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Patient, 38 yr old male presented with cramp in his lower right leg. Further analysis revealed this to be 'Deep Vein Thrombosis' (DVT) which resulted in Compartment Syndrome necessitating a Fasciotomy of the lower right leg. The resulting wound measured, 35cm x 20cm at the widest point [Fig 1].

It was decided to use the DermaClose® RC device to assist in closing the wound. Due to the size of the wound, eight DermaClose devices were utilized [Fig 2]. Each of the DermaClose tension controllers was attached to six skin anchors. Skin anchors were placed approximately 1.5cm back from the wound edge and 1.5cm apart from each other. Skin anchors were secured in place using a standard skin stapler.



Fig 1 - Day One

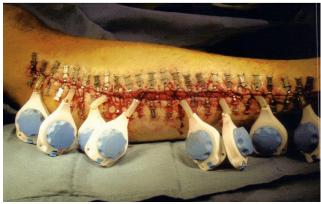


Fig 3 - Day Six



Fig 2 - Day One



Fig 4 - Day Nine

The DermaClose tension controller was attached to the skin anchors using a shoe-lace technique. This technique ensures an even distribution of pulling force across all of the skin anchors. Once attached, each tension controller was secured to the patient.

Once set, each tension controller exerts a continuous pulling force of 1.2kg on the tissue adjacent to the wound. There is no need for further adjustment or retightening. The wound was dressed in the usual fashion.

After six days, the patient was brought back to the OR and the dressings removed. The proximal and distal wound edges had approximated leaving a 10cm x 2cm open wound [Fig 3].

The DermaClose RC devices were repositioned and secured. The wound was dressed in the usual fashion and the patient returned to the OR three days later. The wound edges had fully approximated and the DermaClose devices were removed. A 2-0 monofilament nylon was applied in order to ensure full approximation and closure [Fig 4].





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