

Retroactive Assignment Of DOIs To Previously Published Articles In *Limb Preservation Journal*

Ian Corks

Abstract: A DOI, or Digital Object Identifier, is a string of numbers, letters and symbols used to uniquely identify an article or document and to provide it with a permanent web address (URL).¹ They are used to provide current information, including where the content (or information about it) can be found on the Internet. With Volume 4 Issue 1, *Limb Preservation Journal* began issuing DOI numbers to published clinical articles. At the request of several authors and to help make the content of published articles more easily citable, DOI numbers have now also been retroactively assigned to all qualifying content previously published in the journal. A list of these articles with corresponding DOIs is included.

Key words: *Limb Preservation Journal*, DOI, retroactive, digital publishing.

How to cite: Corks I. Retroactive assignment of DOIs to previously published articles in *Limb Preservation Journal*. *Limb Preservation Journal*. 2024;5(1): 78-82. DOI: <https://doi.org/10.56885/PFGC3831>.

The Digital Object Identifier (DOI) System was developed to be a standardized way of identifying content in the digital publishing environment. DOI identifier numbers are assigned to any clinical article, research paper, report or related content that is posted on digital networks.¹

The DOI System provides a framework for persistent identification, managing intellectual content, managing metadata, linking customers with content suppliers and enabling automated management of media. A DOI will help others easily locate a document from a citation.¹

DOI identifiers are essential for articles in which the author(s) wants to make their research easily citable. These never change, so even if the journal that published the original work ceases to exist or changes web addresses, there are no broken backlinks and anyone can still access the paper. These also effectively put a date on published

research so no one else can use it or claim it as their own.

Following is an index of articles previously published in *Limb Preservation Journal* that have retroactively been assigned DOI identifier numbers. Note that qualifying articles date from Volume 2 Number 1.

Volume 2 Number 1

How A Multidisciplinary Approach Can Change The Fate Of Our Patients With Diabetic Foot Ulcers

Giacomo Clerici MD

Abstract: The rate of death for patients with diabetic foot ulcers is 2.5 times higher than for patients with diabetes who do not have diabetic foot ulcers. Ulceration is also correlated to a higher mortality rate than the most frequent oncological diseases or cancers. A skillful interprofessional team and timely therapeutic strategies are essential

for effectively managing diabetic foot ulcers and a multidisciplinary approach can have a substantial impact in the prognosis of these patients.

How to cite: Clerici G. How a multidisciplinary approach can change the fate of our patients with diabetic foot ulcers. *Limb Preservation Journal*. 2021;2(1): 6-8. DOI:[10.56885/LXJW4723](https://doi.org/10.56885/LXJW4723)

Management For People Living With Chronic Lower-Limb Ulcers

Barbie Murray MClSc-WH BScN RN and Martin Van der Vyver MD FRCPC

Abstract: Managing chronic lower-limb ulcers involves using both best practice guidelines and strategies for pain management. Developing a patient-centred plan of care, which includes managing the various types of pain and adopting current best practice guidelines such as those published by Wounds Canada, can optimize the care for patients living with lower limb ulcers.

How to cite: Murray B, Van der Vyver M. Management for people living with chronic lower-limb ulcers. *Limb Preservation Journal*. 2021;2(1): 10-12. DOI:[10.56885/RTES3632](https://doi.org/10.56885/RTES3632)

The Management Of Foot Infections

Min Lee MD FRCSC and John Steinberg DPM

Abstract: Limb preservation can involve both established and emerging strategies to identify, prevent and surgically manage foot infections in patients living with peripheral arterial disease (PAD), chronic limb-threatening ischemia and diabetes. If a person with diabetes needs treatment, a multidisciplinary approach is recommended that combines antiplatelet agents, a statin, glucose management, exercise therapy, hypertension management and hyperlipidemia management.

How to cite: Lee M, Steinberg J. The management of foot infections. *Limb Preservation Journal*. 2021;2(1): 12-16. DOI: [10.56885/GAHJ2813](https://doi.org/10.56885/GAHJ2813)

The Prevention Of Recurrent Ulceration And Amputation

Amanda Mayo MD MHSc FRCPC, Connor Pardy MSc CPO and Scott Schumacher DPM DABPS DABPM FAPWHc FASPS FACFAS

Abstract: Patients with recurrent ulceration and amputation can be challenging cases for health-care teams. There are, however, several different approaches that can prevent the recurrence of ulceration and reduce the incidence of amputation. Clinicians treating recalcitrant wounds should consider the patient's whole health picture, including issues like comorbidities, biomechanics, social supports and barriers to success.

How to cite: Mayo A, Pardy C, Schumacher S. The prevention of recurrent ulceration and amputation. *Limb Preservation Journal*. 2021;2(1): 17-20. DOI: [10.56885/BELJ2478](https://doi.org/10.56885/BELJ2478)

Challenges To And Opportunities For Limb Preservation In Rural And Remote Communities

Jeremy Caul RN BScN MClSc AHCP WH CDE and Bijan Najafi MSc PhD

Abstract: Lead author Jeremy Caul serves 33 remote Indigenous communities — 28 of which are fly-ins — whose combined populations equal more than 30,000 people. Currently these communities have documented rates of diabetes in close to 25% of the population. The rates of amputation are four to seven times the provincial (Ontario) average. This article presents work that is being done to identify specific barriers to limb preservation in this region, as well as the opportunities and strengths that Indigenous communities share.

How to cite: Caul J, Najafi B. Challenges to and opportunities for limb preservation in rural and remote communities. *Limb Preservation Journal*. 2021;2(1): 21-24. DOI: [10.56885/USIH8389](https://doi.org/10.56885/USIH8389)

Implementing Best Practice In Alberta: A Diabetes Foot Care Clinical Pathway

Kathy Dmytruk RD CDE and Petra O'Connell BSc MHSA

Abstract: There are significant variations in foot screening practices in Alberta. Despite best practice guidelines, many primary care providers do not perform the recommended annual foot examination on their patients with diabetes. This highlights the need for a systematic approach to increase screening practices across Alberta.

How to cite: Dmytruk K, O'Connell P. Implementing best practice in Alberta: a diabetes foot care clinical pathway. *Limb Preservation Journal*. 2021;2(1): 26-28. DOI: [10.56885/DBSN8273](https://doi.org/10.56885/DBSN8273)

Building The Framework: Developing An Ontario Strategy For Lower Limb Preservation

Mike Setterfield MSc and Emma Jowett HBA

Abstract: It has been documented that almost 85% of lower-limb amputations are preceded by a diabetic foot ulcer and that up to 80% of major lower-limb amputations are preventable. This article discusses the efforts by CorHealth, together with a provincial advisory committee of vascular and wound care experts, primary and community care providers and patient and family advisers, chaired by Dr. Ahmed Kayssi towards the development of a multi-year Ontario lower-limb preservation strategy.

How to cite: Setterfield M, Jowett E. Building the framework: developing an Ontario strategy for lower limb preservation. *Limb Preservation Journal*. 2021;2(1): 30-32. DOI: [10.56885/SCJH2385](https://doi.org/10.56885/SCJH2385)

How To Convince Decision Makers To Invest In Limb Preservation

Venita Chandra MD FACS, Karim Manji DPM FACFAS and Richard Neville MD FACS DMSVS

Abstract: Limb preservation is a multifactorial challenge that is often limited by financial resources. Those deciding where to invest financial resources within health systems need to be made aware of the importance of adequately funding limb preservation activities and supports.

How to cite: Chandra V, Manji K, Neville R. How to convince decision makers to invest in limb preservation. *Limb Preservation Journal*. 2021;2(1): 34-35. DOI: [10.56885/AIYR8359](https://doi.org/10.56885/AIYR8359)

The Diabetes Foot Care Facebook Group Study

Helen Ngozichukwuka Obilor MSc (Nursing) RN PhD Candidate and Kevin Woo RN PhD

Abstract: Globally, diabetic foot ulcers (DFUs) are a serious diabetes complication linked to excess disability and morbidity. To prevent foot complications, people with diabetes benefit from lifelong behavioural modifications. This article discusses a research study, conducted in collaboration with Wounds Canada, to explore the feasibility of using social media to engage individuals with diabetes in preventing foot ulcers.

How to cite: Obilor HN, Woo K. The diabetes foot care Facebook group study. *Limb Preservation Journal*. 2021;2(1): 37-38. DOI: [10.56885/DRET2924](https://doi.org/10.56885/DRET2924)

Diabetes, Healthy Feet And You – Train-The-Trainer: A Quality Improvement Inquiry

Janet L Kuhnke BScN MS NSWOC DrPsych and M Gail Woodbury BScPT PhD

Abstract: Diabetic self-management education focused on foot care and footwear, when provided in an organized and structured manner, is a cornerstone of preventing foot problems. *Diabetes, Healthy Feet and You* (DHFY) is an innovative education program developed to address the learning needs of patients and their families/care partners around self-management, diabetes mellitus, foot care, footwear and prevention of foot ulcers and amputations. This article describes the DHFY

program and its associated *Train-the-Trainer* workshop and workbook.

How to cite: Kuhnke JL, Woodbury MG. Diabetes, Healthy Feet and You – Train-the-Trainer: a quality improvement inquiry. *Limb Preservation Journal*. 2021;2(1): 42-49. DOI: [10.56885/LOPW3349](https://doi.org/10.56885/LOPW3349)

Volume 3 Number 1

The Impacts Of COVID-19 On Diabetic Foot Care: An Interview With Devon Jahnke And Iris Noland

Janet L Kuhnke RN BScN MS NSWOC DrPsych

Abstract: The author interviewed Devon Jahnke DCh IIWCC CDE MCISc (Wound Healing) and Iris Noland BSc (Biochem) MD MCISc (Wound Healing), to ask them about their experiences and insights in treating patients with diabetes-related foot complications in the age of COVID.

How to cite: Kuhnke JL. The impacts of COVID-19 on diabetic foot care: an interview with Devon Jahnke and Iris Noland. *Limb Preservation Journal*. 2022;3(1): 6-10. DOI: [10.56885/KQAH8719](https://doi.org/10.56885/KQAH8719)

A Foot Health Pathway For People Living With Diabetes: Integrating A Population Health Approach

Robyn Evans BSc MD CCFP FCFP, Janet L Kuhnke RN BScN MS NSWOC DrPsych, Virginie Blanchette BSc MSc DPM PhD, Mariam Botros DCh DE IIWCC Med, Sue Rosenthal BA MA, Joel Alleyne BSc MA MIST and Idevania Costa RN NSWOC PhD

Abstract: Complications from diabetes result in significant challenges for individuals, families and health-care systems. However, there are successful evidence-based solutions to prevent four out of five amputations. The Foot Health Pathway presented here—which is based on an approach that has been successfully implemented in other

countries—provides a framework that could be used for optimized care delivery in Canada.

How to cite: Evans R, Kuhnke JL, Blanchette V, Botros M, Rosenthal S, Alleyne J, Costa I. A foot health pathway for people living with diabetes: integrating a population health approach. *Limb Preservation Journal*. 2022;3(1): 12-24. DOI: [10.56885/BJRI9192](https://doi.org/10.56885/BJRI9192)

Saving Limbs And Lives: Building Out An Ontario Lower Limb Preservation Strategy

Mike Setterfield MSc and Lynn Scholey RKin MSc

Abstract: There are over 1,200 non-traumatic major lower-limb amputations every year in Ontario, the majority resulting from complications of vascular disease, diabetes or both. This equates to one lower-limb amputation every seven hours and results in approximately \$140 million in direct amputation health-care costs annually. CorHealth Ontario is collaborating with a provincial Advisory Committee to develop a multi-year provincial Lower-Limb Preservation Strategy. The strategy aims to facilitate a coordinated, integrated and patient-centered approach to lower-limb preservation care in Ontario.

How to cite: Setterfield M, Scholey L. Saving limbs and lives: building out an Ontario lower limb preservation strategy. *Limb Preservation Journal*. 2022;3(1): 26-28. DOI: [10.56885/LEOP2871](https://doi.org/10.56885/LEOP2871)

Sex, Gender, Race And Ethnicity Matter In Limb Preservation In North America

Virginie Blanchette BSc MSc DPM PhD and Ahmed Kayssi MD MSc MPH FRCSC CWSP

Abstract: The causes of sex, gender, racial and ethnic disparities in health care are multifactorial and reflect differences in biological vulnerability to disease as well as differences in social resources, environmental conditions and health-care interventions. These factors are well known to influence the fate of people with diabetes-related foot complications such as diabetic foot ulcer,

infection and amputation. In this paper, the authors discuss the important concepts of health equity, equality and disparity in relation to the impact of sex, gender, race and ethnicity on limb preservation.

How to cite: Blanchette V, Kayssi A. Saving limbs and lives: sex, gender, race and ethnicity matter in limb preservation in North America. *Limb Preservation Journal*. 2022;3(1): 30-36. DOI: [10.56885/FDBN2892](https://doi.org/10.56885/FDBN2892)

Current And Emerging Treatments For People Living With Lower Limb Ulcers: Session Summary

Robert Fitridge MS FRACS, Deirdre O’Sullivan-Drombolis BScPT MCISc (Wound Healing) and Suzanne Stewart RN NSWOC WOC(C)

Abstract: Lower limb ulcers (LLUs) are common, with a prevalence of 0.8 to 2.2 patients per 1000 population, doubling in incidence in people aged over 65. Lower limb ulcers significantly impact an affected individual’s quality of life and are costly to treat. Diagnosing the cause of the ulcer is critical to successful management. Many affected individuals have ulcers with mixed etiology, which makes diagnosis and therapy challenging. (Session summary from Wounds Canada 2021 National Conference.)

How to cite: Fitridge R, O’Sullivan-Drombolis D, Stewart S. Current and emerging treatments for people living with lower limb ulcers: session summary. *Limb Preservation Journal*. 2022;3(1): 38-43. DOI: [10.56885/CJFN1925](https://doi.org/10.56885/CJFN1925)

Case Study: Successful Limb Salvage Combining Revascularization Surgery With An Advanced Acellular Dermal Matrix (ADM) In Treating Multiple Non-Healing Diabetic Foot Ulcers

Asem Saleh MSc MD RPVI FRCSC, Idevania Costa RN NSWOC PhD and Paul F Gratzner MASc PhD PEng

Abstract: The number of people with diabetes is increasing each year and is projected to reach 439 million by 2030. Up to 25% are expected to have non-healing foot ulcers. Even with revascularization and best standard wound care practices, significant challenges remain in healing diabetic foot ulcers (DFUs) and avoiding amputations. This report features a case study of a patient with diabetes with multiple non-healing necrotic lesions on both feet. After amputation of the left foot was necessary, a new approach using a combination of revascularization and an advanced acellular dermal matrix (ADM), developed by the third author, was successfully used to preserve the right foot.

How to cite: Salah A, Costa I, Gratzner PF. Case study: successful limb salvage combining revascularization surgery with an advanced acellular dermal matrix (ADM) in treating multiple non-healing diabetic foot ulcers. *Limb Preservation Journal*. 2022;3(1): 44-48. DOI: [10.56885/YUAI9294](https://doi.org/10.56885/YUAI9294). ■

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