



X-Plain *Amputation of the Leg* **Reference Summary**

Introduction

Diseases such as clogged arteries and diabetes could lead to the death of cell tissue in the leg. This may mean that the leg has to be amputated to remove the dead tissue. Doctors may recommend an amputation.

If your doctor recommends surgery for you, the decision whether or not to have surgery is also yours. This reference summary will review the benefits and risks of this surgery.

Anatomy, Symptoms and their Causes

Blood vessels carry blood from the heart and lungs to the legs to feed and cleanse the body's tissues. Clogged arteries in the legs, diabetes, infection, cancer, and other diseases may result in the death of a leg.

When this condition begins, the leg will become cold and painful. In addition, the immune system is affected. This makes the leg more susceptible to infections.

Small wounds to the leg may never be able to heal. Infections can spread to the rest of the body and could lead to death.

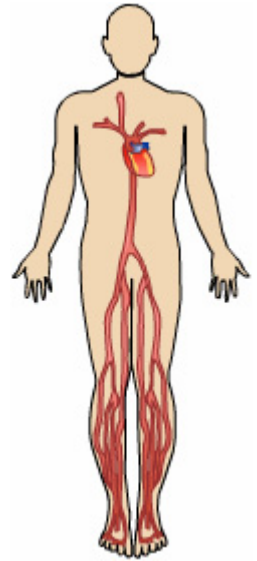
Preventive Measures

Certain life style habits help prevent reaching this stage of deterioration.

A healthy, low fat diet may also reduce plaque buildup in the arteries, allowing sufficient blood flow to the legs.

Refraining from smoking is essential in preventing plaque buildup.

Certain medications may be appropriate. Controlling diabetes and other diseases may help decrease the chances of the leg tissue dying and may prevent the need for amputation. Proper foot hygiene can help prevent infections.



This document is a summary of what appears on screen in *X-Plain™*. It is for informational purposes and is not intended to be a substitute for the advice of a doctor or healthcare professional or a recommendation for any particular treatment plan. Like any printed material, it may become out of date over time. It is important that you rely on the advice of a doctor or a healthcare professional for your specific condition.

If your doctor determines that the blood flow to the leg cannot be improved, an amputation may be necessary. Depending on how much of the leg has died or is at risk of dying, more or less of the leg may need to be amputated.



Your surgeon will discuss with you the approximate site of the amputation. The amputation may include the toes, the front part of the foot, the leg below the knee, or the leg above the knee.

Surgical Treatment

All of the dead tissue is cut off, and, if necessary, some of the bone may be sawed off, too.

If there is no evidence of infection at the site of the amputation, the wound is closed. If there is evidence of infection, the wound is allowed to heal on its own over time. This requires very frequent dressing changes.

The extent of the amputation depends on how much of the leg has died and how well the blood is circulating in the leg.

Your doctor will tell you how long you are likely to stay in the hospital. This depends on several factors, such as your age and medical condition. Depending on how quickly you recover, you may go home after spending two or three nights at the hospital.



Risks and Complications

This operation is very safe. There are, however, several possible risks and complications, which are unlikely, but possible. You need to know about them just in case they happen. By being informed, you may be able to help your doctor detect complications early.

The risks and complications include those related to anesthesia and those related to any type of surgery.

This document is a summary of what appears on screen in *X-Plain™*. It is for informational purposes and is not intended to be a substitute for the advice of a doctor or healthcare professional or a recommendation for any particular treatment plan. Like any printed material, it may become out of date over time. It is important that you rely on the advice of a doctor or a healthcare professional for your specific condition.

Risks of general anesthesia include nausea, vomiting, urinary retention, cut lips, chipped teeth, sore throat, and headache. More serious risks of general anesthesia include heart attacks, strokes, and pneumonia.

Your anesthesiologist will discuss these risks with you and ask you if you are allergic to certain medications.

Blood clots in the legs can occur due to inactivity during and after the surgery. These usually show up a few days after surgery. They cause the leg to swell and hurt. Blood clots can become dislodged from the leg and go to the lungs where they will cause shortness of breath, chest pain and possibly death. Sometimes the shortness of breath can happen without warning. It is extremely important to let your doctors know if any of these symptoms occur.

Getting out of bed shortly after surgery may help decrease the risk of blood clots in the legs.

Some of the risks are seen in any type of surgery. These include:

- Infection, deep or at the skin level. If the infection involves the bone, long-term antibiotics may be needed.
- Bleeding, either during or after the operation.
- A skin scar that may be painful or ugly.



Other risks and complications are related specifically to this surgery. These, again, are very rare. However, it is important to know about them.

The amputation site may not heal properly. Rarely, the patient may have 'phantom' sensation. This feels like the leg is still present even though it is not. Such feelings can be very upsetting if the patient feels pain coming from a part of the leg that is no longer there.

For example, even though the foot might have been surgically removed, the patient may still feel pain in that foot. In spite of the very best current medical and surgical treatments, this kind of pain is very difficult to control.

This document is a summary of what appears on screen in *X-Plain™*. It is for informational purposes and is not intended to be a substitute for the advice of a doctor or healthcare professional or a recommendation for any particular treatment plan. Like any printed material, it may become out of date over time. It is important that you rely on the advice of a doctor or a healthcare professional for your specific condition.

After the Surgery

Your doctor may recommend a healthy, low-fat, low salt diet. Moderate exercise and not smoking are also helpful in reducing the chances of further amputations.

Proper care of the opposite foot and leg is very important to reduce the chance of further complications.

Depending on the extent of the amputation, a 'prosthesis,' or artificial leg, may be fitted after the incision heals. Extensive physical therapy and a prosthesis may help you regain significant mobility.

Your doctor will tell you how long it will take before your amputation is completely healed, and when you can go back to work. This depends on:

- Your age,
- Type of work,
- Medical condition, as well as
- Other factors.



Summary

Diseases such as clogged arteries and diabetes could lead to the death of a person's leg.

When tissues of the leg have died, and the blood flow to the leg cannot be improved, an amputation may be necessary to prevent complications from spreading to other parts of the body.

This operation is safe with good results. However, as you have learned, complications may happen. Knowing about them will help you detect them early if they happen.

This document is a summary of what appears on screen in *X-Plain™*. It is for informational purposes and is not intended to be a substitute for the advice of a doctor or healthcare professional or a recommendation for any particular treatment plan. Like any printed material, it may become out of date over time. It is important that you rely on the advice of a doctor or a healthcare professional for your specific condition.