

Time to Theatre in Patients with Diabetic Foot Infections

Latham J, Lane O, Hughes I, Gonzi G, Tanaka H

Department of Trauma & Orthopaedics, Grange University Hospital, Wales

Background

Diabetic foot infections are surgical emergencies. Delay to surgery increases risks of major amputation, sepsis and death.

Standard

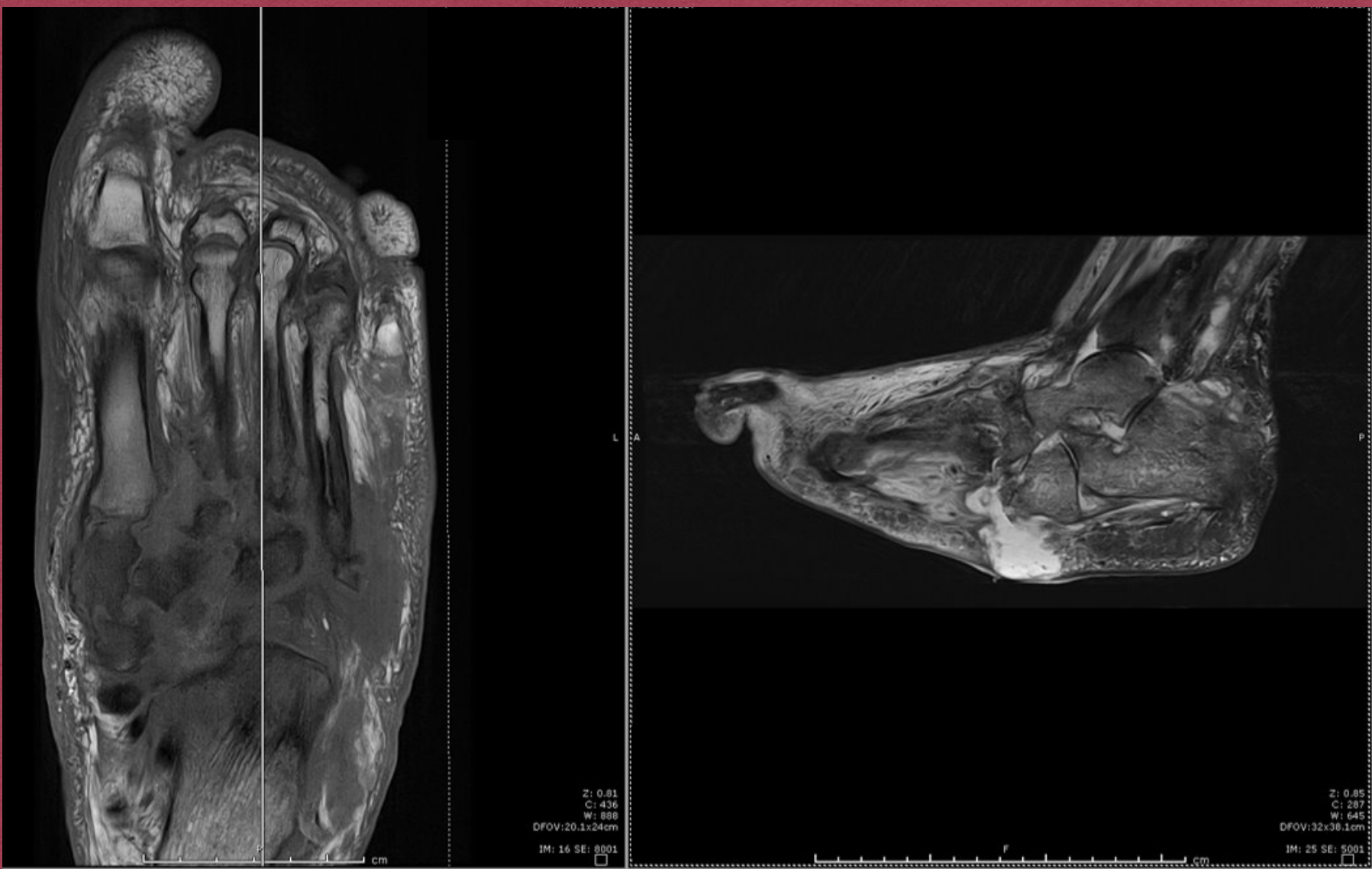
Surgery within 24 hours of presentation for infected diabetic feet requiring intervention (Lavery et al., 2006)

Aim

To assess time from admission to surgical intervention in patients presenting with diabetic foot infections, and compare performance to the <24-hour standard.



Diabetic foot abscess



MRI showing collection



Forefoot amputation

Method

Design: Retrospective audit (March 2024 – March 2025)

Setting: Grange University Hospital (GUH), Wales.

Inclusion: Diabetic foot infections requiring surgical debridement/amputation

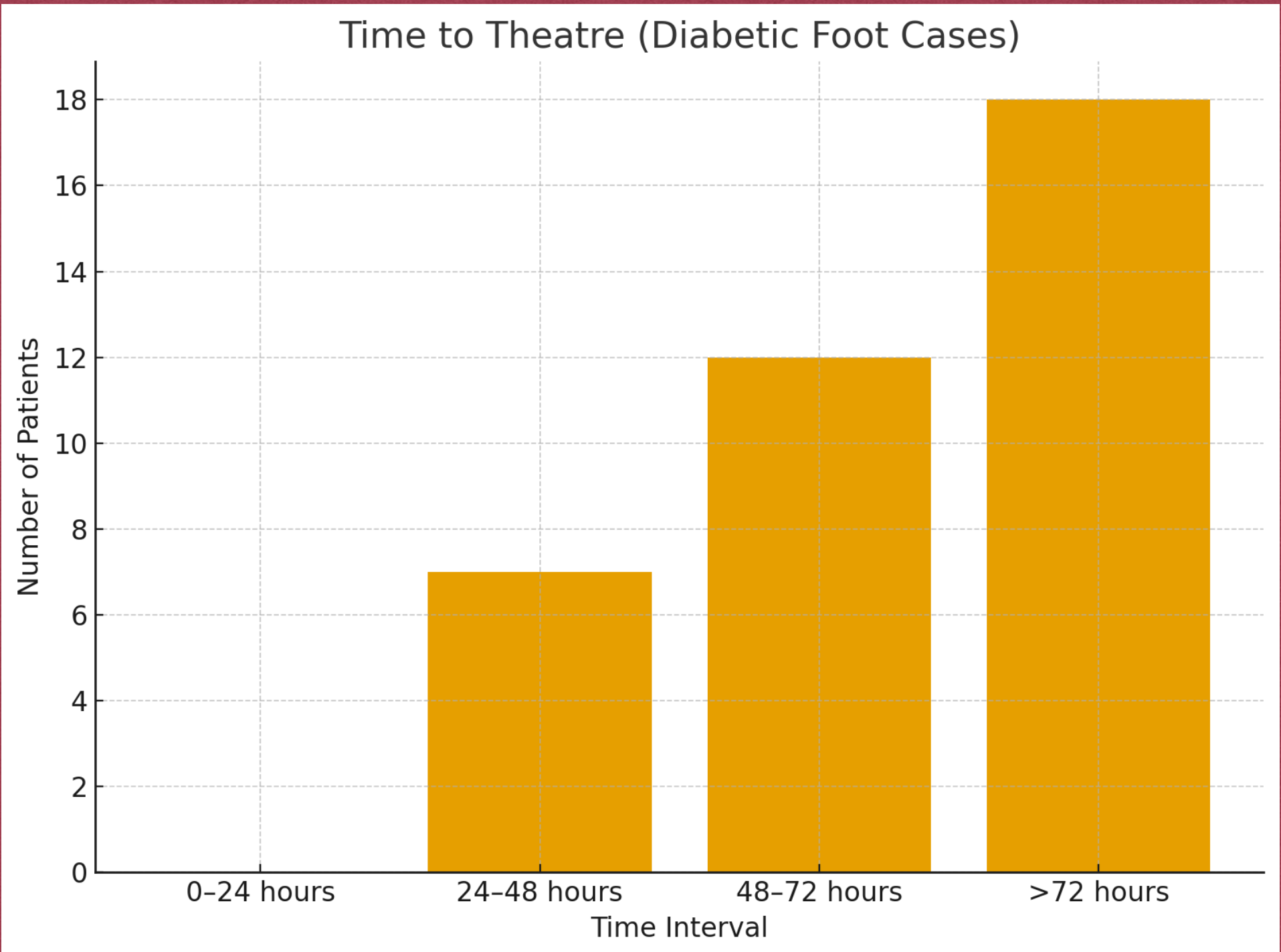
Data collected: Admission time, operation time, type of procedure, documented cause of delay, foot & ankle specialist involved.

Results

- 18 patients
- **0/18 within < 24 hours standard**
- 0/18 documented reason for delay
- 4/18 has specialist foot and ankle involvement.
- Mean time to theatres 66 hours (median; 54, range 25-214 hours)

Conclusion

- **All patients breached** the 24-hour gold standard
- No documentation explaining delays in any case
- Implement diabetic foot attack surgical pathway
- **Ideal pathway:**
 - 1) Diabetic foot attack diagnosis (clinically)
 - 2) MRI urgent if stable
 - 3) Decision for incision/drainage/washout of diabetic foot abscess.



Accumulative time to theatres



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board