USE OF A DEHYDRATED AMNIOTIC MEMBRANE ALLOGRAFT AND OFF-LOADING TO HEAL DIABETIC FOOT ULCERS

William Peters, MD
Forrest General Wound Healing Center, Hattiesburg, MS

PURPOSE
This case series will demonstrate how four individuals with diabetic foot ulcers (DFUs) were treated with a dehydrated human amniotic membrane allograft (DAMA) in combination with off-loading to heal their wounds. An amniotic membrane provides a non-immunogenic structural matrix that contains collagen and growth factors. Neuropathic foot ulcerations, which can be a complication of diabetes, precede 85% of all non-traumatic lower extremity amputations. Treatment strategies using current modalities are essential to healing these complicated wounds. Wound care practitioners that remove pressure (off-load) while treating the DFUs with current topical advanced therapies are experiencing positive outcomes that lead to healing.

RESULTS
All 4 cases responded positively to DAMA. Patients were able to avoid additional surgery, and the wounds progressed to healing. Each of these patients had been treated with aggressive advanced wound care to the extent their underlying condition allowed, but were trending toward failure and amputation. Patients healed in an average of 6 weeks.

CASE 1
This is a 63 year old female with a Left Plantar DFU that presented to wound care clinic (WCC) on 6/12/14 with a wound measuring 4.0 cm x 0.3 cm x 0.1 cm. She was off-loaded with TCC and DAMA was applied on 6/23/14. The wound healed after 1 application in 1 week.

CASE 2
This is a 57 year old female with a Left great toe ulcer of over 1 year duration. DAMA and TCC were implemented on 6/19/14. The wound measured 0.8 cm x 5.3 cm x 0.4 cm. The patient received 7 tissue applications in 7 weeks. Healing was documented on 8/7/14.

CASE 3
This is a 52 year old male with a DFU of the heel who presented to WCC on 6/12/14. The wound measured 1.0 cm x 1.9 cm x 0.1 cm. He was off-loaded in a wheelchair and DAMA was initiated on 6/19/14. Patient received 7 tissue applications in 7 weeks. Healing was documented on 8/7/14.

CASE 4
This is a 46 year old female who was S/P a TMA and presented to WCC on 6/14/14. She was previously treated with a collagenase*** ointment. She was off-loaded in a wheelchair. DAMA was initiated on 6/19/14. The wound measured 2.3 cm x 5.5 cm x 0.1 cm. Patient received 8 applications in 9 weeks. Wound healing was documented on 8/17/14.

CONCLUSIONS
This case series abstraction that no the need for advanced topical wound & allografts such as DAMA to provide wound healing positively on DFUs that have failed other wound care treatments outside of the printed

METHODS
Four patients with diabetes and wounds that range in chronicity from 6 weeks to 1 year were treated with DAMA on a weekly basis. Wounds were cleansed with normal saline and debrided as necessary. Two patients were off-loaded with Roll on Total Contact Casting (TCC) System and the other two were off-loaded by adding wheelchairs for mobility.

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