Measuring what we Manage: Using Regional Data to Improve Outcomes

Neal R. Barshes, M.D., M.P.H.
Associate Professor of Surgery
I have *NO* relationships with industry or other disclosures.
Age-adjusted percentage of U.S. persons with **diagnosed diabetes** (2009)

Classification of counties by poverty rate and spatial situation (2000)

Holt JB. The Topography of Poverty in the United States: A Spatial Analysis ... Prev Chronic Dis 2007;A111.
Medicare spending per beneficiary adjusted for prices, health status (2013)

Cubanski J, Neuman T, White C. “The Latest on Geographic Variation in Medicare Spending” kff.org
Michael E. DeBakey Veteran Affairs Medical Center
(Houston, Texas)
<table>
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<tr>
<th>COR</th>
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<th>Recommendations</th>
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<tbody>
<tr>
<td>I</td>
<td>C-LD</td>
<td>Patients with PAD and diabetes mellitus should be counseled about self-foot examination and healthy foot behaviors (177, 180).</td>
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<tr>
<td>I</td>
<td>C-LD</td>
<td>In patients with PAD, prompt diagnosis and treatment of foot infection are recommended to avoid amputation (178, 179, 181-183).</td>
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<tr>
<td>IIa</td>
<td>C-LD</td>
<td>In patients with PAD and signs of foot infection, prompt referral to an interdisciplinary care team (Table 8) can be beneficial (178, 184, 185).</td>
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<tr>
<td>IIa</td>
<td>C-EO</td>
<td>It is reasonable to counsel patients with PAD without diabetes mellitus about self-foot examination and healthy foot behaviors.</td>
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<td>IIa</td>
<td>C-EO</td>
<td>Biannual foot examination by a clinician is reasonable for patients with PAD and diabetes mellitus.</td>
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</table>

our interdisciplinary work group
Leg Amputation Incidence at the Houston V.A. Hospital

MEDVAMC multidisciplinary efforts
autumn 2011 - autumn 2016

MICHAEL E. DEBAKEY
VETERANS AFFAIRS MEDICAL CENTER
foot complications affect a small (but *weighty*) subset of people with diabetes
## National PAVE Dashboard 2017

### Program Components

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### Committee Recommendations

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Although not program requirements, the Multidisciplinary PAVE Committee recommends that V19(s) consider follow-up.
Within-zip code disparity for persons categorized as black is greatest in Harris county (Houston).

Dear

April is **Limb Loss Prevention Month!**

You are receiving this letter because you are at risk for developing problems that lead to foot infections. I am a surgeon and part of a team of doctors that has been working to **eliminate leg amputations** among veterans receiving care at the Michael E. DeBakey Veterans Affairs Medical Center (MEDVAMC) here in Houston. The rate of leg amputations here at MEDVAMC has gone down a lot in the past 5 years, but we still have room for improvement.

Diabetes poses a risk for limb loss. People with diabetes can lose feeling in their feet (*neuropathy*). This may prevent you from feeling the pain that typically signs foot problems such as blisters or sores. When they go unnoticed, these sores can allow infection to get into the foot. People who smoke cigarettes and people with peripheral artery disease (P.A.D., or “hardening of the arteries” / weak circulation in the leg) are at especially high risk for bad foot infections. We can treat most infections, but it is best if foot infection can be avoided or treated early.

**I would like you to do these four things to reduce your risk of developing a foot infection:**

1. **Look at your feet every day.** If it is hard to look at the bottom of your foot, use a hand mirror ($4.22 at Walmart). Look for blisters, calluses, cuts, scabs, redness, swelling or fluid drainage. See a doctor – including us in the vascular surgery clinic – immediately if you see any of these problems.

2. **Protect your feet.** Never walk barefoot, even in your own house. Purchase shoes at a shoe store that can ensure a proper fit for your feet.

3. **Quit any using any tobacco products.** Call 1-800-QUIT-NOW or visit [www.smokefree.gov](http://www.smokefree.gov) for tips and support. Ask us about the “Veterans Kick Butts” smoking cessation support group.

4. **Work with your doctor to treat diabetes.** Know your last A1c number. Your goal A1c should be personalized for you with your main doctor, but should
the volume:outcome relationship among Texas hospitals

228 amputations at 77 hospitals (21%)

350 Texas hospitals performing 21,273 PAD-related limb procedures, 2004-2009

Geographic clusters of remote populations (those living >50 miles from an experienced center) who underwent leg amputation for PAD and foot complications.

Signs of a Foot Infection

An infection can destroy your foot as fast as a wildfire moving through a dry grass prairie.

If you have an opening (ulcer) in the skin of your foot, look out for these symptoms:
1. New pain or swelling in your foot
2. Fluid draining.
3. Foul odor
4. Chills, sweats, or fever.
5. Sick to your stomach.
6. No appetite for food.

If you have any of these, see to a doctor or emergency room at an experienced medical center by the end of the day.

Your Foot Infection Action Plan

1. Go to a large hospital with specialist doctors. NOTE: This might not be the hospital closest to your home.

2. Ask to see a surgeon who treats foot infections.

3. Ask to see specialist who can check (and -- if needed -- improve) the circulation to your foot. This might include a surgeon that specializes in vascular, cardiac, or general surgery. Certain other specialty physicians, such as cardiologists (heart specialists) or radiologists may also be able to do this.

You will have a higher risk of having a leg amputation if you go to a hospital without a specialist who can treat poor circulation.

YOU are the most important advocate for your health. Be an active part of your health care team!
Bảo vệ
Đối
chân
của bạn!

Có bệnh tiêu đường?

Bàu vê
Đối
chân
của bạn!

Dấu hiệu cảnh báo nhiễm trùng

Khi bị nhiễm trùng thì vi trùng có thể phá huy chân của bạn nhanh như một đấm chây di chuyển qua một dòng cơ khô.

Nếu bạn có bị nứt da hay bị lở (loét) da bàn chân thì nên xem có bị những triệu chứng như sau:
1. Bàn chân bị đau hoặc sưng
2. Bị cơ mủ
3. Bị cơ mủ hôi
4. Cắm thay mặt lăn, đỏ mỏ hôi hoặc sột
5. Cắm thay buồn nôn và khó chịu
6. Không thấm ăn

Nếu bạn có bất kỳ triệu chứng nào trên, hãy đến gặp bác sĩ hoặc phòng cấp cứu tại một trung tâm y tế có kinh nghiệm để khám.

Chẩn đoán nhiễm trùng
Kế hoạch chữa trị

1. Đi đến một bệnh viện lớn với các bác sĩ chuyên khoa. LUU Y: Đây có thể không phải là bệnh viện gần nhà bạn nhất.

2. Yêu cầu gặp bác sĩ phẫu thuật điều trị nhiễm trùng chân.

3. Yêu cầu gặp chuyên gia có thể kiểm tra (và nếu cần, cãi thiêng) sự lũ thôm huyết áp đến chân của bạn. Điều này có thể bao gồm một bác sĩ phẫu thuật chuyên về phẫu thuật mạch máu, tim, hoặc một số bác sĩ chuyên khoa khác, chẳng hạn như bác sĩ chuyên khoa tim mạch (chuyên gia tim mạch) hoặc bác sĩ X-quang cũng có thể khám cho bạn.

Bạn sẽ có nguy cơ cắt cụt chân cao hơn nếu bạn đi đến một bệnh viện tham khảo mà không có một bác sĩ chuyên môn để hướng dẫn cách điều trị.

BAN là người hiểu rõ nhất về sức khỏe của bạn. Hãy là một người tích cực của đội ngũ chăm sóc cho sức khỏe của bạn!
Advocate

Grow local solutions

Remove deterrants to a good outcome
Acknowledgements:

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David Green, MD Barbara Trautner, MD, PhD
Lawrence Harkless, DPM Myron Washington
Helene Henson, MD Jim Wrobel, DPM
Panos Kougias, MD Houssam Younes, MD
Nader Zamani, MD

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