Comprehensive Treatment of Plantar Diabetic Ulcer Including Use of Dermacyn™ Wound Care

MEDICAL HISTORY
Sixty-two year old male presented with a worsening diabetic ulcer overlying the plantar surface of the second and third metatarsal heads of the left foot. The patient stated that the lesion had been present for many years and had never healed completely despite ongoing medical care. Patient had an extensive history of poor glycemic control for many years and, on initial workup, had a blood glucose level >400 mg/dl. Cultures of this wound were positive for methicillin resistant Staphylococcus aureus (MRSA) and Pseudomonas aeruginosa; patient’s renal failure precluded treatment with vancomycin, the only agent to which both organisms were sensitive. A cerebrovascular accident in 2004 resulted in the patient’s inability to walk without a cane for stability. The patient was partially blind and unable to read.

PROTOCOL
Comprehensive care was initiated on 2005-12-08, and included the following elements:

- Flooding with Dermacyn™ Wound Care and soaking the foot in Dermacyn™ Wound Care for 30 minutes.
- Antimicrobial dressings and bandage were applied and secured with porous adhesive material rather than tape.
- Modified diet to include additional protein and reduced carbohydrate intake.
- Twice weekly clinic visits.

Because of his compromised gait, no effort was made to reduce pressure on the lesion via contact casting or unloading footwear.

RESULTS
After four (4) weeks of treatment the ulcer was reduced from approximately 22 mm in diameter to approximately 4 mm in diameter; at six (6) weeks of care the lesion was closed completely and the patient was discharged from service. Serial cultures demonstrated complete resolution of infection by the third week of treatment. The patient remained fully ambulatory and in poor glycemic control with blood glucose above 370 mg/dl for the six-week duration of care.

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