: This retrospective cohort study includes patients treated at University Medical Center-New Orleans who underwent lower extremity amputation. Manual chart abstraction collected data including demographics and health diagnoses. Descriptive statistics were used to describe the medical conditions and distribution of demographics associated with limb loss.

Results: Preliminary data collected on 34 subjects indicated patients in our cohort has an average age of 50 ± 14 years ranging from 24 to 65 years. Patients with limb loss documented to be attributed to comorbid disease were average age 55 ± 9 years old. Twenty-eight (82%) were male. A majority of subjects were African American (24/34, 71%) and remaining subjects were White (10/34, 29%). Our population had a high burden of chronic disease including 53% with peripheral vascular disease, 44% with diabetes, and 47% with chronic kidney disease.

Conclusion: Our patient population is a relatively young population with a high burden of comorbid disease. The typical published average age for diabetes related limb loss is > 60 years of age. These preliminary findings suggest that our chronic medical patients who experience limb loss may be younger than previously published, potentiating the local impact on the work force and quality years of life.