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Can We Skip the IV? A Single-Center Review of Oral Versus IV Antibiotics for Diabetic Foot Osteomyelitis

Abstract:

Residual osteomyelitis is a frequent problem following surgical intervention for diabetic foot infection. The Infectious Diseases Society of America guidelines recommend a prolonged course of antibiotics for treatment of residual osteomyelitis. Recent literature suggests oral antibiotic therapy is not inferior to IV therapy. The primary aim of this study was to evaluate treatment success in 128 patients receiving oral versus IV antibiotics for residual osteomyelitis in the diabetic foot after amputation at a Level 1 academic medical trauma center. Treatment success was defined as completion of at least 4 weeks of antibiotic therapy, complete surgical wound healing, and no residual infection requiring further debridement or amputation within 1 year of the initial surgery. Patients with peripheral arterial disease were excluded. A retrospective chart review was performed, and we found no statistically significant difference in treatment success between these two groups ($p = .28$). The median time to healing for oral antibiotic treatment was 3.17 months compared to 4.06 months for IV treatment ($p = .10$). Furthermore, there was no significant difference in group demographics or comorbidities, aside from more patients in the IV group having coronary artery disease ($p = .04$). The type of closure and whether the infection was single or polymicrobial were also not associated with a difference in outcomes between the two treatment arms. The results of the present study suggest oral antibiotics for treatment of residual osteomyelitis are not inferior to IV therapy and may be more efficacious for certain patients regarding cost and ease of administration.

Keywords: diabetes, infection, osteomyelitis, antibiotics, foot, ankl

Biography:

Jennifer Kipp is a U.S.-trained podiatrist and foot and ankle surgeon who recently completed her surgical training at Wake Forest University School of Medicine. She specializes in diabetic limb-salvage, adult foot and ankle reconstruction, and sports medicine, providing both operative and nonoperative care for lower extremity conditions. She is honored to present her latest work at the International Summit on Diabetes, Endocrinology, and Metabolic Disorders.

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