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## Prescribing pattern of different antibiotics and analgesics used in patient with diabetic foot ulcer

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**Background:** Foot infections are a common and serious problem in persons with diabetes. Diabetic foot infections (DFIs) typically begin in a wound, most often a neuropathic ulceration. While all wounds are colonized with microorganisms, the presence of infection is defined by  $\geq 2$  classic findings of inflammation or purulence. Infections are then classified into mild (superficial and limited in size and depth), moderate (deeper or more extensive), or severe. Uninfected wounds do not require antibiotic therapy, infected wounds do. Empiric antibiotic regimens must be based on available clinical and epidemiologic data, but definitive therapy should be based on cultures of infected tissue.

Objective: To investigate the antimicrobial susceptibility pattern of microbes in DFIs.

**Methodology:** Inclusion criteria: All diabetic patients admitted to surgery unit with foot ulcer. Exclusion criteria: All patients referred from other unit like medicine or orthopaedics or any other speciality will be excluded. We used the patient database to conduct a retrospective observational study of hospitalized patients with diabetic foot infections.

**Results:** Patient record system, which contains patient demographics, diagnoses, diagnostic studies, treatments received and patient outcomes. With this information it is possible to examine the antibiotic regimens of large numbers of diabetic patients with foot infections.

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