

Non-Surgical Revascularization of the Dysvascular, Necrotic Foot.

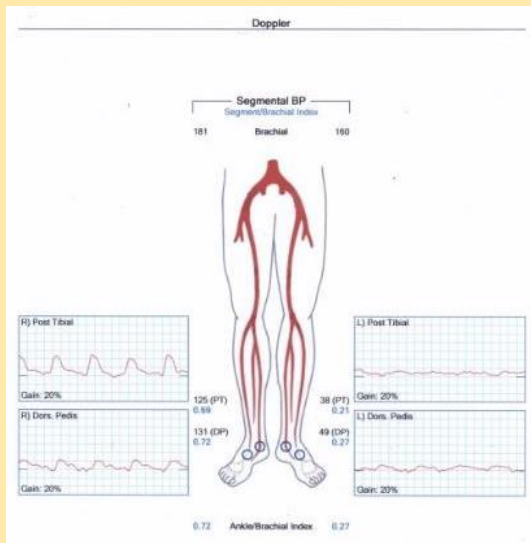


A Case Report

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Doppler is used to identify the anatomic arterial course. This guides the amniotic fluid infiltration.



01-26-2016 Initial infiltration



Ischemic pain and progression of dry gangrene at presentation. Infiltration of amniotic fluid on 1-26-16, 2-16-16, 2-23-16 and 3-02-16. Granular tissue formation after 2nd infiltration. Significant ischemic pain reduction reported after 2nd infiltration. **Treatment provided on a compassionate care basis.**

Wound care consisted of debridement and use of **MicroMatrix** and **Oasis** to promote granulation and epithelialization.

Amniotic fluid infiltration



03-07-2017

03-20-2023
At 6 year follow-up all wounds remain healed.



Conclusion
Amniotic fluid infiltrated alongside the occluded major arteries to the foot induces new vessel formation to occur. These new vessels revascularize the foot – relieving ischemic pain and allowing wounds and necrotic tissue to heal. Long term survival is demonstrated.

This is a novel non-surgical technique that shows promise for some patients where surgical approaches are not appropriate.

This concept was inspired by an IRB approved trial that was under way at the time.

References

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The author has no financial interest in any product used during the course of treatment
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