

Wound rescue with copper dressings after everything else failed

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58-Year-Old Female:

- Systemic Lupus Erythematosus (SLE) since 2004
- Hypertension
- Hyperthyroidism

Hospitalized with a minor superficial wound with an area of ~ 4 cm² in diameter



Eventually hospitalized for 8 months, during which the wound increased in size to more than 300 cm² in diameter



The wound increased in size despite being treated with:

- OR debridement of necrotic tissue;
- Systemic and local antibiotics administration;
- Immunodepression treatment;
- Steroid treatment;
- Negative Pressure Wound Therapy;
- Pressure chamber treatment;
- Two skin grafts after escharotomy;
- Application of a variety of antimicrobial wound dressings (silver and honey dressings); and
- Wound washes

Initial Hospitalization	One month after hospitalization	Following OR debridement	Saline Dressing & Afenide Treatment	Pressure chamber & OR Debridement	NPWT	
D0	D39	D62	D76	D92	D93	
3 Days after NPWT	Debridement, Skin Graft, NPWT	Graft cells not absorbed	3 weeks of Pressure Chamber	NPWT, & 2 nd Skin Graft	4 weeks after 2 nd Skin Graft	Flaminal & Aquacel Dressings
D96	D110	D116	D162	D184	D220	D223

Prior to amputation below the knee, it was decided to try Copper Wound Dressings (COD)

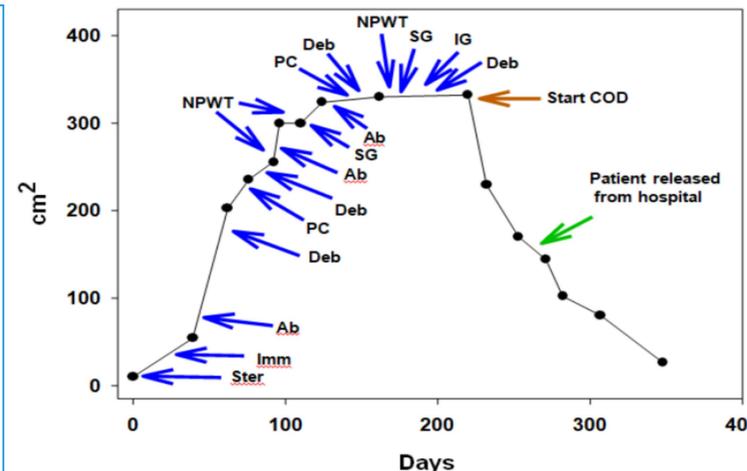


3 months



6 months

COD Treatment



Time plot showing the wound area. The various treatments conducted are depicted. The COD treatment continued also after the patient was released home in the wound care clinic.
 Ster: Steroid treatment; Imm: Immunodepression treatment; Ab: Antibiotic treatment; Deb: Debridement; PC: Pressure chamber treatment; NPWT: Negative pressure wound therapy; SG: Skin grafting; IG: Immunoglobulin treatment; COD: Copper dressings.

Resolution of the wound progression, subsequent granulation tissue formation, epithelialization, wound healing and almost complete wound closure - was achieved only after treatment with copper impregnated wound dressings.

Conclusion: This case strongly supports the potential role of copper in the healing process of hard-to-heal wounds.