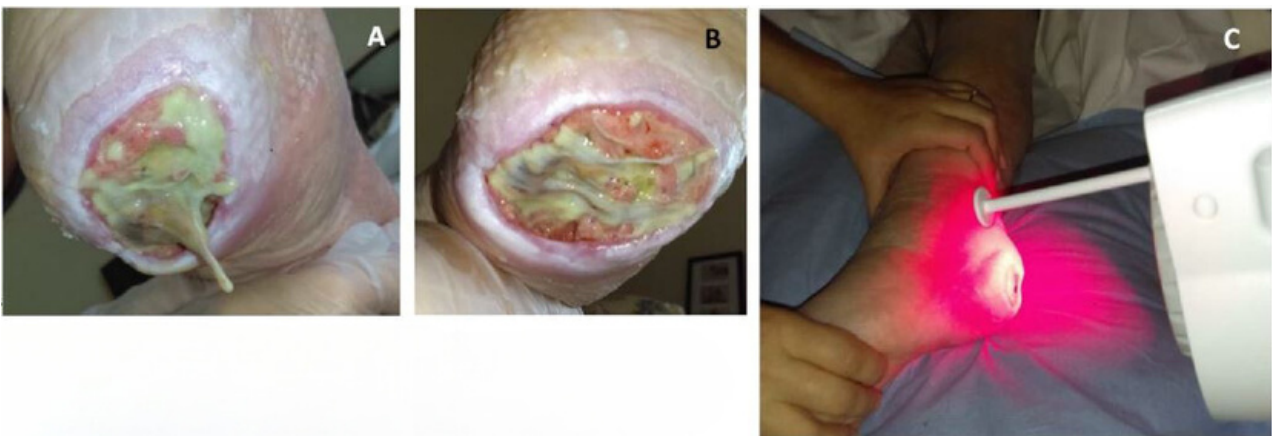


SEVERE DECUBITUS BEDSORE IN AN ALZHEIMER PATIENT

Decubitus ulcer is a bedsore consequence of lying or sitting in one position for a very long period. These types of ulcers most often develop on skin that covers bony areas of the body, such as the heels, ankles, hips and tailbone. Although often they could be prevented and treatable if detected early, pressure ulcers can be very difficult to prevent in critically ill people, frail elders and individuals with impaired mobility such as wheelchair users. In these cases decubitus ulcers could become a very serious problem.

A 94 old lady had an impaired mobility due to her complicated medical history (spondylarthroses, colorectal cancer, cardiac decompensation, Alzheimer's disease, high blood pressure and deep vein thrombosis of postoperative lower limbs). She developed a very serious and deep decubitus ulcer at the heel. During one month and a half the patient was treated with standard methods but the wound continued to grow, becoming necrosed (the tissue dies as a result of blood and oxygen deprivation of its cells)

After removing the necrotic tissue, the heel started to be treated once a day for 5 minutes with Bioptron with the red filter, followed by the standardized cleaning treatment.



To follow the evolution of the wound, photographs were taken at different time intervals after the light therapy session and before covering the wound, as well as measurements and comments about the wound aspect and evolution. Before start the treatment, the size of the wound was 4.5cm long, 3cm large and about 1cm deep.



During the first days a diminution of fibrin and an improvement of the ulcer bounds were evident. After 15 days of light therapy the wound started to close properly and decreased in size: less than 4cm long, 2.5cm at the widest point, and less than 0.5 cm depth. At day 43 the wound was superficial, almost healed (size 1.8cm long and 0.8cm at the largest point). At day 67 the wound is only 0.5mm in diameter and the bounds completely healthy and healed.

In this case, despite the general bad condition of the patient (including poor nutrition and hydration), the wound healed quick and healthily. Under the point of view of the experienced nurse who follow-up and took care of the patient, without Bioptron Light therapy the wound would of exacerbated and get worst. Bioptron is a beneficial device to heal difficult ulcers that could not be cured otherwise.