Use of V.A.C. VERAFLO<sup>™</sup> Therapy with V.A.C. VERAFLO CLEANSE CHOICE<sup>™</sup> Dressing for Managing a Post-Operative Abdominal Wound with Infection

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#### **Case Presentation**

A 50-year-old female presented with an infected wound along with purulent discharge in the abdomen (**Figure 1**). She underwent routine surgery for the removal of parietal wall swelling in a local nursing home under general anesthesia about 10 days prior. On examination, there was visible purulent discharge through the suture line with evidence of cellulitis in form of redness, swelling and tenderness extending several centimeters from the suture line. Removal of a few sutures showed free flowing, foul smelling pus and the exposed wound bed was covered with slough. The extent of inflammation suggested extensive areas of parietal wall suppuration, which could not have been adequately drained without anesthesia.

### **Management and Outcome**

The patient underwent debridement in the operating room (OR) under anesthesia. There was extensive putrid suppuration in the subcutaneous space on the anterior abdominal wall involving the left iliac, left lumber and adjoining umbilical area along with sloughing of the cavity walls, however, the fascia was intact. Pus was drained, thorough debridement was performed, and the cavity irrigated with copious amounts of saline. Given the dimensions and complexity of the wound, V.A.C. VERAFLO<sup>™</sup> Therapy using V.A.C. VERAFLO CLEANSE CHOICE<sup>™</sup> Dressing was considered for the wound management along with the antibiotic support. Normal saline (20 ml) was instilled with a 10-minute dwell time, followed by 4 hours of -125 mmHg negative pressure. After three days, the wound showed considerable improvement in the form of healthy granulation tissue and considerably reduced cavity size (**Figure 2**). The patient underwent a second debridement under anesthesia followed by application of second V.A.C. VERAFLO CLEANSE CHOICE<sup>™</sup> Dressing (**Figure 3**). The wound underwent a total of 4 V.A.C. VERAFLO CLEANSE CHOICE<sup>™</sup> Dressing changes over 12-day treatment period with application of each dressing for a duration of three days.

Partial secondary wound closure was initiated after the third dressing change (**Figure 4**) as the wound demonstrated sufficient healthy granulation tissue and progressive reduction in the wound size. After the fourth dressing change (**Figure 5**), the wound was prepared for closure using sutures, and surgical drain was applied. Future course was uneventful. The drain was subsequently removed followed by the removal of sutures. The wound healed without any complications (**Figure 6**). The histopathology examination for the excised swelling revealed a lipoma.



Figure1. Wound at presentation



Figure 2. Wound after first V.A.C. VERAFLO CLEANSE CHOICE™ Dressing change



Figure 3. Wound after second V.A.C. VERAFLO CLEANSE CHOICE™ Dressing change



Figure 4. Wound after third V.A.C. VERAFLO CLEANSE CHOICE™ Dressing change



Figure 5. Wound after fourth V.A.C. VERAFLO CLEANSE CHOICE™ Dressing change



Figure 6. Wound at follow up

Patient data and photos courtesy of Dr. Ashok Tandon, Jaipur Golden Hospital, New Delhi

NOTE: As with any case study, the results and outcomes should not be interpreted as a guarantee or warranty of similar results. Individual results may vary, depending on the patient's circumstances and condition.

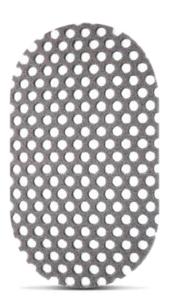
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### After only 4 dressing changes...

V.A.C. VERAFLO<sup>™</sup> Therapy with V.A.C. VERA-FLO CLEANSE CHOICE<sup>™</sup> Dressing helped remove thick exudate (such as fibrin and slough) and stimulate granulation tissue development for visible results after four dressing changes.<sup>1</sup>



Dwell time: 10 minutes

NPWT time: 2.5 hours at -125mmHg

Solution: Prontosan<sup>®</sup> Solution (30 mL)

78-year-old male patient with infected heel wound. Comorbidities included diabetes mellitus, neurological disorder and the patient was bedridden for more than 6 months. Conservative debridement was performed at the bedside, and oral antibiotics were initiated.



Wound at presentation.



Wound after 4 V.A.C. VERAFLO CLEANSE CHOICE™ Dressing changes.

## What can V.A.C. VERAFLO<sup>™</sup> Therapy with V.A.C. VERAFLO CLEANSE CHOICE<sup>™</sup> Dressing do for your patient's wound?

For more information, please contact your local representative.

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1. V.A.C. VERAFLO<sup>™</sup> Therapy with V.A.C. VERAFLO CLEANSE CHOICE<sup>™</sup> Dressing use in an infected wound. Submitted by Dr. Tushar Thorat, Consultant Plastic Surgeon, Sir H. N. Reliance Foundation Hospital, Mumbai

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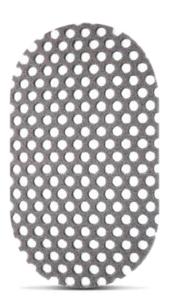
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### After only 3 dressing changes...

V.A.C. VERAFLO<sup>™</sup> Therapy with V.A.C. VERA-FLO CLEANSE CHOICE<sup>™</sup> Dressing was able to help **SOFTEN**, **SEPARATE** and **SOLUBILIZE** non-viable tissue and **STIMULATE GRANULA-TION** through repeated wound cleansing and negative pressure cycles.<sup>1</sup>



Dwell time: **10 minutes** 

NPWT time: 2.5 hours at -125mmHg

Solution: Prontosan<sup>®</sup> Solution

87-year-old male patient with sacral pressure sore. Comorbidities included diabetes mellitus for which the patient was on insulin therapy and manifested altered mental status. Surgical debridement was performed, and intravenous antibiotics were administered.



Wound at presentation.



Wound after 3 V.A.C. VERAFLO CLEANSE CHOICE™ Dressing changes.

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1. V.A.C. VERAFLO™ Therapy with V.A.C. VERAFLO CLEANSE CHOICE™ Dressing use in a pressure sore. Submitted by Dr. Deepak M Desai, Consultant Surgeon, Hinduja Healthcare, Mumbai

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