

## Introduction

Large post-surgical wounds can keep individuals from working and caring for their families for weeks or even months. The money lost from such wounds can be financially crippling. The longer a wound remains open increases the risk for wound infection and further absence from work and family obligations.

A 55-year-old NIDDM female was admitted to the wound care center with a large right breast wound that was status-post incision and drainage of abscess with sharp excisional debridement down to the level of muscle and fascia.

Her wound measured 19.5cm x 6cm x 4cm upon initial visit.



One week s/p OR wound debridement

## Method

- Negative pressure wound therapy (NPWT) had been initiated prior to hospital discharge
- Dressing changes of oxidized regenerated cellulose (ORC)/collagen silver dressings to the deepest portions of the wound and NPWT were performed in the wound care clinic three times weekly
- Following four weeks of ORC and NPWT the wound measurements were 15cm x 4cm x 0.4cm. The following week the patient was taken to the OR for autologous split thickness skin grafting (STSG) by the wound care center's general surgeon



Two weeks s/p OR debridement. Wound with significant pockets of depth at 12 o'clock and 3 o'clock.



Two weeks s/p OR debridement - ORC/collagen silver dressings being tucked into deeper portions of wound.

## Results

- Prior to STSG, the patient's wound decreased in surface area by 51% and the depth decreased from 4cm to 0.4cm
- Patient was able to return to work without restrictions two weeks after surgery. Patient's wound achieved full closure four weeks post-STSG



Four weeks s/p OR debridement.



Five weeks s/p OR debridement. Note pockets of wound depth are now gone. Patient taken for STSG the following week.



One week s/p STSG

## Conclusion

Incorporating ORC/collagen silver dressings and NPWT served as a springboard so that the patient could achieve more expeditious closure via STSG.

Patient's wound achieved full closure four weeks status post-STSG and she was able to return to work without restrictions.

Providing wound closure in a swift manner is essential for those who must go back to work to support their families. Oftentimes it is necessary to combine advanced wound care modalities and surgical closure to achieve this.



Complete wound closure via STSG