

Optimize Chronic Leg Ulcers Healing The Complex Care of Patient at Home Setting

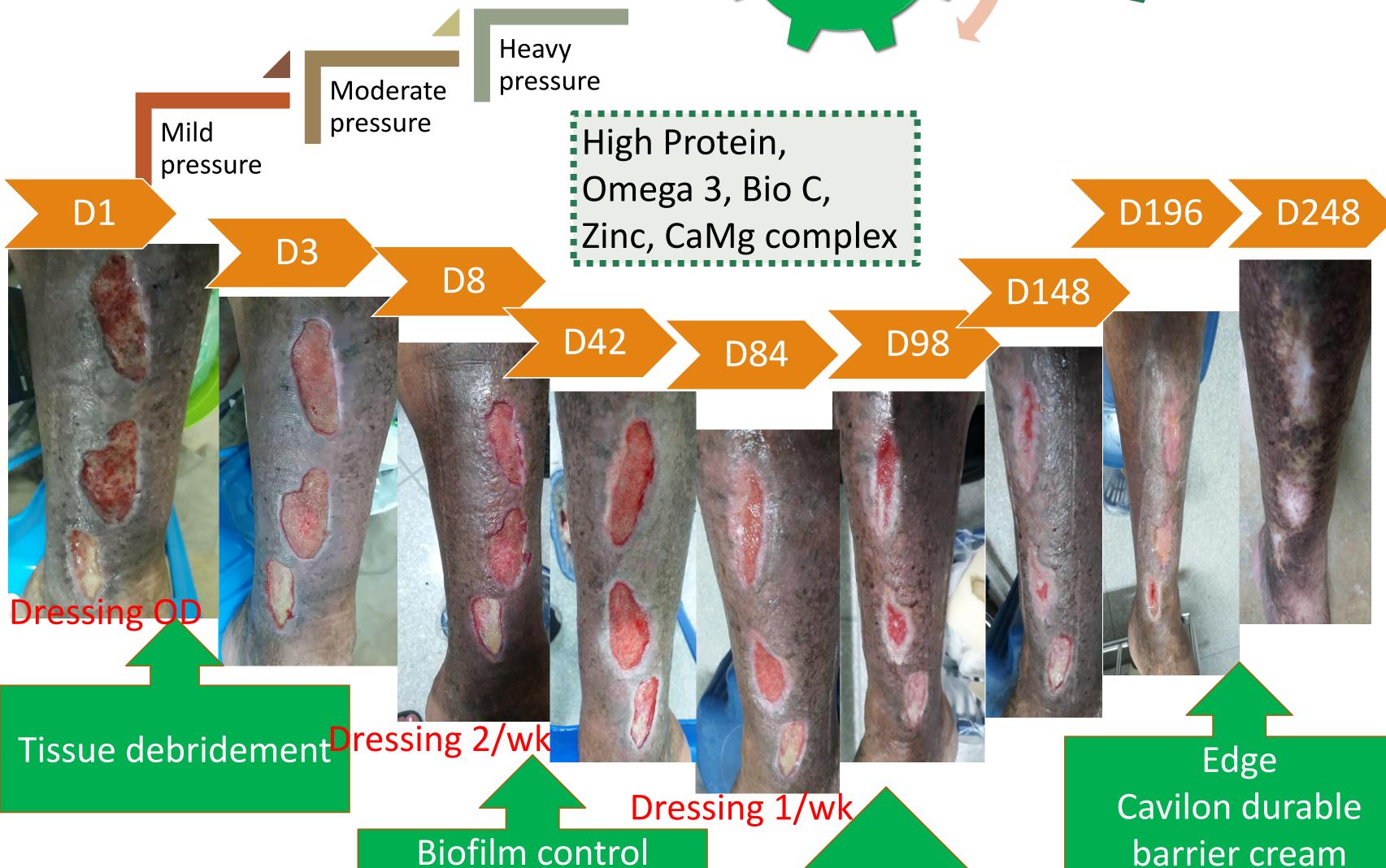
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A 57 years old male

risk factors: BMI 31.1, DM, HT, DLP (diet control), vegetarian, works at furniture fair all days.

Over 10 years suffer from chronic leg ulcers at home. March 2016 cellulitis left leg admitted 2 months, August 2016 recur again 3 ulcers at distal portion of left leg, ulcer bed red and covered with yellow fibrous tissue, yellowish exudate, thickened skin, purpuric, hyperpigmented, swelling, painless. He prefer to home treatment than operation.



Protosan solution

and Protosan gelX

Conclusion

The management of chronic leg ulcer requires complex and multidisciplinary care. Involves compression therapy to reduce venous hypertension, specialized dressings, and enhance the consistency nutrition support calories, protein, vitamins and minerals. Malnutrition is recognized as a major risk factor for wound chronicity, may alter the inflammatory response, collagen synthesis, and wound tensile strength, all of which are crucial for wound healing today and beyond.

- Hydrocolloid - Foam If moderate or heavy exudate

Moist wd healing

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Reference

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