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The patient is a 44 year old gentleman with a history of obesity, insulin dependent diabetes mellitus, MRSA, transverse myelitis and paraplegia who has suffered with multiple sacral and lower extremity pressure ulcers. He was treated in the local wound care center with local wound care, including debridements, wound VAC and dressing changes, for nearly two years. During this time, he also underwent split thickness skin grafting to the large 15x5cm right lower extremity wound which ultimately failed.

Upon initial plastic surgery consultation for definitive wound management, my recommendation was for optimization of the patient including improved nutrition, appropriate mattress/cushioning, evaluation and treatment of osteomyelitis, blood sugar control, and thorough wound debridement. These goals were accomplished in approximately two months.

At this point, the patient was taken to the operating room for excision of the large sacral pressure ulcer and bilateral gluteal flap closure, debridement of bilateral lower extremity wounds and placement of multiple DermaClose RC external tissue expanders. Of note, approximately 70% of the base of the large right lower extremity wound was the fibula bone without periosteum which would account for failure of the previously attempted skin graft. There was significant concern of possible limb loss. Four days later he was returned to the OR for closure of the left lower extremity wound and partial closure of the proximal aspect of the right lower extremity wound with reapplication of the DermaClose device to the distal aspect. This device remained in place for an additional seven days at which time the patient returned to the OR for removal of the DermaClose and closure of the remainder of the wound. At 60 day follow up wounds continue to be closed and healing well.

Left Lateral Wound



1/29/13 Left leg wound 7.5 x 3.5cm



2/5/13 Initial application



2/8/13 Wound closure on day #3

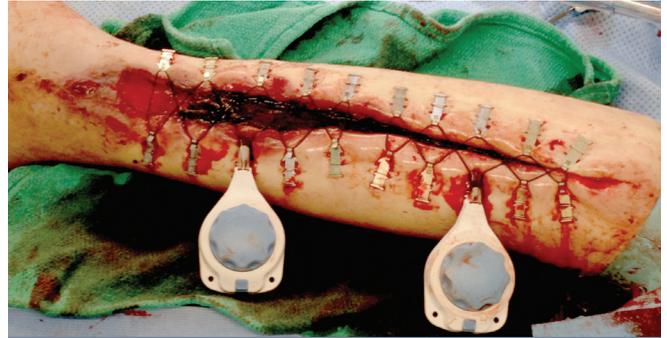


3/25/13 Six weeks post-op

Right Lateral Wound



1/29/13 Right leg wound 27 x 4.5cm with exposed lateral malleolus



2/5/13 Initial application



2/15/13 Wound closure on day #10



3/25/13 Six weeks post-op