

Diabetes mellitus and infection: lower limbs skin and soft tissue infection

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Introduction

✓Skin and soft tissue (SST) infections are common in diabetic persons with the possibility of serious and vital complications.

✓We aim to describe clinical and therapeutic particularities and the evolution of SST infection in diabetics.

Methods

✓We conducted a retrospective study including diabetic patients admitted for SST infection in the infectious disease department of Sfax .Tunisia between 2015 and 2020.

Results

- 24 patients
- Mean age: 62,2±12 years
- **Type of diabetes:**- Type 1: 21% of patients
- Type 2: 79% of patients
- The **median delay of hospitalization** :14,8±13 days
- The diagnosis of SST infections was based only on **clinical manifestations**
- Circumferential extension of the local inflammatory : 8 patients (33,3%)
- **the most common causes of the infection:**

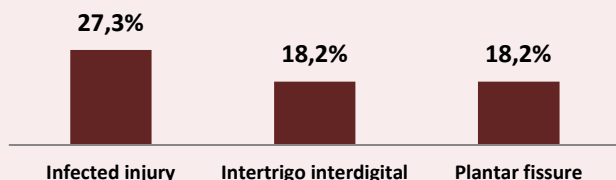


Figure 1: The différents causes of the infection

Table I: The most common lesions of the SST

Lesions	Cases(%)
Necrotizing fasciitis	7 (29%)
Abscess	4 (16%)
Gangrene	1 (4,2%)

- **General complications:** 5 patients (20,8%)

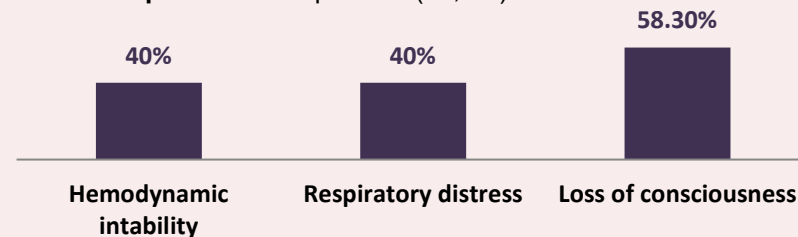


Figure 2: Repartition of general complications

- **Decompensation of the diabetes:**
 - Unbalanced diabetes : 14 patients (58,3%)
 - ketosis decompensation : 5 patients (16,6%)
- **Treatment:**
 - ✓ Association of antibiotics : 14 patients (58,3%).
 - ✓ Association of amoxicillin-clavulanic acid + clindamycin :10 patients (42,8%)
 - ✓ Surgical intervention: 8 patients (33,3%)
- **Evolution:**
 - Good evolution: 18 patients (75,4%)
 - Recurrence : 4 patients (16,3%)
 - Mortality : 2 patients(8,3%)

Conclusion

✓The severity of SST infections in diabetics, as well as, the frequency of recurrence, but the importance to more educating these persons on the hygiene of their feet.