



Wound rescue with copper dressings after everything else failed

Cernica Chausha Weitman (RN, MA)

Hadassah Medical Center, Jerusalem, Israel



Wound history



Patient medical background

- 58-Year-Old Female
- Systemic Lupus Erythematosus (SLE) since 2004
- Hypertension
- Hyperthyroidism

- Hospitalized with a minor superficial wound
- Area: $\sim 4 \text{ cm}^2$



Day 0



Day 223

- 8 months hospitalization
- Area: $\sim 300 \text{ cm}^2$

Wound history



Wound increased despite:

- OR debridement of necrotic tissue
- Systemic and local antibiotics
- Immunodepression treatment
- Steroid treatment
- Negative Pressure Wound Therapy
- Pressure chamber treatment
- Two skin grafts after escharotomy
- Variety of antimicrobial dressings (silver, honey)
- Wound washes

Initial Hospitalization	One month after hospitalization	Following OR debridement	Saline Dressing & Afenide Treatment	Pressure chamber & OR Debridement	NPWT	
D0	D39	D62	D76	D92	D93	
3 Days after NPWT	Debridement, Skin Graft, NPWT	Graft cells not absorbed	3 weeks of Pressure Chamber	NPWT, & 2 nd Skin Graft	4 weeks after 2 nd Skin Graft	Flaminal & Aquacel Dressings
D96	D110	D116	D162	D184	D220	D223

Copper Dressing application

Prior to amputation below the knee,
it was decided to try Copper Dressings



**3 months
Copper Dressing
Treatment**



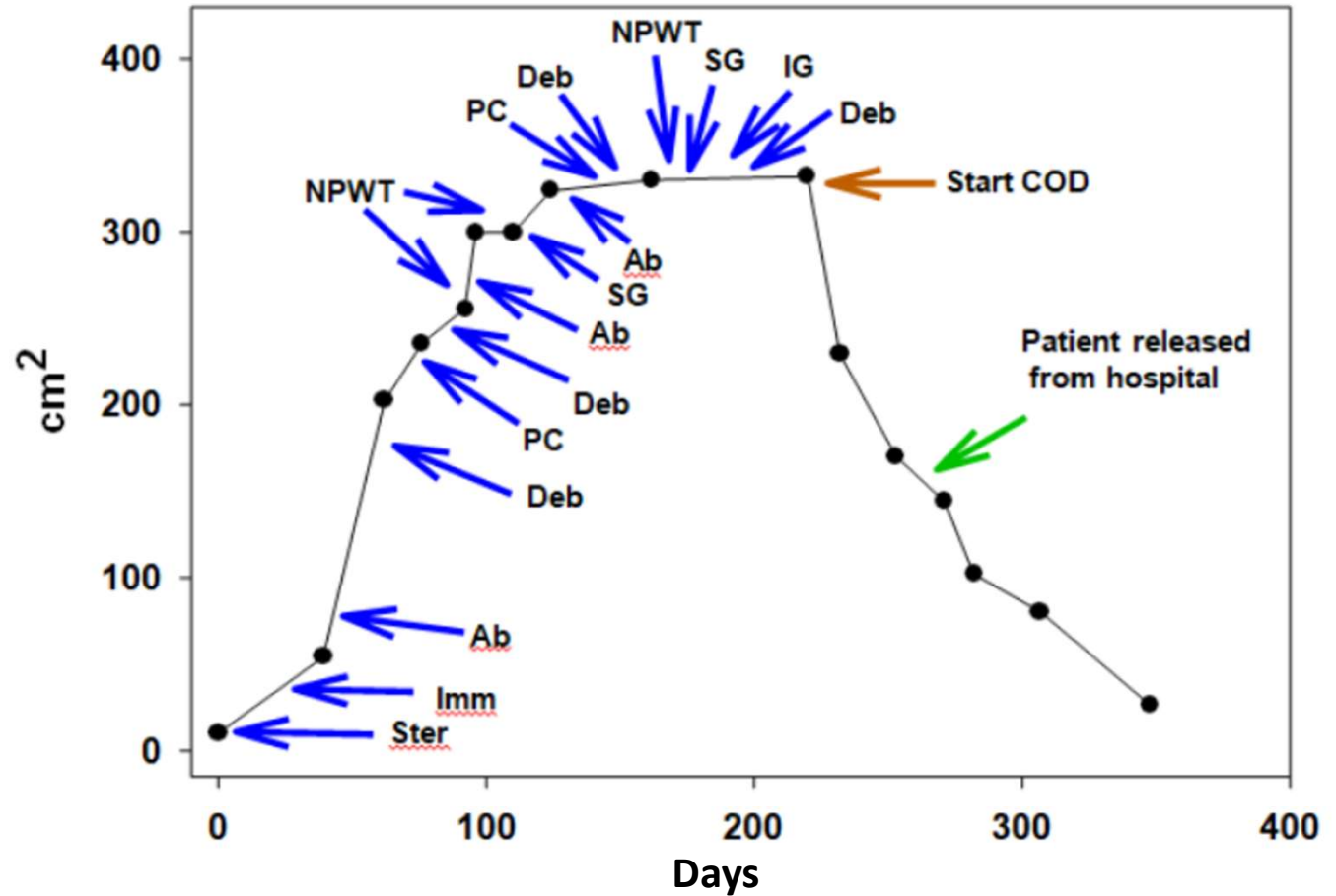
**6 months
Copper Dressing
Treatment**



Wound Evolution



- Resolution of the wound progression
- Subsequent granulation tissue formation
- Epithelialization
- Almost complete wound closure



Conclusion:

Strong potential role of copper in the healing process of hard-to-heal wounds

Acronyms:

- Ster: Steroid
- Imm: Immunodepression
- Ab: Antibiotic
- Deb: Debridement
- PC: Pressure chamber
- NPWT: Negative pressure wound therapy
- SG: Skin grafting
- IG: Immunoglobulin
- COD: Copper dressings