

Complete Healing of a Complete, Infected Grade II Lower-Leg Ulcer in a 69-Year-Old, Type 2 Diabetic Patient Accelerated by Dehydrated Human Amnion – Intermediate – Chorion Membrane Allograft, A Case Report.

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Purpose:

To document the successful and efficacious use of a dehydrated Human Amnion – Intermediate Layer – Chorion Membrane Allograft (dHAICM) in achieving complete closure of a complex, chronic venous leg ulcer in a patient with multiple comorbidities.



6/11/2025



6/16/2025



7/9/2025



8/4/2025 - Grafted with AmchoPlast
Wound: Grade II to Muscle wounds of the left lower leg posterior aspect and left ankle anterior aspect, size 24.85 sqcm, depth 0.30 cm

Materials and Methods:

A 69-year-old male patient was treated with an incision and drainage to the depth of the Achilles tendon and surrounding muscle on lateral aspect of leg and ankle. Negative pressure vacuum device and antibiotics were provided upon discharge. Seven weeks after initial drainage, four applications of AmchoPlast™ Sterile dehydrated Human Amnion – Intermediate Layer – Chorion Membrane Allograft (dHAICM) was applied to the wound.

Results:

A patient with significant comorbidities, including chronic kidney disease, type 2 diabetes, HIV infection, peripheral vascular disease, and venous insufficiency initially presented with a severe, septic ulcer to the muscle and tendon. Initial management and negative pressure successfully resolved the infection.

Subsequently, the chronic wound (area of 24.85 cm² and depth of 0.5 cm) received standard care supplemented with four applications of dHAICM every 2 weeks. Remarkably, the wound achieved complete closure and re-epithelialization just five weeks after the final dHAICM application.



8/14/2025 - Grafted with AmchoPlast



8/20/2025 - Grafted with AmchoPlast



9/2/2025 - Grafted with AmchoPlast



9/23/2025



10/13/2025

Conclusions:

This case strongly supports that the Dehydrated Human Amnion – Intermediate Layer – Chorion Membrane Allograft is a highly effective adjunct therapy that can significantly accelerate complete healing and re-epithelialization in complex, chronic, and non-healing wounds.