

Lisfranc and Chopart Amputation: A Systematic Review, Gesiena E. van der Wal, Pieter U. Dijkstra, Jan H.B. Geertzen, *Medicine*, Volume 102, February 2023

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Level of Evidence: 2

Reviewer:

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The purpose of this study was to perform a systematic review to analyze wound healing, need for re-amputation, development of equinus deformity and ambulation status after Lisfranc and Chopart amputations. A literature search of four databases was performed. Case reports and publications without results differentiating between Lisfranc and Chopart amputations were excluded. A resulting 16 studies were included for analysis, which ranged in publication from 1966 to 2018. 15 of 16 studies were retrospective studies, which were determined to be weak in quality. Methodology quality assessment included if studies controlled for confounding variables, validation of questionnaires, and whether all patients were analyzed.

There was a total of 61 Lisfranc amputations, 229 modified Chopart, and 61 conventional Chopart amputations for a total of 349 patients. Failed wound healing was observed in 20% of Lisfranc amputations, 28% of modified Chopart amputations, 46% of conventional Chopart amputations.

Of the studies that assessed functional outcomes:

1. 85% of patients after Lisfranc amputation were able to walk short distances without a prosthesis.
2. 74% of patients after modified Chopart amputation were able to walk short distances without a prosthesis.
3. 26% of patients after conventional Chopart amputation were able to walk short distances without a prosthesis.
 - a. 16% of these patients had residual limb problems, issues fitting prostheses, or developed equinus deformity. The studies also noted lower rates of healing and higher rates of necrosis for Chopart amputations when compared to TMA.
4. 25% partial tissue necrosis was reported after TMA versus 50% after Lisfranc amputations.

Overall, the data in the studies were of poor quality and heterogenous, making it difficult to compare results. However, Lisfranc amputations were shown to have better outcomes than Chopart amputations overall.



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