Use of Dehydrated Human Amnion/Chorion Membrane Mesh Allograft in Wounds with Exposed Bone or Tendon
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Abstract

We conducted a review of patients (n=3) with exposed tendon, bone, or hardware treated with mesh dHACM.

The dHACM was applied weekly to the wound after sharp debridement, followed by standard topical dressings.

Weekly dressing change and wound assessment was conducted to determine rate of granulation over the exposed tendon, bone, or hardware.

All patients provided consent for treatment and use of their personal health information.

Methods

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Results

Table 1. Summary of Cases.

<table>
<thead>
<tr>
<th>Case</th>
<th>Wound Size at 1st dHACM</th>
<th>Weeks to Cover Exposed Bone, Tendon, or Hardware</th>
<th># of dHACM Mesh</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>7.0 cm x 7.0 cm</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>7.0 cm x 4.5 cm</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>8.0 cm x 8.0 cm</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

Conclusions

In these 3 cases, dHACM in mesh configuration was effective in promoting tissue granulation over exposed tendon, bone, and/or hardware. All cases showed significant reduction in wound size and improvement in healing.

References


Case Results

Case 1 was an 85 y/o female smoker with diabetes. She presented with a 7 cm x 7 cm wound with exposed hardware following a heel fracture. Within 2 weeks of one dHACM application, the hardware was covered with granulation tissue and her wound had reduced by 58%.

Case 2 was a 41 y/o male smoker with uncontrolled Type 2 diabetes with exposed bone and tendon following amputation of his 5th metatarsal. Wound V.A.C.® was discontinued due to stalled progress and treatment with dHACM allograft was initiated. Wound area was 7.0 cm x 4.5 cm. Within one week, the wound area had decreased by 44%. After 3 weekly applications, tendon and bone were covered.

Case 3 was a 78 y/o female with Type 2 diabetes and multiple comorbid conditions and a deep right ankle wound with exposed tendon. At time of first dHACM application, the wound area was 8 cm x 8 cm. Within one week, the wound had reduced by 39%. After 2 weekly applications, granulation tissue covered the tendon.