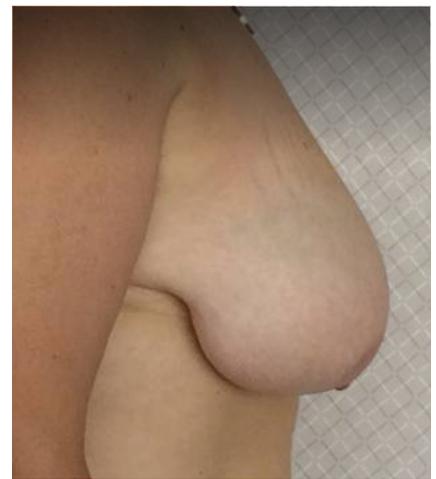
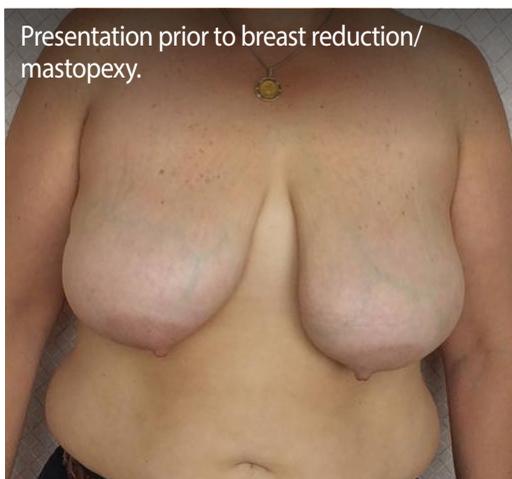


Case report: DermaClose application for wound dehiscence in breast surgery

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Case Report #37

Prior to application of DermaClose: A 46-year-old female underwent breast reduction/mastopexy and liposuction of the lateral chest wall. Two weeks after the surgery the incision on the left breast dehiscd due to poor wound healing as a result of chronic Epstein Barr virus with high viral load. Treatment prior to DermaClose included dressing changes for 2 days. The wound on the left breast measured 6 cm x 3 cm.



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Case Report #37

DermaClose application: One DermaClose device was applied to the left breast incision for high tension offload. The wound was closed primarily in the OR under sedation anesthesia. A second DermaClose device was applied to the right breast proactively, for high tension offload. This was performed to protect against the patient's poor wound healing ability. loban® was used to protect the skin under the anchors and a strip of Adaptic® was applied on the closed incision to protect the tissue from the tension line. The patient did not report postoperative pain.

DermaClose removal: After 6 days both DermaClose devices were removed in the office. The patient did not report any pain upon removal. Inflammation was not noted at the anchor sites.

Follow-up: The follow-up photography documents results four months after DermaClose application.

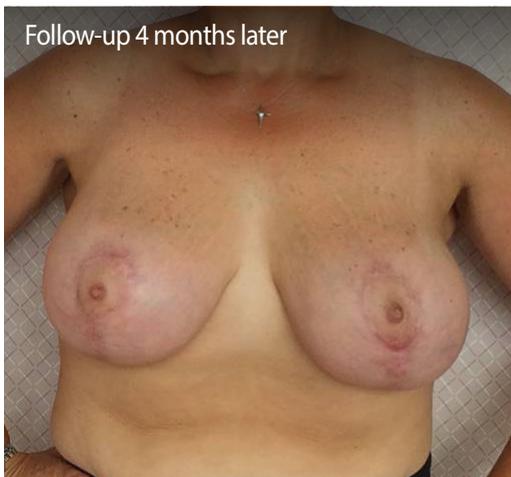
Conclusion: This case illustrates the successful use of DermaClose to accelerate and improve healing following dehiscence in breast surgery.



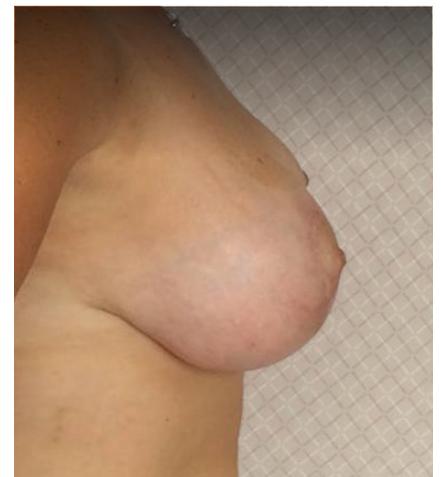
DermaClose after application in surgery



DermaClose prior to removal after 6 days



Follow-up 4 months later



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