

Introduction: patient, 90 years old, diabetic, has been insulin-dependent for 10 years, cardiopathic, foot sole necrosis on the right foot.

Diagnosis: Ischemic ulcer.

Surgical therapy: Revascularisation or amputation of the foot. The patient declines surgical treatment.

Medical therapy: Anticoagulants, antibiotics and local treatment with wound dressing

Treatment: Debridement with proteolytic enzymes and black MOMOSAN® polyurethane foam dressing 15x10x2cm

The medication is taken for three weeks every 2 to 3 days, then negative-pressure wound therapy is used for eight days with 80/90 mmHG. Further dressings are used with white MOMOSAN® polyurethane 15x10x1cm and changed every 3 to 4 days until the ulcer is completely healed.



Result: Healed after 102 days of treatment

Material used:

- proteolytic enzymes (different typologies).
- MOMOSAN® sterile black polyurethane dressing 15x10x2cm.
- MOMOSAN® sterile white polyurethane dressing 15x10x1cm.
- negative-pressure wound therapy (The.s.is.) – non-motorised NPWT system.

Discussion: Considering the criticality of this clinical case with correlated serious health problems, and the advanced age at which the patient declined the recommended surgical therapy, the result achieved is excellent in addition because the wound therapy was performed at home by a wound care specialist nurse.

When you consider that this extremely serious case, was resolved in a relatively short time and at moderate cost. Low cost materials of the newest generation and non-invasive techniques were used.

References: 1)EPUAP Treatment of Pressure Ulcers: Quick Reference Guide 2009. 2)European Wound Management Association (EWMA). Positionierungsdokument: Die topische Unterdruck bei der Wundbehandlung. London: MEP Ltd, 2007. 3) Armstrong DG, Lavery LA; Diabetic Foot Study Consortium. Negative pressure wound therapy after partial diabetic foot amputation: a multicentre, randomised controlled trial. Lancet. 2005 Nov 12;366(9498):1704-10); polyurethane medications is MOMOSAN.