Dermagraft:
SAVING LIMBS, SAVING LIVES

WHAT IF YOU learned that you have a 50% chance of dying in five years because of a chronic health problem you’ve developed? That dire prognosis applies to diabetic foot ulcers, yet most of us neglect to ask about or examine our diabetics’ feet.

This is not surprising: the ulcers don’t hurt, patients often don’t know they’ve got one if it’s hiding between their toes or under their foot, and even when we make the diagnosis, treatment is frustratingly ineffective.

Here’s the problem: pressure causes ulcers on numb feet. Anything that increases pressure exacerbates ulcers: tight, stiff shoes, obesity, long days on concrete. But telling a diabetic to change her shoes, lose weight, and put down standing pads is like telling a heart patient to stop smoking. Compliance is poor.

Prevention may be the goal but an annual incidence of 500,000 new ulcers in 25 million American diabetics is the reality. These foot ulcers cause 85% of the amputations performed on diabetics each year.

Remember this fact: if a diabetic foot ulcer hasn’t been reduced to half its original size after four weeks of wound care, it’s unlikely to heal.

Studies indicate that after four weeks of unsuccessful treatment of an ulcer, adjuvant therapy is strongly recommended. Here we go.

The five members of the Foot and Ankle Division at Sportsmed have begun using Dermagraft (a skin graft substitute consisting of a bioabsorbable mesh seeded with living human fibroblasts) to treat chronic foot ulcers. Early results have been encouraging, at times dramatic.

The grafting process requires a weekly office visit. Wound debridement is followed by application of freshly prepared Dermagraft. Fewer than 10% of our patients have required more than the standard series of eight; many have healed by the fifth or sixth graft.

Dermagraft works not because the fibroblasts form skin, but because the fibroblasts produce growth factors and other cytokines that stimulate the patients’ own dermal cells to fire up a healing response.

The reported healing rate for chronic diabetic foot ulcers with standard wound care is 18%. Adding Dermagraft boosts the rate to 30%. Whether this will diminish the associated mortality remains to be seen…but we can hope.

For more information about Sportsmed, visit www.sportsmedalabama.com.*