

WOUND HEALING

TREATMENT OF CHRONIC VENOUS ULCERS OF LOWER MEMBERS WITH AUTOLOGOUS PLATELET-RICH PLASMA.

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Introduction: The presence of chronic venous ulcers (CVU) of the lower limbs represents a therapeutic challenge. This has led in recent years to develop therapeutic strategies to promote healing.

Objectives: To evaluate the benefits, safety, feasibility and adverse effects (AE) of treatment with autologous RPP in suspension (TPRP) and its comparison with conventional treatment (CT).

Methods: Prospective pilot study of therapeutic intervention in 5 CVU of patients that met the inclusion criteria established. During the first 3 months, all received CT consisting of advanced wound healing. Those who did not cure completely received TRPP in the form of weekly injections of RPP suspension for 3 months. Weekly evaluation was carried out, until the study was completed or completed, considering: AE, wound evolution, pain assessment and quality of life (QL).

Results: The AE observed with the TPRP were: significant pain in the injection area (n = 1) and lower limb cellulitis (n = 1).

All the patients showed a positive response with a percentage reduction of the area at 3 months of treatment, being higher after the TPRP (CT: $\bar{x} = 27.7 \pm 24.7$ vs TRPP: $\bar{x} = 73.7 \pm 24.1$ p 0.043).

The pain experienced significant improvement after TPRP compared to the CT (CT: $\overline{x} = 5.6 \pm 2.6$ vs TRPP: $\overline{x} = 1.4 \pm 0.9$ p 0.034).

An improvement in QL with TRPP was observed, with averages of 46.6 \pm 6.6 in the mental aspect and 45.8 \pm 4.6 in the physical aspect, while with the CT: 43.5 \pm 5.1 and 39, 8 \pm 2.0 respectively.

Conclusions: The TPRP was safe, with a low incidence of AE. Our results show a significant decrease in the area of ulcers, pain and improvement of the QL in the treated patients. It is











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necessary to evaluate a greater number of patients.



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