



Background and Objectives

- Major lower extremity amputation is a significant life-changing event with long-term implications
- We assessed long-term medical and social determinants of health (SDH) outcomes in patients undergoing major lower extremity amputations

Methods

- Retrospective review
- Major lower extremity (above ankle) amputations performed at Safety-net hospital
- 2018-2022
- Patients had ≥ 6 months follow-up
- All patients completed SDH survey (6 – 15 months postoperatively)
- Patient demographics, comorbidities, perioperative and long-term outcomes were analyzed

Results

- 100 patients had major lower extremity amputations
- Mean age: 61.5 years
- Gender: 23% female
- Race/Ethnicity: 57% Black, 20% White, 21% Hispanic
- **Comorbidities**
 - Diabetes (78%)
 - Chronic kidney disease (51%)
 - Coronary artery disease (31%)
 - Congestive heart failure (23%)
 - Previous cerebrovascular events (19%),
 - Opioid use (37%)
- **Amputations**
 - Guillotine amputation (35%)
 - Definitive BKA (7%)
 - Definitive AKA (33%)
- **Readmissions**
 - 30 days (13%)
 - 90 days (30%)
 - 1-year (43%)
- **At long-term follow-up**
 - 55% lived at home
 - 25% used opioids
 - 25% were independently ambulatory

Results

- 32% had a SDH challenge
- Younger patients more likely to be affected
- **SDH Challenges**
 - Food insecurity (17%)
 - Housing insecurity (13%)
 - Transportation challenges (13%)
 - Seeking employment (8%)
 - Difficulty paying for utilities (5%)
 - Difficulty paying for medications (4%)
 - Seeking further education (5%)
 - Difficulty caring for family/friends (4%)
- **Multivariable Analyses:**
 - SDH challenge independently associated with 1-year readmission (OR 6.7, 95% CI 1.3-35.8, P<.001)
 - Older age associated with lower long-term independent ambulation (OR 0.92, 95% CI 0.85-0.99, P=.025)

Conclusion

- After major lower extremity amputation, patients have significant medical and socioeconomic challenges
- Fewer live at home
- The majority do not ambulate independently
- One third report a socioeconomic challenge
- Improvements in long-term medical, social, and rehabilitation support services are required for this vulnerable population