

THE APPLICATION OF WOUND DRESSINGS AND NPWT FOR PATIENTS WITH DIABETIC FOOT ULCERS

L.N. Rubanov, I.A. Slavnikov, A.Y. Makanin, A.A. Chernov

State Healthcare Institute of "Gomel City Hospital N1, the regional centre of thermal injury, wound, infection and Reconstructive Surgery, Gomel, Republic of Belarus

Introduction :

Patients with diabetic foot ulcers present a special group in surgical practice. These patients often have complex issues presenting challenges requiring special attention during treatment^{1,2}.

Aim :

The aim was to define optimal treatment for patients suffering from diabetic foot ulcers treated in our surgical practice. Treatment pathways address both pre and post-surgical treatment.

Method :

We developed a treatment pathway that included the following:

- **Preoperative examination included:** Endocrinologists consultation; The profile of blood glucose during the day; Analysis of urine for glucose and acetone and level of glycosylated hemoglobin (HB A1).
- **Preoperative treatment:** General: Low carbohydrate diet; Insulin therapy not depending on the type of diabetes.
- **Pre and post-surgery local ulcer treatment:** *Hydrocolloid dressing or **NPWT, depending on ulcer condition.

CASE 1 :



Fig. 1:
Situation at the start, necrotic tissue covers the ulcer



Fig. 2:
After debridement **NPWT is used.



Fig. 3:
Wound bed after 3 days of **NPWT.



Fig. 4:
Graft application.



Fig. 5:
Ulcer is almost closed



Fig. 6:
Offloading with contact cast.

CASE 2 :



Fig. 7:
Situation at the start.



Fig. 8:
After 12 days of treatment



Fig. 9:
Grafting after 15 days of treatment



Fig. 10:
Situation at week 5



Fig. 11:
Ulcer is almost closed



Fig. 12:
Offloading using casting

Results :

After adequate wound bed preparation surgical treatment took place. The patients were mobilized early after surgical intervention. Offloading was performed with a device comprised of a semi-rigid removable non-windowed fiberglass cast. Fig. 6 and Fig. 12. Two typical cases are shown to demonstrate the treatment approach. Case 1: Fig. 1-6; Case 2: Fig. 7-12.

Conclusion:

The treatment pathway using dressings and **NPWT to prepare the patients for surgical intervention and effective offloading post-surgery was shown to improve patient outcomes.

References :

¹Udovichenko O, Galstyan G. Efficacy of removable casts in difficult to off-load diabetic foot ulcers: a comparative study. The Diabetic Foot; December 22, 2006.

²Armstrong DG, Lavery LA, Wu S, Boulton AJM. Evaluation of removable and irremovable cast walkers in healing of DFU, a randomized controlled trial. Diabetes Care 2005;28(3):551-554