Case study: Diabetic foot ulcer in patient with chronic venous insufficiency and tinea corporis

SELF-ADAPTIVE WOUND DRESSING CLINICAL RESULTS

Patient:

55-year-old male with diabetic ulcer on the right lateral malleolus. Patient is non-insulin dependent diabetic with HIV, hepatitis C, venous insufficiency and chronic lower leg edema. At presentation, the wound area was covered with thick, scaly tinea plaque, and wound drainage was scant.

A1. Day 0.

Minimally draining diabetic foot ulcer located over the right lateral malleolus and covered with thick tinea plaque. Wound edges are inflamed and rolled under.



A2. Day 0.

Wound cleansed with Dakin's solution, then aseptic debridement of fungal overgrowth with a #10 blade and umbrella burr. Naftifin hydrochloride cream 2% was applied to the legs and feet, followed by the self-adaptive wound dressing.



B. **Day 14.**

Wound edge epibole is resolved and edges are flattened, moist and granulating.



Reference:

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