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External Thermoregulation of Wounds Associated with Lower-Extremity Osteomyelitis

A Pilot Study

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Abstract

External thermoregulation using noncontact normothermic wound therapy accelerates wound closure by second intention in areas of

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existing osteomyelitis before surgical excision compared with standard wound care. This pilot study consisted of two arms. The control arm received standard wound care, which resulted in complete ulcer healing at an average of 127 days. The treatment arm received noncontact normothermic wound therapy, which resulted in complete ulcer healing at an average of 59 days, or 54% faster than in the control arm. This new treatment allows the physician to decrease the rate of limb loss and recurrent osteomyelitis by decreasing the morbidity of bone reinfection through the wound bed. There have been no published studies or case presentations addressing thermoregulation in the management of wounds associated with osteomyelitis. Although noncontact normothermic wound therapy is not a direct treatment for osteomyelitis, this new treatment option results in significantly accelerated healing of wounds associated with osteomyelitis. (J Am Podiatr Med Assoc 93(1): 18-22, 2003)

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