



A successful limb salvage with advanced wound care in a patient with critical limb ischemia.

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Introduction:

Patients with Critical Limb Ischemia (CLI) and chronic wounds often present a significant challenge in terms of limb salvage.

In addition to control of infection, assuring adequate perfusion, and providing advanced wound care, modalities are often required to facilitate wound closure.

This case shows that the advanced wound care has demonstrated results in wound healing and limb salvage in patients with CLI.

Management:

The wound care team selected Topical oxygen and Hydrofiber Ag, Negative pressure wound therapy (NPWT), and Hydrogel to apply to the area of bone exposed for 2 months. The wound is still stable. The vascular surgeon attempted revascularization again but failed and discussed the possibility of amputation with the team and patient. The patient refused amputation. Our team continued dressing with NPWT and modern wound dressing for 4 months. The wound improved slightly. She can go back home to continue dressing with Topical oxygen and Hydrofiber Ag and Hydrogel every 2 days for 4 months.

Case presentation:

A 52-year-old diabetic female with HT, DLP, and ESRD on CAPD She had diagnosed with CLI post-Left BKA in 2019 and wet gangrene right foot post 1, 3 & 4th toe amputations on 06 June 2020 at another hospital. Then refer to Ramathibodi hospital. The angiogram revealed multifocal moderate to severe stenosis of the proximal to mid-ATA. On 20 September 2020, post-op PTA of ATA + PTA right leg with trans-metatarsal amputation of the right foot. She went back home to continue dressing. Then the wound had infection with cellulitis and developed a new wound at the heel of the shoe. She was admitted for ATB and wound debridement for three times the wound progression on half of the foot, exposing bone and tendon. Surgeon decided to consult the ET nurse for wound management.

Results:

Nevertheless, wound closure was eventually accomplished over a 10-month period using a variety of advanced wound care methods. She is still able to walk while using a plantar foot and an axillary crutch on her leg. Moreover, she can maintain a spiritual quality of life.

Discussion:

This case demonstrates the benefit of managing limb-threatening lesions with advanced wound care in an appropriate manner to achieve final wound closure and limb salvage.



1st visit Wound clinic



S/PTtransmetatarsal amputation



Wound at heel



Post debridement



Plan Revas again



Continue dressing



Healed wound

Reference:

Frykberg, R. G., O'Connor, R. M., Tallis, A., & Tierney, E. (2015). Limb salvage using advanced technologies: a case report. *International Wound Journal*, 12(1), 53-58. doi:<https://doi.org/10.1111/iwj.12050>

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