NATROX® O_2

CASE STUDY

Combination Therapy for Non-Healing VLU

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HISTORY

92-year-old male presented with a 3-year history of a painful, non-healing left medial lower leg venous ulcer (VLU) measuring 6.0 cm x 3.7 cm x 0.35 cm. Past medical history includes congestive heart failure (CHF), hypertension (HTN), peripheral vascular disease, chronic cellutitis, and a prior hospitalization for left lower extremity abcess. Past surgical history includes vein ligation. HTN, CHF, and edema managed with diuretics. Upon initial evaluation, the patient reported pain at 8 on 0-10 scale with 10 being the worst possible pain.

PREVIOUS MANAGEMENT

Previous wound therapies included standard of care with sharp debridement and compression wraps. Other advanced wound treatments included collagen dressings, silver dressings, and amniotic tissue grafts.

NATROX® O_2

After two amniotic tissue graft applications, the wound failed to enter into a healing trajectory. Therefore, it was decided to initiate NATROX O_2 continuous topical oxygen therapy (cTOT) in conjunction with the amniotic tissue graft to improve tissue oxygenation and aid in wound closure. Following 7 weeks of cTOT and amniotic tissue graft combination therapy, the wound size decreased to 4.4 cm x 2.3 cm x 0.1 cm. Patient received a total of 10 weeks combination therapy. At week 11, amniotic tissue grafts were discontinued, NATROX O_2 cTOT was continued, and the patient reported a significant reduction in pain.

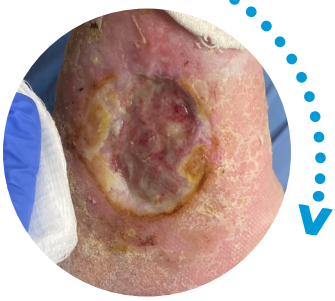
Total wound closure was attained at 19 weeks and pain level was reported as 0.

CONCLUSION

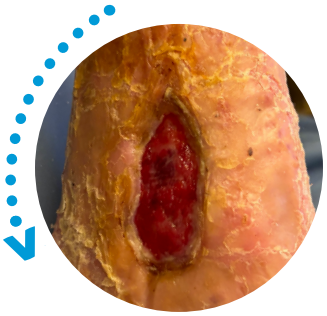
Despite the many advanced wound care treatments available, wound healing was difficult to achieve with this patient's 3-year history of a VLU. The author believes that tandem combination therapy with NATROX O_2 and amniotic tissue grafts had a synergistic effect on wound healing in this patient. Furthermore, the patient experienced complete elimination of pain during therapy with NATROX O_2.

With looming limitations in the number of cellular, acellular, and matrix-like product (CAMP) applications permitted under various policies, healthcare practitioners are seeking effective synergistic therapies to support improved patient outcomes across the continuum of care.

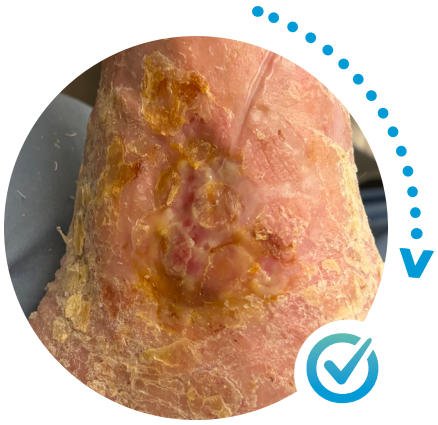
NATROX O_2 proved to be an effective adjunctive therapy when used in combination with CAMPs in this case study, improving the speed of healing, as well as the complete elimination of pain.



1 week of NATROX® O_2
Wound size:
5.5 cm x 3.0 cm x 0.2 cm



7 weeks of NATROX® O_2
Wound size:
4.4 cm x 2.3 cm x 0.1 cm



19 weeks of NATROX® O_2
Complete wound closure

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