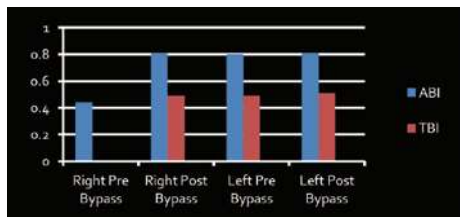


The Use of Topical Wound Oxygen (TWO₂) in a Complicated Acute Venous Embolism and Thrombosis of the Lower Extremity

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A 66 yr/o Male underwent a Femoral-Popliteal Bypass for a non healing right dorsal foot wound. Eight days following the procedure, the patient developed right lower extremity thrombosis resulting in the formation of deep sub dermal eschars. The patient was admitted for leucocytosis and wound management.

PMH: PVD, HTN, Obstructive Chronic Bronchitis
Smoking: 1 PPD / 40 pack year hx



	Right	Pre Bypass	Post Bypass S/P 2 months
ABI		.44	.81
TBI		0.0	.49

Admission: Hospital Course: x 1 week (WBC 14.2)
IV antibiotics: Zosyn (3.375 gms IV q 6 hrs) x 6 days
C&S: Staph aureus (negative MRSA)
X-rays: negative
Discharge: Amoxicillin (250 gms qid x 14 days)
WBC: 6.7 / Sed Rate 20 / CRP 1.5



TIMELINE

S/P 3 weeks TWO₂ Treatments
90 min/BID following Discharge

BID Santyl Dressings multiple wounds dorsum, medial and lateral ankles, heel *various stages and levels

S/P 6 weeks TWO₂ Treatments 90 min/BID

Anticoagulation: 7.5 mg Warfarin x 30 days

S/P 10 weeks TWO₂ Treatments 90 min/BID

Anticoagulation: 5.0 mg Warfarin x 30 days

S/P 16 weeks TWO₂ Treatments 90 min/BID
Fem-Pop bypass: patent

Conclusion: TWO₂ in conjunction with Santyl dressings proved to be very effective in this very unique case study and a viable option in treatment of ischemic wounds.