Methods

The podiatry department at Salford Royal Hospital completed a two week evaluation using the new mini, portable NPWT unit. The patient was chosen to have NPWT as part of the structured, dynamic care pathway published by Chadwick et al in 2009.  

NPWT was applied to a chronic diabetic foot ulcer following hydro-surgical debridement of the wound bed. The therapy would continue until healthy granulation was present over the entire wound bed, or there was a reduction in wound area and exudate levels. Following removal of the NPWT, a nanocrystalline silver barrier dressing was applied as dictated by the care pathway.

The patient was a 41 year old female, with a history of Type 1 diabetes, neuropathy and renal transplant in 2011.

The wound was situated to the lateral aspect of the calcaneum (left foot) and had been present for three months. Wound dimensions were 2.8cm length x 1.2cm width x 1cm depth (area = 3.36cm²; volume = 3.36cm³). There was 20% slough and 80% granulation tissue to the wound bed.
Discussion / Conclusion

The VENTURI® MiNO NPWT system has demonstrated effective clinical results, as part of a dynamic care pathway, and has contributed to the healing of this chronic diabetic foot ulcer, which in turn reduces the risk of infection and other complications that are so often experienced by diabetic foot ulcer patients.

In addition to the positive clinical results, the patient remained fully mobile and independent throughout their treatment. The pump was discreet and extremely portable with minimal interruption to her life.

This evaluation has identified not only the clinical benefits of this new mini portable NPWT, but the benefits to those patients who are independent. Maintaining this independence is vital to ensure life can continue as normal as possible for both the patient and their family.

References