

# The times they are a-changin’

“The times they are a-changin’.” So sang Bob Dylan for the first time back in 1964. He wasn’t, to my knowledge, singing about *The Diabetic Foot Journal* 57 years ago, but he could have been. As of 2021, the journal will now be available only in a digital format. As something of a luddite who loves having the physical thing in my hand, be it a journal, magazine, book or DVD, it is with a heavy heart that we say goodbye to physical copies of the journal. However, it is a forward-looking move and one for the better.

By moving to a digital format, we can create a more versatile and engaging publishing vehicle. We will be publishing articles on a more frequent basis with the full issue still available every quarter.

Our commitment to the journal and those working in diabetes foot care remains robust and we know that the evidence and education the journal provides to clinicians is well-received and helps to support and enhance practice and understanding around the UK and beyond. We want to ensure that the footprint of the journal within diabetes foot care is amplified still further, so that all members of the multidisciplinary diabetes foot care team can access the vital education we provide.

We are very much excited about the opportunity that extending the reach of the journal and its content offers us and will be working hard to market the journal website to as wide a cross-section of the diabetes foot MDT as possible.

## Amputation rates during the pandemic

One not insignificant issue that has arisen from the COVID-19 pandemic has been late presentations of foot issues and increased risk of amputation. Having spoken to experts in the foot in diabetes

sphere, certainly there is a concern that people are seeking help later now than was the case pre-pandemic, albeit as we come out the other end of this pandemic and incidence decreases, with service returning to something approaching normality as the vaccine rollout continues apace across the UK.

Research into this phenomenon began in earnest last year by a group of Italian clinicians (Caruso et al, 2020). The authors posited that the interruption of preventive education, early treatment and diagnosis may have combined during the pandemic with the result that there was increased hospitalisation of patients with severe diabetic foot ulceration (DFU) at high amputation risk.

In order to assess whether or not this was the case, the authors evaluated clinical features and amputation risk of individuals with both diabetes and DFU who presented to a tertiary care centre in Naples, Italy, during lockdown compared with those admitted during the first 5 months of 2019. Sixty-three patients were assessed, with 25 admitted to the centre in 2020 during lockdown and 38 in 2019.

The results showed that those patients with diabetes admitted for DFU during the COVID-19 lockdown had more than threefold risk of amputation compared with those admitted in 2019.

Data from the UK may only reveal the scale of the problem of delayed diagnosis and treatment in the coming months and years, but the early signs are that the lockdown may well have had a detrimental impact on those at higher risk of amputation. ■

Caruso P, Longo M, Signoriello S et al (2020) Diabetic foot problems during the COVID-19 pandemic in a tertiary care center: the emergency among the emergencies. *Diabetes Care* 43(10): e123–e124

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*The Diabetic Foot Journal*