Diabetic Foot Rescue and foundation of a Comprehensive Diabetic Foot Care Unit in Santo Domingo de los Colorados in Ecuador (August 2017)

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Introduction

The utmost devastating diagnosis for patients with complicated diabetic foot ulcers is amputation. It reduces their life expectancy and generates higher mortality than cancer in a period of three to five years. It is also associated with increased health care costs.

Keywords: diabetic foot, infection, biofilm, amputation

Objective: To demonstrate that advanced wound management based on wound bed preparation and infection control promotes healing and reduces the risk of amputation in complicated diabetic foot cases.

Material and method

Clinical case. Observational, descriptive. 58-years-old male, long-term type 2 diabetes. Diagnosis of infected neuropathic ulcer on the right foot that compromises 3/4 of the foot plant. Presence of abscess and purulent secretion. Wagner III – University of Texas 3B. Difficult evolution, despite surgical debridement, multiple surgical cleaning, daily traditional wound care and a systemic antibiotic therapy. After 12 days of treatment and an obvious stagnation of the ulcer, the decision to amputate was made. While waiting on the ward, the treating physician hears about advanced wound management and decides to try it on this patient:

T	Devitalized tissue: 80 %
I	Inflammatory signs present
M	Moderate to high exudate serous-dense
E	Macerated, thick wound edges

Wound treatment every 72 hours. Cleaning, decontamination and control of bacterial biofilm with Polyhexanide-Betaine solution. Wound bed is covered with Polyhexanide-Betaine gel and foam dressing plus ionic silver alginate. Hyperoxygenated fatty acids are used on perilesional skin. Dressing fixation with semi-elastic bandage.

Results

After 72 hours dressing removal, with decreased devitalized tissue and abundant granulation tissue observed. Treating physician suspends amputation. There were 26 treatments in total. Healing was achieved within 75 days of treatment. This case as precedence, a little money and a great deal of goodwill lead to the foundation of the Integral Care Unit of Diabetic Foot in August

2017. Patients from all over Ecuador come to this center where a lot of diabetic feet have been rescued.

Conclusions

Feet had been amputated that had a chance of being saved. Advanced wound care has proven to be cost-effective in promoting healing and avoiding amputation. This success story managed to alarm people and to initiate changes that led to the foundation of the Integral Care Unit of Diabetic Foot in Santo Domingo.

Wound at the start of advanced healing

Healing No. 14

Closure of the ulcer -Healing No. 26