

Clinical Outcome following Knee Disarticulation.

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Purpose: to determine the wound healing rate, perioperative mortality and ambulatory status of patients following knee disarticulation.

Methods: Retrospective review of all cases performed by one surgeon at tertiary center. Charts reviewed for demographic data, surgical and follow-up data. Ambulatory status preop and postop graded after Volpicelli et al. Descriptive statistics applied

Results: 34 knee disarticulations in 28 patients. 3 perioperative deaths (11%). Report on 31 procedures in 25 patients with mean follow-up of 7 months. 20 males, 5 females. Mean age 73 (55-92). PVD 21/25. Diabetes Mellitus 13/25 (52%). Chronic infection 2, Scleroderma 1 and squamous cell carcinoma 1. Primary wound healing 25 (81%). Delayed healing 6 (19%). Reoperation 1. Revision of amputation 0. Mean ambulatory status preop 2.5/6. Mean ambulatory status postop 1.8/6.

Conclusion: Reliable surgical procedure with 81% primary healing in high risk population. Knee disarticulation should be considered as an option to above knee amputation for PVD and complications of diabetes