Early Intervention to Avoid Amputation

Diabetic Foot Ulcer

Gillian Hawthorne and Brian Davidson
Specialist Podiatrists, Podiatry Department, Edinburgh

Introduction
This case study shows the use of bagged larvae on a patient with a chronic diabetic foot wound (right bunion and right first toe).

History
The patient was an 89-year-old female with Type 2 Diabetes (insulin dependent) who presented with ulceration on her bunion and right first toe. The origin was unknown, but possibly footwear related. The foot presented with secondary complications of poor circulation and neuropathy. The wound was chronic in nature when first presented, and had been treated by various HCPs utilising many different products. The patient was referred to the diabetic foot clinic and for vascular assessment at the New Royal Infirmary, Edinburgh (NRIE).

A treatment option of a below knee amputation was recommended but due to the patient's overall circumstances this was not undertaken.

Treatment
Treatment options were discussed with the patient, family and care home staff. A decision was made to apply bagged larvae, which was ordered and applied by the podiatrists, covered with a secondary dressing and left in situ for 5 days. The nurses in the care home changed outer dressings daily. The bagged larvae were removed, and any necessary sharp debridement carried out by the Podiatrists.

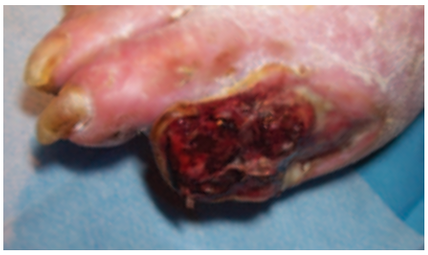
Due to the nature of the wound, the area required rehydration with Purilon® gel before the second application of bagged larvae. The second application was as before, again requiring sharp debridement after removal of the bagged larvae.

Outcome
A vast improvement in the wound was noted; however a small percentage of slough remained. Sharp debridement in conjunction with the bagged larvae contributed to the overall improvement in the wound.

On reflection it was felt that the patient would have benefited from this type of intervention at an earlier date. This form of treatment will now be considered at an earlier stage.

01: Day 1

02: Day 5



03: Day 16