

## **ABSTRACT;**

**1.Title:** PRIMARY CLOSURE IN DFI.

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**4.Purpose:** By 2025 India will be the capital of Diabetes .The number of Diabetics will be more than half of total number of Diabetics in the World. Out of this 15% to 20 % will be suffering from Foot Complications. IDF states Every 30 second one limb is amputated due to Diabetes. Our present training for post graduation in Surgery don't have any detailed Guidelines or Principles for Diabetic Foot Surgery. We don't have a Podiatry as a Specialty. The number of Diabetic Foot cases is increasing day by day. Luckily India has 85% of Neuropathic Foots. The Spread of infection in these Foots doesn't follow the signs of inflammation described by Celsus.So there is need for proper guidelines for the management of DFI. There is need to plan surgery where in Patient stay at Hospital is minimized & He/She should be not have any burden of dressing the Wound. Poverty compels us to plan economically viable method.It has to give Bio-mechanically viable Foot. Primary Closure has made great impact on DFI in my workup.Patients are very Happy.

**6.Objective:** Hubli City is surrounded by 8 Districts within 250 Kms of radius.The total population of these 8 districts is 2 crore. We are looking at target population that is about 20 lakh population are at risk of Foot complications.The main objective is to salvage these 40 lakh lower limbs. I have been practicing Foot Exploration Surgery since 1995. I have done more than 20,000 foot surgeries & I could achieve salvage in every case.They are followed up regularly since so many years. The methods followed are very simple.The basis of success is Complete Foot Exploration & adequate debridement done to plan for Bio-mechanically viable Foot.Primary closure is planned to minimize the Hospital Stay, Cost,dressing,& healing is within 3 to 4 weeks.Patient is back to his routine work.

**6. Conclusion.** DFI presents in three ways, Mild ,Moderate, Severe. This presentation always starts with mild & due to negligence on part of Patient & Lac of awareness among Medical Fraternity turns to Severe Infection. In my 12 years experience in this field 80% of case are already handled by Surgeons & opined for AKA. All these are salvaged. So to conclude every Diabetic Foot can be SAVED  
**Take home message is NO AMPUTATION FOR DFI..**

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