

Benefit of the NOSF absorbent lipido-colloid dressing* in the treatment of perforating ulcers of the foot

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INTRODUCTION

Perforating ulcers of the foot (also known as Malum Perforans Pedis) are neuropathic ulcerations in which local treatments play a crucial role. Excessive metalloproteinases (especially MMP9) are thought to be linked to a reduction in healing rates in diabetic wounds (1,2).

The **new NOSF absorbent lipido-colloid dressing***, which combines TLC with an innovative compound – NOSF (Nano-Oligo-Saccharide-Factor), metalloproteinase inhibitor – could be a useful treatment in the management of perforating ulcers of the foot.

PATIENTS AND WOUNDS

The objective of these case studies was to assess the efficacy of the **NOSF absorbent lipido-colloid dressing***, indicated in chronic, slow-to-heal wounds, applied every 48 h to clean, granulating perforating ulcers of the foot with no signs of infection. The patients were included consecutively between June 2007 and October 2008 at the Dermatology Department of Limoges University Hospital Centre. Their demographic, clinical and therapeutic data were analysed.

For some patients, when the MPP was deep and required wicking, the interface impregnated with NOSF was detached from the foam and applied directly to the wound. This protocol enhanced the efficacy of the product.

RESULTS

Nine patients (7 men, 2 women) with an average age of 61.5 years were treated for an average of 30 days.

Seven perforating ulcers of the foot were diabetic in origin, one developed in the context of rheumatoid arthritis and another one after peripheral neuropathy following an accident at work.

In total, 66.67% (6/9) of the wounds improved. In 44.4% of cases (4/9), complete healing was obtained in 6.5 weeks on average (3-10) and in 33.3% (3/9) of cases the wound surface area was reduced by 37.4% (23.5 - 60) on average.

One lesion remained stable and one patient presented worsening of the ulcer under treatment, with an increase in surface area, exudate and maceration.

One patient was lost to follow-up.

The tolerance was good in 8 out of 9 patients.

No pain was observed on application and removal of the dressing.

The patients were satisfied with the treatment in 89% of cases.

CASE STUDY 1



(Patient n°1) : MPP D0



(Patient n°1) : W3 Complete healing

CASE STUDY 2



(Patient n°7) MPP D0



(Patient n°7) : W10 Complete healing

CONCLUSION

The dressing led to healing being retriggered in 77.8% of cases (7/9). It was complete and rapid for 44.4% of patients (4/9).

The **new NOSF absorbent lipido-colloid dressing*** appears to be an innovative and interesting treatment alternative in the management of perforating ulcers of the foot and seems to address a pathophysiological mechanism recently described in perforating ulcers of the foot.

* Brand name: The new NOSF absorbent lipido-colloid dressing* is UrgoCell® START (Cellostart) from Laboratoires URGO.

BIBLIOGRAPHIE

1.Liu Y et al. Diabetes Care 2008 . 2. Muller M et al. Diab Med 2008;25:419-26