

Do we have the capacity to predict or even augment the healing in the BKA stump?

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Preserving the knee joint is important in the rehabilitation of a patient undergoing an amputation. Moreover, the below-knee prosthesis is easier to use and requires less energy expenditure to ambulate on than does an above-knee prosthesis. However, if this procedure fails, the patient must be subjected to the inherent risks of a second major surgical procedure in addition to the prolonged hospitalization associated with two major operations.

This study is a retrospective evaluation of BKA and rate of healing from January 2020 till end of December 2020. 31 patients had Below Knee Amputations in the year 2020; 24 males and 7 females. 58% of the sample study was in the age group of 65 – 79 years old, 22.5% of the age group 50 – 64 years old and 19% were aged above 80 years old.

DM, IHD and renal function at the operation time were examined for the patients. Also, arterial scans prior to the BKA to detect the patency of the arterial tree.

Rate of healing was 70.8% for males vs. 57% for females.

10 of the 31 BKA patients had further revision and higher level amputation.

Patent profunda is a basic requirement before BKA but not sufficient alone to guarantee the healing of the stump. Having patent popliteal circulation with sufficient tibial outflow assures good vascularity for the stump. However, one patient with patent arterial tree could not achieve the healing due to fracture calcaneus and extensive leg ulcers caused by untreated venous insufficiency.

21 patients had BKA with no further requirement for revision; 5 had excellent arterial flow prior to the amputation, 2 died in the hospital. The remaining 14 stumps had satisfactory healing despite of the insufficient arterial supply. Anti-platelets and anticoagulants play major roles in such healing.

Biography

Armia Sargious has been trained in the Vascular Surgery since 2008 and could achieve a huge experience in the field of Vascular Surgery. He has also attained a worthy experience in NHS system in the UK since 2019 which enabled him to mix his clinical and managerial practice for better understanding; thus easing the pathway for best final outcomes and patient satisfaction.

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