



Who Needs A Calcaneus Anyway?

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OBJECTIVE: The VA Maryland Health Care System High Risk Foot Clinic sees a wide variety of lower extremity wounds and disease processes, of which osteomyelitis is one. This poster is designed to illustrate that a partial calcaneotomy can be a functional operation when osteomyelitis is present in the heel of a foot with a prior TMA and with a prior BK amputation on the contralateral side.

CASE STUDY: 66 year old male with osteomyelitis of the left heel secondary to a diabetic foot ulceration. PMH: Diabetes Mellitus Type II, Hepatitis B, Hypertension, Chronic Kidney Disease Stage 3, Peripheral Vascular Disease, Anemia, History of a Left Trans-Metatarsal Amputation and a Right Below Knee Amputation. Surgical plans include partial calcaneotomy, and wound vac placement with aggressive and advanced wound care treatments



SURGERY:

The patient was taken to the operating room on 9/25/2005 for a Trans Metatarsal Amputation of the left foot. He returned to the operating room on 5/6/2010 for an incision and drainage and again on 5/13/2010 for further debridement and application of a wound vac. On 7/1/2010 the patient returned to the operating room for a partial calcaneotomy and later returned on 7/29/2010 for an incision and drainage with Integra application. On 8/6/2010 the patient underwent a left common femoral, posterior tibial bypass graft with reversed popliteal greater saphenous vein to relieve critical limb ischemia.



RESULTS: After a partial calcaneotomy and a series of debridements in conjunction with vascular intervention and advanced wound care products, the patients osteomyelitis was eradicated and the amputation site healed.

CONCLUSION: The patient was left with a functional limb and amputation site with the assistance of a patella tendon bearing brace despite having little rearfoot left.



REFERENCES: Banks et al. Mc Glamarys Comprehensive Textbook of Foot &Ankle Surgery. 2001, Zgonis. Surgical Reconstruction of the Diabetic Foot and Ankle 2009, Coughlin et al. Surgery of the Foot and Ankle. 8th ed 2006

None of the authors have any financial interest in any product used during the course of treatment.
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