



27 May 2025

Deputy Pádraig Rice, TD
Dáil Éireann
Leinster House
Kildare Street
Dublin 2

RE: PQ 24084/25

To ask the Minister for Health if the number of amputees in Ireland is collated in a national database; if not, the reason; if she plans to establish a database of amputees to inform and improve service provision; and if she will make a statement on the matter.

Dear Deputy Rice,

The Health Service Executive has been requested to reply directly to you in relation to the above parliamentary question, which you submitted to the Minister for Health for response. I have consulted with the National Clinical Advisor and Group Lead for Older Persons (NCAGL OP) and the National Clinical Programme for Surgery (NCP S) on your question and have been informed that the following outlines the position.

There are multiples reasons as to why an amputation could be carried out e.g. Trauma, Peripheral Vascular Disease, Malignancy and Sepsis (Diabetic). These patient cohorts are managed by multiple specialties.

In 2018, the National Clinical Programme in Rehabilitation Medicine published their HSE Model of Care for Specialist Rehabilitation Medicine¹. This model outlines measures to support limb loss avoidance and advocates for the completion of a Rehabilitation Needs Assessment/ Prescription and subsequent referral via a rehabilitation co-ordinator into a Managed Clinical Rehabilitation Network (MCRN).

There is currently no national database of the number of people who have undergone an amputation.

Future planning of care for this patient cohort should be sufficiently specialist to meet the needs of service users. Thus, in the context of limb loss, rehabilitation staff need to have expertise in management of

- physical health issues (e.g. diabetes mellitus, pain);
- adjustment/mental health (depression/anxiety, grief);
- cognition and behaviour (it is not unusual that people have cognitive impairment and reduced safety awareness);
- rehabilitation process required;
- equipment (e.g. wheelchairs);
- engineering relating to prosthesis fitting and adjustment.

To meet this, any commissioned service will need several professionals including: Medical Social Worker, Physiotherapist, Occupational Therapist, Clinician, Psychology, Orthotist etc.

Currently, the provision of limb absence rehabilitation (amputation, congenital absence) is based mostly at the National Rehabilitation Hospital (NRH). There is a small but valuable day-patient service in Cork. There has also been some outreach clinics to the West of Ireland from the NRH. A principle in health strategy is to deliver care close to the service user. There needs to be an economy of scale to services – small services run the risk of non-sustainability, lack of critical expertise and financial inefficiency. Service development should be based on data about population need.



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I trust this information is of assistance to you, but should you have any further queries please do not hesitate to contact me.

Yours sincerely

Anne Horgan
General Manager

References

1. <https://www.hse.ie/eng/services/publications/clinical-strategy-and-programmes/model-of-care-for-specialist-rehab-medicine.pdf>