Case study: Diabetic neuropathic ulcer

Contributed by William A. Lois, MD

Smith+Nephew

Collagenase SANTYL®
Ointment 250 units/gram

REGRANEX®
(becaplermin) gel 0.01%

Patient

The patient is a 56-year-old African American male with a malodorous, infected ulcer on his right foot. The patient visited the physician's office and was advised by the physician that the wound had become severely infected. The patient was a noncompliant and uncontrolled diabetic.

Wound presentation

The patient presented with a full-thickness wound covering approximately 50% of the plantar surface of the right foot. The wound consisted of extensive, oozing necrotic tissue, surrounded by edema and the presence of macerated slough. An observational diagnosis of necrotizing fasciitis was made (and later confirmed by lab results). No other symptoms related to the wound were reported by the patient and no prior wound care had been performed on the foot by the patient or any health care professional.

Treatment

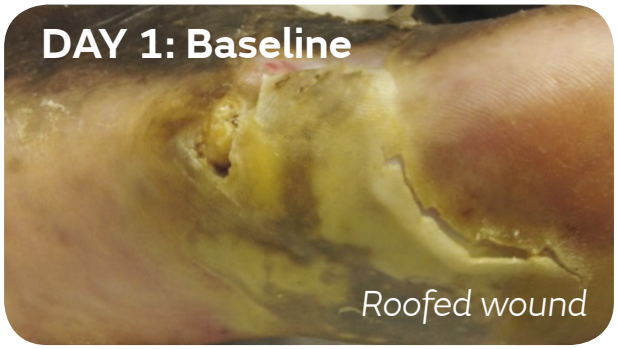
The unroofing of necrotic tissue was performed in the physician's office. The patient was immediately admitted to the hospital via the emergency room for further intervention. Treatment included: initiating IV antibiotics, performing a wide excisional debridement in the operating room and a bedside sharp debridement. SANTYL Ointment was initiated for enzymatic debridement for a period of time, followed by REGRANEX gel. The patient had ongoing office visits and sharp debridements in the form of paring of the wound edges, throughout the case. The patient was also referred to an endocrinologist for glycemic control. The patient was compliant with all home wound care and maintaining controlled glycemic levels.

Results

Enzymatic debridement with SANTYL Ointment for 61 days followed by approximately 109 days of REGRANEX gel, resulted in the complete closure of this highly complex wound.

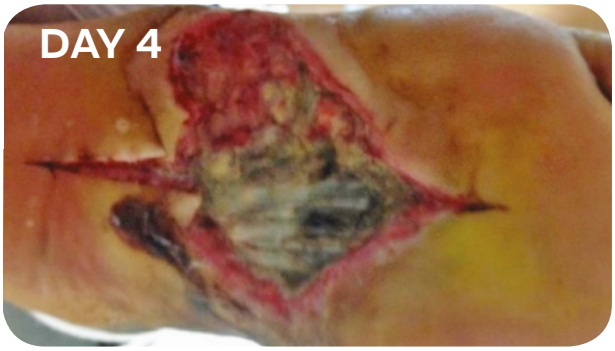
Individual results may vary.

Treatment

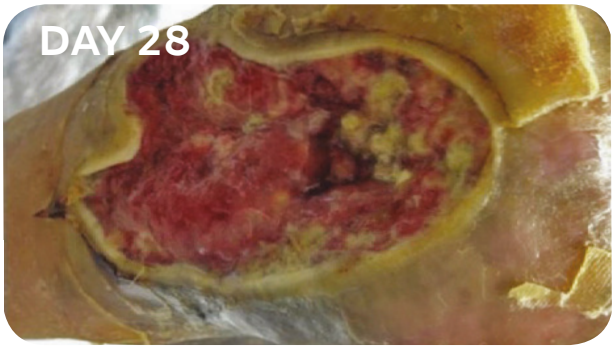


Days 1-4

- Wound unroofed in physician's office
- Remaining white area surrounding necrotic tissue is edema
- Macerated slough present Immediate admittance to hospital via emergency room
- Placed on IV antibiotics, glycemic control implemented
- Wide excisional debridement performed in operating room
- Subsequent bedside debridement performed
- Subcutaneous air in the plantar present confirming necrotizing fasciitis
- Blood glucose level confirmed polymicrobial dominant strain

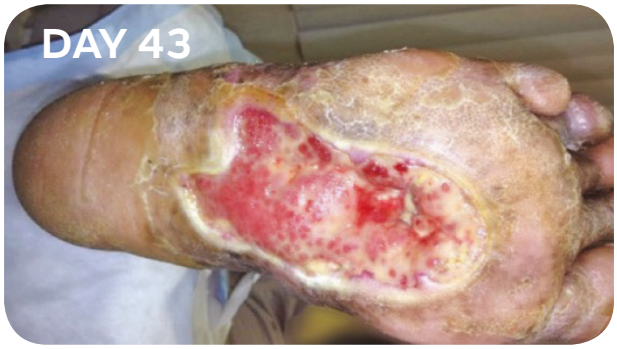


- Post-wide excisional and bedside debridements
- Wound measures 12.0cm x 10.0cm
- Daily application of SANTYL® Ointment initiated
- Discharged from hospital on day 10
- Instructed to maintain glycemic control
- Home wound care and offloading continued

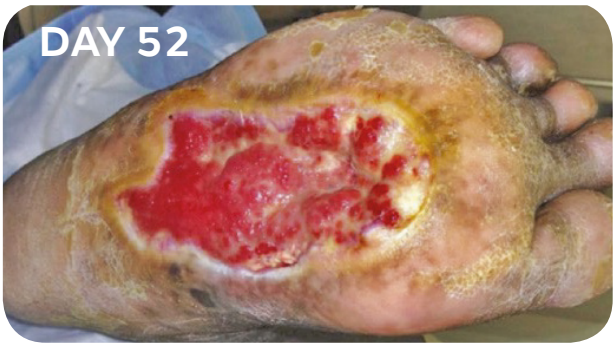


- First office visit approximately three weeks after hospital discharge; wound measurements not taken, appeared unchanged
- 40% reduction in slough, no edema present
- Granulation tissue replacing necrotic tissue
- Edges pared
- Daily application of SANTYL Ointment continued
- Home wound care and offloading continued

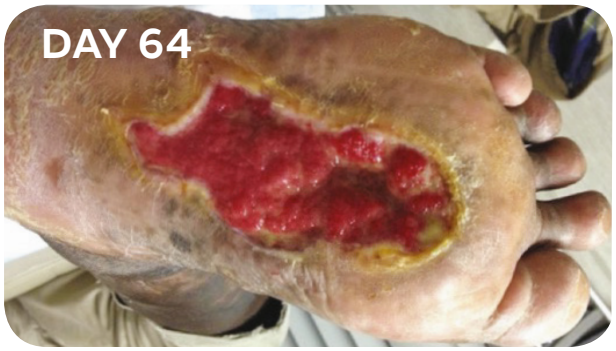
Treatment



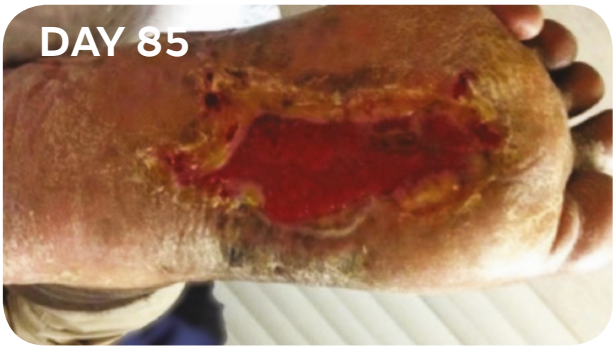
- Wound measures 11.0cm x 6.0cm
- Healthy granulation tissue present
- Reduction in slough; evidence of re-epithelialization
- Edges pared
- Daily application of SANTYL◊ Ointment continued
- Home wound care and offloading continued



- Wound measures 10.0cm x 6.0cm
- 75% granulation tissue present
- 25% necrotic tissue present
- Daily application of SANTYL Ointment continued
- Home wound care and offloading continued



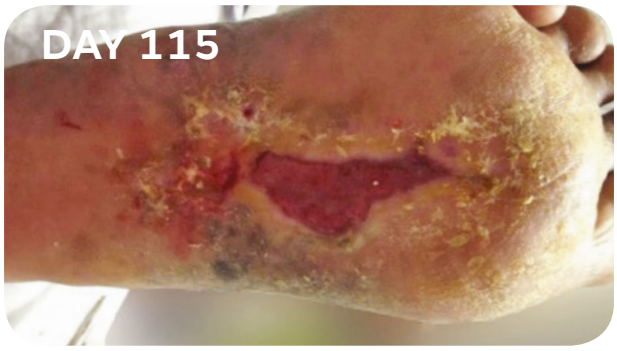
- Wound measures 10.0cm x 5.0cm
- 100% healthy granulation tissue present
- SANTYL Ointment discontinued
- Edges pared
- Daily application of REGRANEX◊ (becaplermin) gel, 0.01% with a moist dressing initiated
- Home wound care and offloading continued



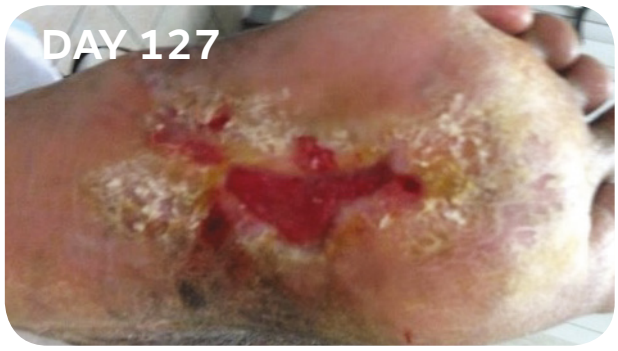
- Wound measures 8.0cm x 4.0cm
- Edges pared
- Daily application of REGRANEX gel continued
- Home wound care and offloading continued

Learn more

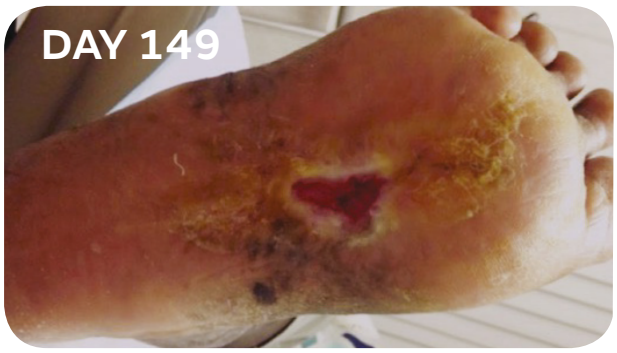
Treatment



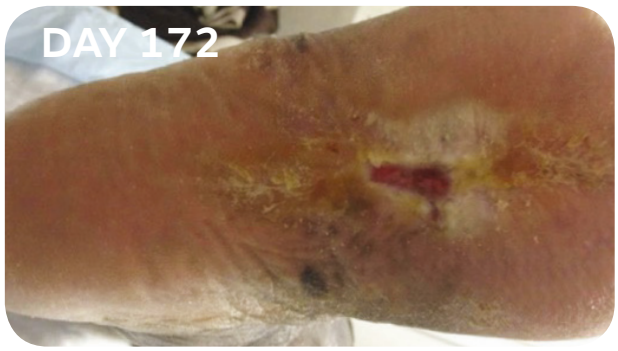
- Wound measures 8.0cm x 3.0cm
- Edges pared
- Daily application of REGRANEX◊ (becaplermin) gel, 0.01% continued
- Home wound care and offloading continued



- Wound measures 6.0cm x 3.0cm
- No further sharp debridement
- Daily application of REGRANEX gel continued
- Home wound care and offloading continued



- Wound measures 2.0cm x 1.5cm
- Daily application of REGRANEX gel continued
- Home wound care and offloading continued



- Wound measures 1.5cm x 0.8cm
- Patient ran out of REGRANEX gel following this visit
- Treatment switched to hydrogel and moist dressing only
- Patient did not return for final visit; informed physician of total wound closure via telephone call

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