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Classification of diabetic foot, revisited

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The authors propose a combined classification of diabetic foot syndrome, describing the localization (anatomical division of the foot), pathophysiological stage of the process in the bones, the clinical degree of deformation, the presence and depth of the wound and the infection process. This classification allows to determine the tactics of conducting the patient – the need for and type of surgical intervention, type and time of immobilization and unloading of the limb, indications for additional methods of treatment and to choose the most organoboranes treatment tactics of each patient.

Key words: diabetic foot, classification, algorithm of treatment.

Diabetes mellitus (DM) with a certain allowance can be considered the most dangerous modern “pandemia”. Today in the world more than 415 million people suffer from diabetes; it is predicted that by the year 2035 there will be 592 million diabetics, and by the year 2040 – 642 million; up to 80 % of diabetics are living in the developed countries. 46.5 % people suffering from diabetes have not been diagnosed with it. In Russia in 2010 3,163,387 patients with diabetes have been reported, while in the early 2015 as much as 4,045,564 people. However, the research conducted in 2012 in the regions with the help of a mobile diabetes center, allows us to conclude that the real number of cases was 3-4 times higher than the official statistics, and amounted 9–10 million by the early 2013 and, respectively, 13–14 million by the early 2015. [1–3]

One of the complications of diabetes is diabetic foot syndrome (DFS), the prevalence of which in Russia according to the State Register was in 2014 5.6 % for type 1 diabetes and 2.4 % for type 2 diabetes, i.e., about 108 thousand people (but actually – 300–400 thousand). [3]

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