

ABSTRACT: The Symposium on Advanced Wound Care (SAWC), Dallas, TX, April 2011

Wound Clinic 22.5KHz Powered Wound Debridement Increases Options for Limb Salvage: Decrease Cost is advantageous.

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Problem

New technologies, pneumatic compression for arterial disease and hyperbaric oxygen to name two, are increasing wound clinic referrals for “limb salvage“. Patients seeking a second opinion for limb amputation frequently self refer to wound clinics. Attempting limb salvage for chronic complex wounds, often in patients with nonreconstructable arterial disease, taxes patient and clinic resources.

Decisions to salvage, risk vs. benefit, limb vs. life, are difficult. Costly operating rooms for debridement and closure seem poor choices when amputation risk is $> / = 50\%$. Ultrasonic frequency powered debridement of limbs referred for amputation is a practical first step for limb salvage.(1,2)

Does “Let’s give it a college try,” with immediate powered debridement “and see what happens” temporize an often tense clinical situation so that amputation can be avoided?

Methods

22.5KHz powered debridement(*) was used in four patients referred for limb salvage with complex limb threatening wounds. Arterial insufficiency and multiple comorbidities, particularly venous insufficiency, were present.

Results

Photos document therapy and decision making. Three wounds healed, one patient died of multiple medical problems having avoided amputation. Costs are discussed.

Summary

22.5KHz powered debridement appears to decrease amputation in patients referred for “limb salvage.”

*SonicOne®, Misonix Inc., Farmingdale, NY

References

1. Veith, FJ, Gupta, SK et al, “Progress in limb salvage by reconstructive arterial surgery combined with new or improved adjunctive procedures”, *Ann Surg.* 1981 October; 194(4): 386–401.
2. Dormandy, J, Heeck, L, Vig, S, “Major amputations: clinical patterns and predictors”, *Semin Vasc Surg.* 1999 Jun;12(2):154-61.