

**Comparison of a new versus standard removable offloading device in patients with
neuropathic diabetic foot ulcers:**

a French national, multicentre, open label randomized, controlled trial

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SUPPLEMENTAL MATERIAL

TABLE OF CONTENTS**MEMBERS OF THE ORTHODIAB COLLABORATIVE GROUP**

- List of investigators
- End point adjudication committee
- Scientific committee

ADDITIONAL STATISTICAL RESULTS

- Supplemental Table S1. Semi-quantitative survey for assessment of adherence to offloading
- Supplemental Table S2. Key characteristics of subjects at baseline, study allocation, and primary outcome in each participant center
- Supplemental Table S3. Primary outcomes in compliant patients using the two definitions of offloading compliance
- Supplemental Table S4. Estimation of the offloading observance
- Supplemental Table S5. Satisfaction of participants regarding offloading devices using QUEST 2.0 scale
- Supplemental Table S6. Detailed adverse events by study allocation
- Supplemental Figure S1. Schedule of the study visits
- Supplemental Figure S2. Primary outcomes in different subgroups
- Supplemental Figure S3. Time to reach wound closure of the index ulcer by study arms

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Supplemental Table S1. Semi-quantitative survey for assessment of adherence to off-loading

Wearing off-loading device	Always	Most of the time	Sometimes	Rarely or never
Outside	3 points	2 points	1 point	0 point
At home	4 points	3 points	1 point	0 point
Waking up at night	6 points	5 points	1 point	0 point

Supplemental Table S2. Key characteristics of subjects at baseline, study allocation, and primary outcome in each participant center

Center	Bichat	HEGP	Reims	Gonesse	Thionville	Corbeil	Nantes	Saint-Herblain	Bordeaux	Montpellier	Saint-Mandé	P-value
Number	50	4	20	3	2	16	5	3	2	3	4	
Orthèse Diabète	24	2	10	1	0	9	3	1	1	1	2	0.97
Control	26	2	10	2	2	7	2	2	1	2	2	
Male	39	4	16	3	0	13	4	3	2	1	3	0.16
Age (years)	63±8	54±13	64±9	52±13	51±6	60±11	53±16	61±10	76±4	63±5	57±15	0.04
BMI (kg/m²)	30±5	26±4	31±6	30±5	32±16	33±7	32±4	30±5	29±1	26±7	30±6	0.75
SBP (mmHg)	136±23	140±6	133±13	125±5	130±14	136±10	129±21	130±1	147±4	135±7	138±17	0.94
DBP (mmHg)	72±12	77±10	75±9	77±5	85±7	82±3	75±12	70±16	83±11	65±21	79±10	0.24
Diabetes duration (years)	18±9	20±2	18±12	23±12	24±6	21±9	22±8	20±13	24±8	23±6	17±10	0.95
HbA1c (%)	7.9±1.9	8.4±1.6	7.8±1.5	10.2±2.2	7.8±2.3	9.7±2.1	8.6±0.4	9.1±0.9	6.5±0.8	7.7±0.3	7.0±1.7	0.19
Wound duration												
<1 week	0	1	1	0	0	0	0	0	1	0	0	0.07
1-2 weeks	10	0	4	0	0	2	1	0	0	0	0	
>2 weeks	35	2	9	1	2	8	4	3	1	2	4	
Infection	10	1	10	0	0	0	2	1	1	0	1	0.03
Soft tissue	6	1	9	0	0	0	2	1	1	0	1	0.01
Osteomyelitis	6	0	3	0	0	0	0	0	0	0	1	0.81

Lower-extremity artery disease	8	1	9	0	1	8	1	3	0	1	1	0.03
Primary outcome	23	0	4	2	0	5	1	3	1	0	1	0.22

Data are expressed as number of participants (categorical variables) or mean±SD (continuous estimates). Comparisons were performed using Chi-square or ANOVA tests. P<0.05 was significant.

Centers: Hôpital Bichat, Paris; Hôpital européen Georges-Pompidou (HEGP), Paris; Centre Hospitalier Universitaire de Reims; Centre Hospitalier de Gonesse; Centre Hospitalier Régional de Metz - Thionville; Centre hospitalier Sud Francilien, Corbeil-Essonne; Centre Hospitalier Universitaire de Nantes; Le Centre La Tourmaline, Saint-Herblain; CHU de Bordeaux, Haut Lévêque Hospital, Pessac; CHRU de Montpellier; Hôpital Bégin, Saint-Mandé.

Two centers (Henri Mondor hospital, Créteil and Nimes university hospitals) have screened 5 patients who were not included.

Supplemental Table S3. Primary outcomes in adherent patients using the two definitions of offloading compliance

	Conventional	<i>Orthèse Diabète</i>	<i>P</i> value
First definition of compliance (n)	38	25	
Wound closure at 3 months	14 (56%)	11 (44%)	0.57
Second definition of compliance (n)	21	15	
Wound closure at 3 months	7 (47%)	8 (53%)	0.23

First definition: patients were considered compliant if they replied at least at one visit the modality “Always” or “Most of the time” to the 3 items of the questionnaire. Second definition: adherence score ≥ 8 (as shown in Supplemental Table 1)

Supplemental Table S4. Estimation of the offloading observance

	Conventional group	<i>Orthèse Diabète</i>	P value
Overall*	38 (66)	25 (46)	0.04
At home			
always	28 (56)	14 (33)	0.06
often	3 (6)	9 (21)	
rarely	4 (8)	4 (9)	
never	15 (30)	16 (37)	
Outside			
always	29 (58)	17 (39)	0.22
often	3 (6)	5 (12)	
rarely	2 (4)	5 (12)	
never	16 (32)	16 (37)	
Overnight			
always	15 (30)	10 (23)	0.57
often	3 (6)	5 (12)	
rarely	6 (12)	3 (7)	
never	26 (52)	25 (58)	

Data, collected at 3-month visit, presented as number (percentage) and compared using Chi-2 test; *Participants who declared using the offloading device regularly (always or often) at home, outside, and overnight.

Supplemental Table S5. Satisfaction of participants regarding offloading devices using QUEST 2.0 scale

	Conventional group	<i>Orthèse Diabète</i>	P value
Device	3.9 (3.3 – 4.3)	4 (3.5 – 4.5)	0.50
Service	4.2 (3.6 – 4.7)	4.5 (4.0 – 4.7)	0.13
Total	3.9 (3.5 – 4.4)	4.1 (3.7 – 4.6)	0.31

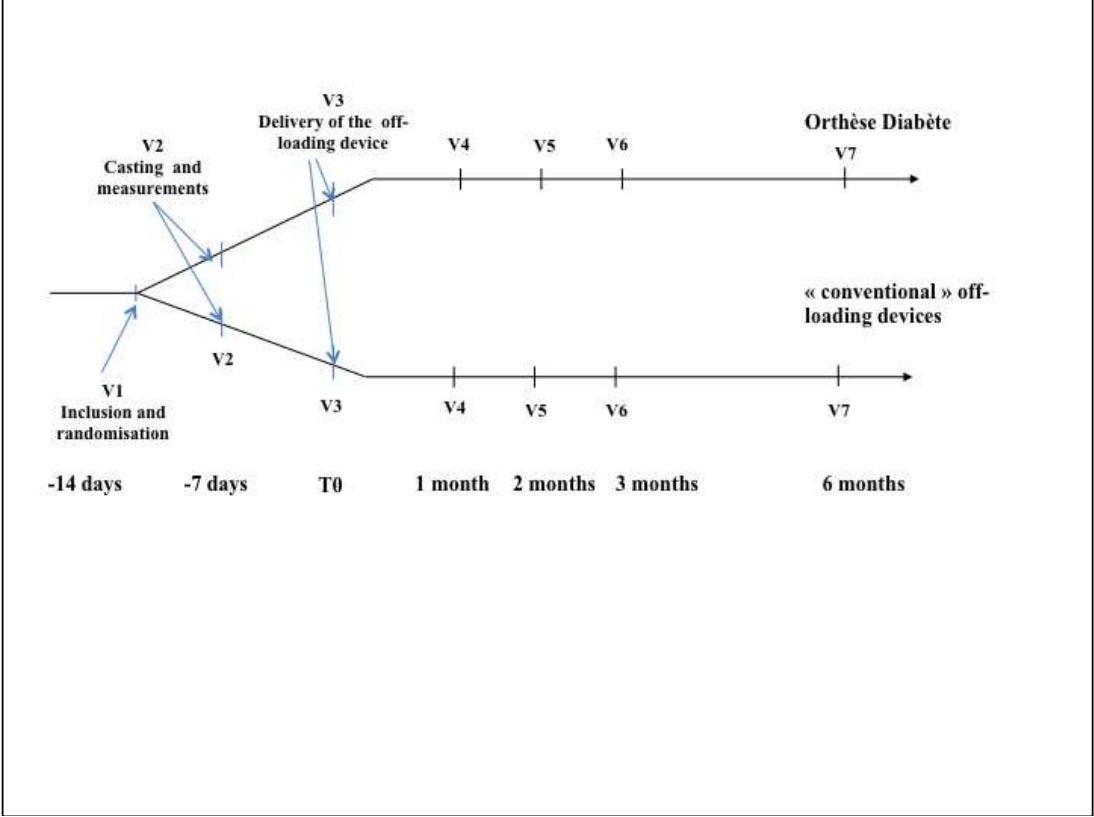
Data, collected at 3-month visit, presented as median (25th – 75th percentiles) and compared using Wilcoxon test.

Supplemental Table S6. Detailed adverse events by study allocation

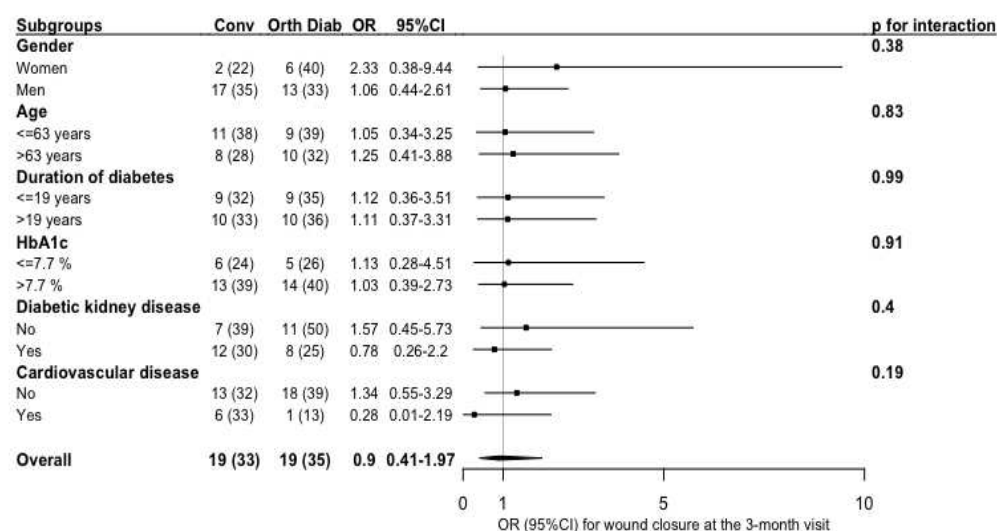
	Conventional	<i>Orthèse Diabète</i>
Foot wound	8	11
Foot infection	6	5
Osteitis or osteoarthritis	4	6
Skin infection	6	9
Systemic infection	5	2
Lower-extremity amputation	2	7
Foot surgery	8	3
Upper or lower-limb fracture	0	2
Upper or lower-limb fracture	0	2
Breakage of the orthosis	0	3
Pain	2	0
Hyperthermia	0	1
Sciatica	0	1
Leg oedema	0	1
Hypoglycemia	0	1
Severe diabetic retinopathy	0	2
Acute kidney failure	1	1
Acute heart failure	1	0
Iatrogenic hepatitis	0	1
Anemia	2	0
Cancer	1	0
Gastritis	1	0
Others	10	9

Data presented as numbers of adverse events.

Supplemental Figure S1. Schedule of the study visits



Supplemental Figure S2. Primary endpoint in different subgroups



Analyses performed in the intention to treat cohort using a multiplicative interaction in logistic regression model. Age, diabetes duration, and HbA1c subgroups were categorized as below or above medians.

Supplemental Figure S3: Time to reach wound closure of the index ulcer by study arms

