Why are amputees more susceptable to wounds with a prosthesis?

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The foot is anatomically designed to weightbear and take the load of the body. During an amputation this changes.

The weightbearing surface changes including blood flow, lymphatic drainage capacity, increases in skin and underlying surface fragility

The skin is more fragile and susceptible to breakdown.

A prosthetist then has the challenging role of creating a prosthesis that can accomodate all of this and safely take the load of someones body.

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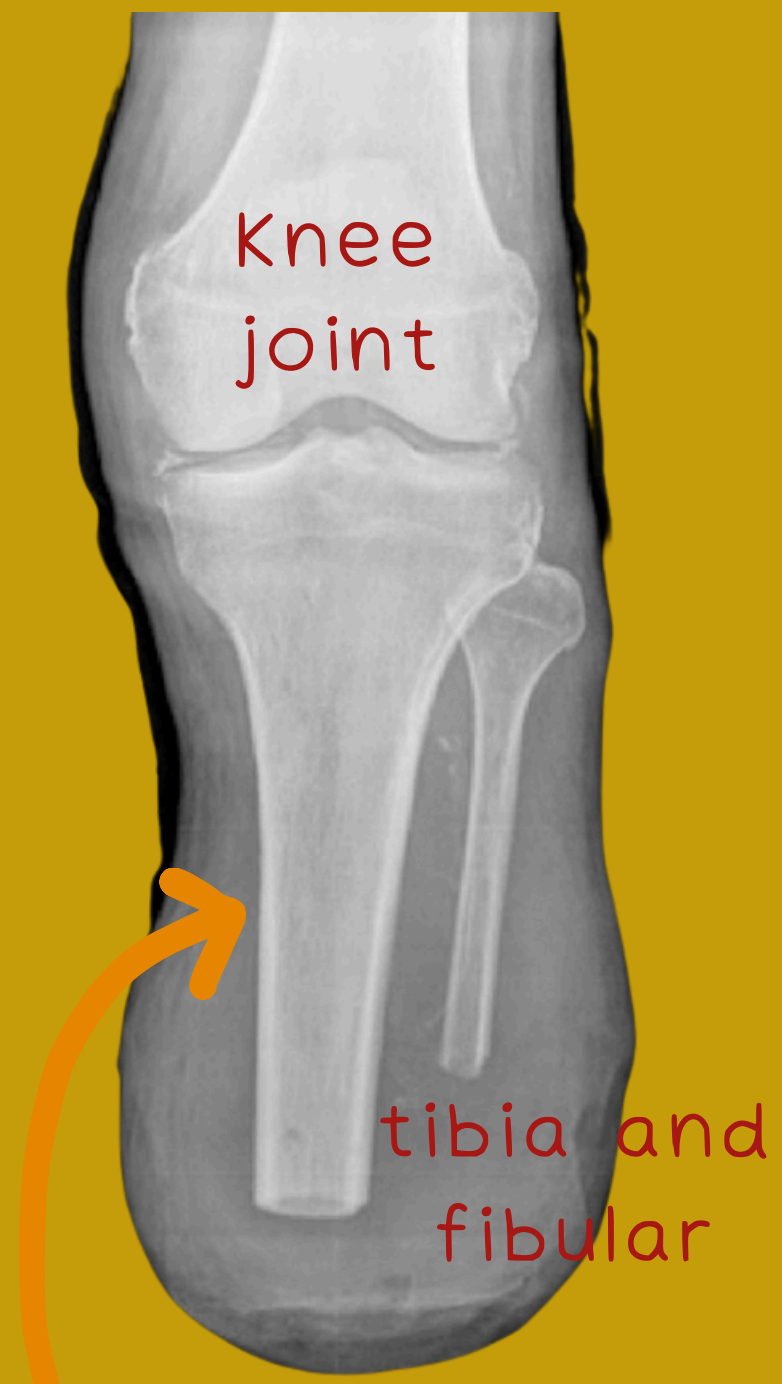
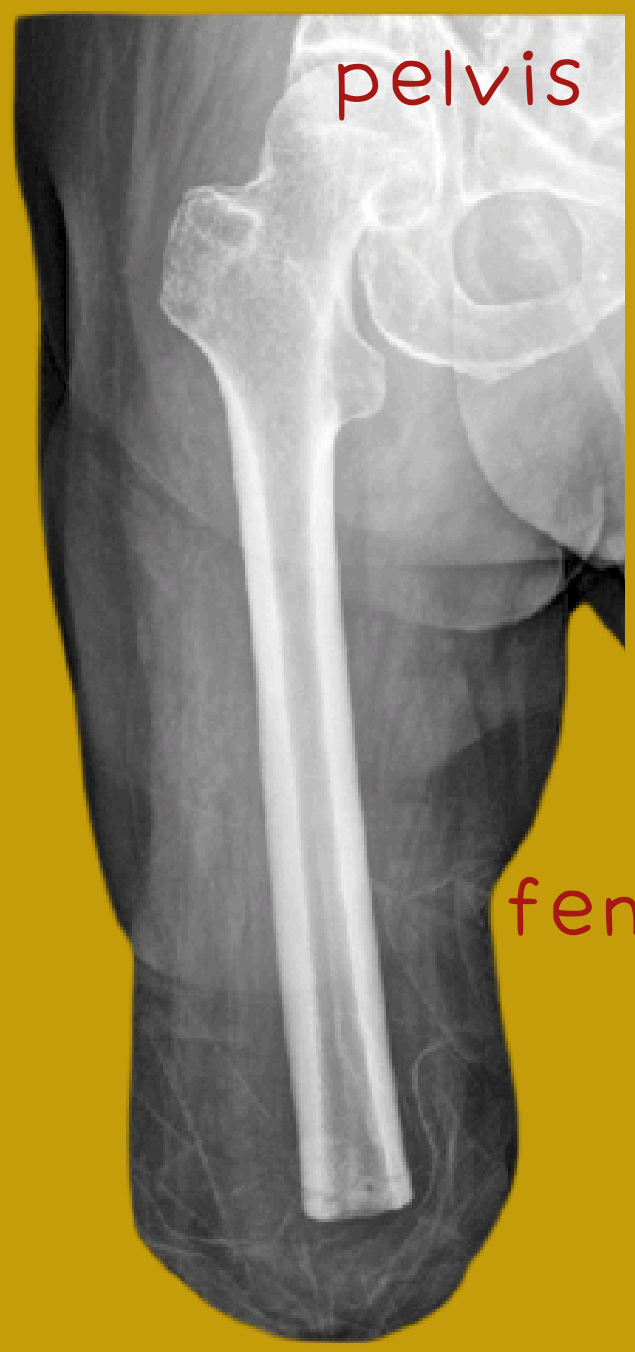
What is the Anatomy?

Transtibial Amputation (below Knee)



normally ⅓ down the lower leg.

Transfemoral Amputation (above Knee)



Common areas for wounds to arise

top of the fibular bone

bony prominences around the knee

bottom of the tibia (bone cut during surgery)

Why can amputees develop wounds with prostheses?

Friction and pressure caused by inappropriate loading or change in prosthetic fit.

Incorrect donning (not putting the prosthesis on correctly).

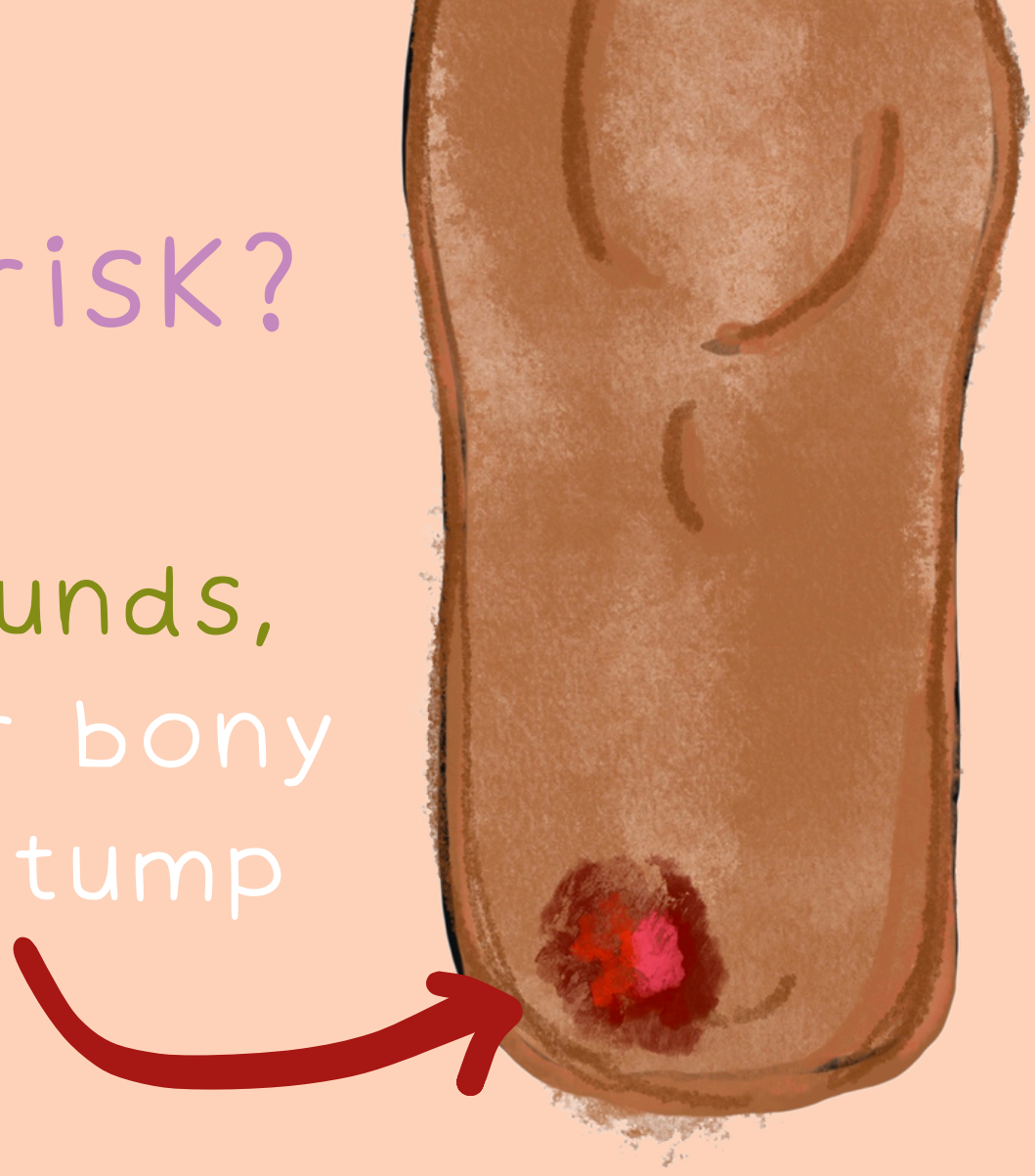
Damage to prosthetic components

Prosthetic suspension failure (prosthesis staying on the stump)

Change in Stump size (haemodialysis, weight and fluid fluctuations)

What's at risk?

Developing wounds, especially over bony areas of the stump



Delayed healing, especially in those with conditions such as diabetes or peripheral vascular disease

Infection, sepsis

Hospitalisation

Further amputation

What does this mean for an amputee?

Access to a specialised team of professionals with prosthetic experience is essential to reducing wound risk. This team includes a prosthetist, podiatrist and physiotherapist.

Amputation is lifelong and requires ongoing maintenance over the lifetime.

For more information, contact us at admin@bushsteps.com.au.

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