



http://www.puricore.com/health-sciences/wound-care/case-studies

## **Case Study 1: Chronic Venous Insufficiency**

The patient, a 44-year-old male with a history of chronic venous insufficiency, presented with bilateral medial ankle wounds 7-8 weeks prior to application of Vashe Wound Therapy. The patient was initiated on compression and topical antibiotics prior to starting Vashe Wound Therapy. Vashe Wound Therapy was applied three times per week during dressing changes, via gauze dressings applied directly to the wound sites and allowed to remain there for 10 minutes.



Figure 1: Appearance after 7 months of topical antibiotics and compression therapy (2.6 cm x 2 cm x 0.1 cm & 2.3 cm x 1.0 cm x 0.1 cm)



Figure 2: Appearance after 3 weeks of topical of Vashe Wound Therapy (1.8 cm x 1.5 cm x 0.1 cm & 0.7 cm x 0.4 cm x 0.1 cm)

# Case Study 2: Chronic Neuropathic Pain in Diabetic

The patient, a 52 year-old insulin-dependent diabetic with chronic neuropathic pain, presented with a wound dehiscence in the transmetatarsal region of the right foot 21 days after the original TMA. The patient was initiated on NPWT for a period of 10 weeks. Sharp debridement was carried out as deemed necessary. Following 10-weeks of NPWT, the wound appeared infected, inflamed and malodorous and progress to closure had stalled. At this point, Vashe Wound Therapy was added as an adjunct to NPWT. Vashe Wound Therapy was applied three times per week during NPWT dressing changes, via gauze dressings applied directly to the wound sites and allowed to remain there for 10 minutes.



Figure 1: Initial size of the dehisced wound 5 cm x 17.8 cm x 3.0 cm



 $_{-}$ Figure 2: Wound at 10 weeks of NPWT and immediately prior to adding Vashe Wound Therapy, (2.8 cm x 11.0 cm x 0.8 cm)



\_Figure 3: Wounds healed by eight weeks post-initiation of Vashe Wound Therapy

## **Case Study 3: Diabetic Partial Foot Amputation**

Thee patient, a 53 year-old female with a medical history of diabetes, diabetic neuropathy, and hypertension developed a left foot ulcer (Wagner's III DFU). Aggressive surgical debridement, partial foot amputation, intravenous antibiotics followed by post-operative NPWT and hyperbaric oxygen therapy were administered to the patient. After reaching an endpoint for NPWT the patient was transitioned to Vashe Wound Therapy.



Figure 1: Appearance of wound after reaching endpoint of NPWT



Figure 2: Healed wound after 6 weeks with Vashe Wound Therapy

## Results may vary.

The use of Vashe Wound Therapy as part of a dermal cleansing strategy removes dirt and debris from a wound, which is beneficial to the healing process.

### Contains hypochlorous acid (0.033%).

Vashe Wound Therapy contains a preservative to inhibit growth of microorganisms within the solution.