CLINICAL DIAGNOSIS TESTS VALIDATION IN DIABETIC FOOT OSTEOMYELITIS.

Abstract

The research on clinical trials who have a high predictive value in determining prognosis is to achieve a rapid and safe diagnosis that reduce amputations associated with the diabetic foot osteomyelitis.

Purpose:

To validate the clinical test diagnosis of osteomyelitis in the diabetic foot, versus results histopathologic bone analysis.

Materials and Method:

We had performed a prospective study which includes 181 patients ulcerated who attended in the Diabetic Foot Unit of Complutense University of Madrid during the period April 2006 until April 2007. 53 of these patients (29.2%) were diagnosed with osteomyelitis. The clinical diagnosis was carried out through signs infection, probing-to-bone test (PTB), simple radiology and culture of the ulcer. All patients with presumed diagnosis of osteomyelitis was performed surgical debridement of a whole bone concerned with obtaining a bone sample for biopsy.

Results:

Validation of clinical test was: PTB: sensitivity 95%, specificity 50%, VP + 74%, VP-88%. Simple RX.: sensitivity. 83%, specificity 25%, VP + 62.5%, VP-50%. Culture Ulcer: sensitivity 85%, specificity 13%, VP + 56%, VP-40%. Infection clinical signs: sensitivity 79%, specificity 50%, VP + 70%-61% Value P- 61%

Conclusions: The best clinical diagnostic test was PTB followed by the presence of infection clinical signs.