

**SKIN TEAR TREATMENT WITH NEGATIVE PRESSURE WOUND THERAPY, POSSIBILITY OR NOT?**

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**Aim:** A 55 year old female patient was admitted to the Plastic Surgery ward presenting a deep skin tear on the lower left leg with extensive tissue loss penetrating as deep as the fascia of the underlying muscle. The patient's skin quality had degraded due to years of corticoïd therapy. In order to prepare the wound for surgical closure with a skin graft at a later stage effective measures of WBP (Wound Bed Preparation) were necessary.

**Methods:** The wound was treated with gauze based NPWT (Negative Pressure Wound Therapy). Negative pressure was set at – 130 mmHg.

Dressing changes were performed 2 times weekly.

The fragile skin surrounding the wound was protected from possible damage at dressing removal with strips of soft silicone dressing 1.5-2 cm in width.

The polyurethane dressing sealing the wound for NPWT application overlapped intact skin past the soft silicone dressing strips for 1 cm.

**Results:** NPWT was applied without secondary damage to the surrounding skin of the patient's wound. Two weeks after starting NPWT the wound bed was healthy and granulating and 1 week later the wound was successfully closed with an autograft.

**Conclusions:** Over the past decennium NPWT has become increasingly important as a means of WBP. This case proves that application of NPWT in patients with compromised skin quality due to corticoïd therapy is a possibility thanks to skin protection with a soft silicone dressing.