



DERMATOLOGICAL SURGERY

## **SURGICAL APPROACH OF A PATIENT WITH VENOUS ULCER AND MULTIPLE COMORBIDITIES.**

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**Background:** Chronic venous ulcer is a very common vascular pathology with its prevalence increasing with age and gender type (cca. 15% men, 40% women), characterized by high recurrency, pain, low quality of life and significant healthcare costs with venous insufficiency representing one of the principal causes. The objective of this article is to present the case of a female patient, 59 y/o, with total hip replacement (1987), stroke (2010) and venous ulcer of the right calf (2010) with continuous aggravation, despite of topical and systemic treatments, leading to a surgical approach.

**Observation:** The patient got admitted in the hospital with a circumferential ulceration, on the inferior 2/3 of the right calf, local pain, edema and serosanguineous secretions. Paraclinical tests attested the absence of any microbial involvement, due to anterior systemic antibiotic treatment. Internal Medicine and Orthopedic specialists recommended the surgical approach. Ulcerous coverage was made by using medium split-thickness skin grafts, harvested with the dermatome from the lower thigh (2-3 mm thickness, 8x20 cm surface), furthermore, graft meshing machine was used to increase the surface (4:1 ratio). Peripheral staples and separate sutures and central staples were used to secure the graft. Postoperative treatment consisted of systemic antibiotics, anticoagulants, NSAIDs, PPI, probiotics and local antiseptic, antibiotic and epithelizing ointments, non-medicated ointment dressings and bandages. One month after patient's discharge, the coverage of the graft was 100% (int. 92%) and restitutio ad integrum of the donor site.

**Key message:** Interdisciplinary approach of venous ulcers corroborates various treatment options regardless the initial medical or surgical approach, with helping tools that conduct to better solutions for patient's health and quality of life. To conclude, surgical approach should





be considered by dermatologists in a self or interdisciplinary manner, especially in cases with dead-end medical treatments.

