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

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Introduction

- Non-traumatic limb amputations affect over 150,000 people annually in the U.S., most often due to diabetes and peripheral artery disease (PAD).
- Up to 20% of diabetic foot ulcer patients progress to amputation, with 65% recurrence within five years and mortality exceeding that of many cancers.
- The burden is disproportionately higher among African American, Hispanic, and American Indian populations, with African Americans facing a 2–4× greater risk than White populations.

Objective and Significance

• To describe the patient demographics and comorbidities associated with lower extremity limb loss in the LSUHSC population, providing insight into disparities and opportunities for targeted prevention.

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, and 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 an average age of 50 ± 14 years (range: 24–65 years)
- Patients with limb loss attributed to comorbid disease had an average age of 55 ± 9 years
- Among subjects with limb loss not due to a medical comorbidity (e.g., trauma), 31% still had at least one comorbid condition. Overall, the population demonstrated a high burden of chronic disease, with 53% having peripheral vascular disease, 44% diabetes, and 47% chronic kidney disease
- For subjects with limb loss attributed to a medical comorbidity, 55% had all three conditions (diabetes, peripheral vascular disease, and renal disease), 42% had two comorbidities, and only one patient had peripheral vascular disease alone

INSURANCE

Private = Federal Insurance

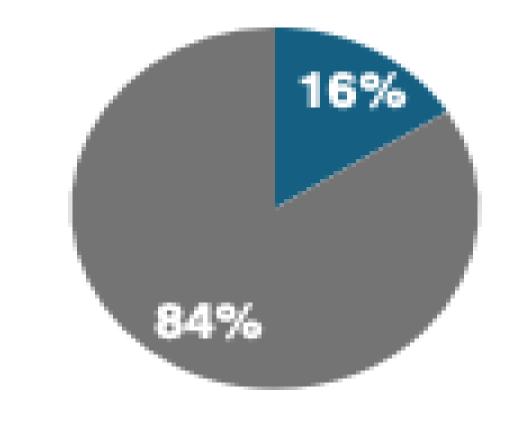
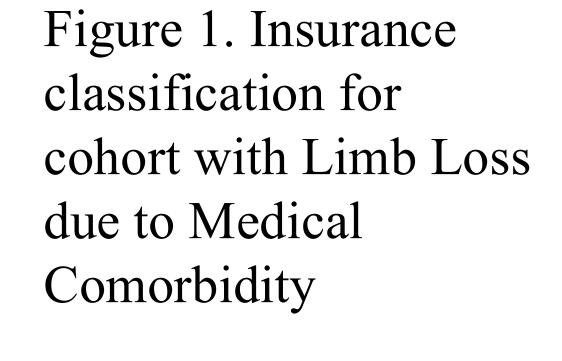
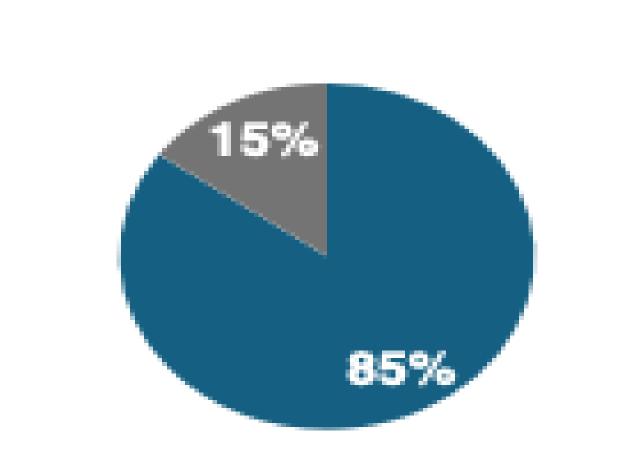


Figure 2. Race for cohort with Limb
Loss due to Medical
Comorbidity



RACE

African American White



Discussion and Limitations

- The younger average age of limb loss suggests earlier onset or poorer control of chronic diseases such as diabetes and peripheral vascular disease in this population.
- A high burden of comorbidities highlights the need for stronger preventive care and earlier intervention to reduce amputation risk.
- These findings are based on preliminary data collection, and results may evolve as additional patient records are reviewed and the dataset expands

Conclusion

- Our patient population is relatively young with a high burden of comorbid disease, whereas the typical published average age for diabetes-related limb loss is over 60 years.
- These preliminary findings suggest that our chronic medical patients who experience limb loss may be younger than previously reported, potentially impacting the local workforce and quality years of life.

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