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Leg Stasis Ulcer

Dec 2007



Patient History

Seven attempts to top fuse ankle due to severe rheumatoid Arthritis. At Dec 2007, foreleg massively swollen /discolored. Lesion draining, highly odiferous and full of eshcar/ significant pain. Leg scheduled for amputation Jan 31 2008.

Six weeks of Theralase laser therapy and ulcer stopped lea odorless and evident margination healing. Edema reduced. painful ischemia dissipated. Amputation cancelled.

Jan 2008



Infected Wound



48 year old male suffered a tibial fracture due to a severe fall onto his extended left leg. The injury resulted in approximately 3" tibial plateau crush injury, with a resultant spiral fracture to the talus . This was plated and pinned . The sutures unfortunately split from ankle to 5" above the patella into the femoral region. Healing was non-responsive and required a suction dressing in attempt to assist healing through negative pressure. The wound became infected . and laser therapy was instituted. The anterior tibia was necrotic over the remaining open wound and required further osseous debridement. This resulted in skin graft and further suppuration over the graph site .Laser was reinstated and the healing progressed as viewed. The patient is now weight bearing and fully ambulatory ,with a small persistent area of non closure.which continues to heal.



Liver Transplant- suture healing

- outcome after 7 days

