CONCLUSION
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The resection of underlying bone in the cases of plantar ulcers in leprosy was employed in 33 ulcers of 30 patients in various group ranging from 20 to 70 years by dorsal or plantar approach. Evaluation of results done with follow-up of 3 months to 1 year after operation. The indications, choice of technique and types of results were compared with those of previous workers. The following conclusions were drawn.

1. The resection of underlying bone is indicated in all the cases of plantar ulcers in leprosy.

2. The operation can be safely performed without any anaesthesia.

3. The operation should be done after cessation of frank discharge from the ulcer.

4. The external trauma is one of the causative factor for plantar ulceration. So feet must be protected by foot-wear.

5. The internal pressure is most important causative factor in plantar ulceration.
6. The underlying diseased bone also play part in causation of trophic ulcers.

7. The operation should be performed by dorsal approach, as healing time is also less and ulcer heal better than plantar approach.

8. The resection of underlying bone in trophic ulcers has a strong indication as the results are excellent by the procedure.