



## Guidelines for optimal off-loading to prevent diabetic foot ulcers

**“The management of diabetic foot ulcers through optimal off-loading,”** published in the *Journal of the American Podiatric Medical Association*, presents consensus guidelines and states the “evidence is clear” that off-loading increases healing of diabetic foot ulcers.

The article calls for increased use of off-loading and notes that “current evidence favors the use of nonremovable casts or fixed ankle walking braces as optimum off-loading modalities.” The authors reviewed about 90 studies.

American Diabetes Association. The recommendations include screening, diagnostic, and therapeutic actions.

**“Standards of Medical Care in Diabetes—2015: Summary of revisions”** provides a synopsis of key changes by section. Of particular interest to wound care clinicians is that the standards emphasize that all patients with insensate feet, foot deformities, or a history of foot ulcers should have their feet examined at every visit so problems can be identified early.



## Medical honey and silver dressings don't interfere with each other

A study in *Wounds* reports that medical-grade honey gel and dressings containing silver don't interfere with each other.

**“Medical honey and silver dressings do not interfere with each other's key functional attributes”** found that the in vitro antibacterial barrier activity seen with silver-containing dressings doesn't decrease with the addition of medical honey, and in some cases increases.

## Fecal transplants help patients with *Clostridium difficile* infection

*Medscape Gastroenterology* has published



## Updated diabetes standards released

*Diabetes Care* has published **“Standards of Medical Care in Diabetes—2015”** from the



**“Fecal transplants bring hope to patients, challenge the FDA,”** which states that fecal microbiota transplant (FMT) has a nearly 90% success rate in patients with recurrent *Clostridium difficile* infection.

The article discusses developments in FMT, including manufactured FMT products, stool banks, use of frozen rather than fresh stool, and biosynthetic alternatives.



### **Most coated stents effective in PAD 3 years after insertion**

According to a study **presented** at the 2015 International Symposium on Endovascular Therapy, nearly three-quarters of patients with peripheral artery disease (PAD) who were treated with peripheral angioplasty and stents still had patent arteries 3 years after treatment.

The results are from the STROLL trial, a multicenter, nonrandomized, single-arm prospective trial studying the safety and efficacy of a nitinol self-expanding stent called the SMART Stent, manufactured by Cordis Corporation.



### **Ultrasound may help in healing venous leg ulcers**

Adding 40 kHz noncontact, low-frequency ultrasound (NLFU) treatments three times per week for 4 weeks to standard care reduces pain and wound size, according to a study in *Ostomy Wound Management*.

**“A prospective, randomized, controlled trial comparing the effects of noncontact, low-frequency ultrasound to standard care in healing venous leg ulcers”** included 112 patients. The average wound size reduction was 62% in the group who received NLFU, compared to 45% in those who received only standard care.

### **Moldable skin barriers effective in preventing peristomal skin complications**

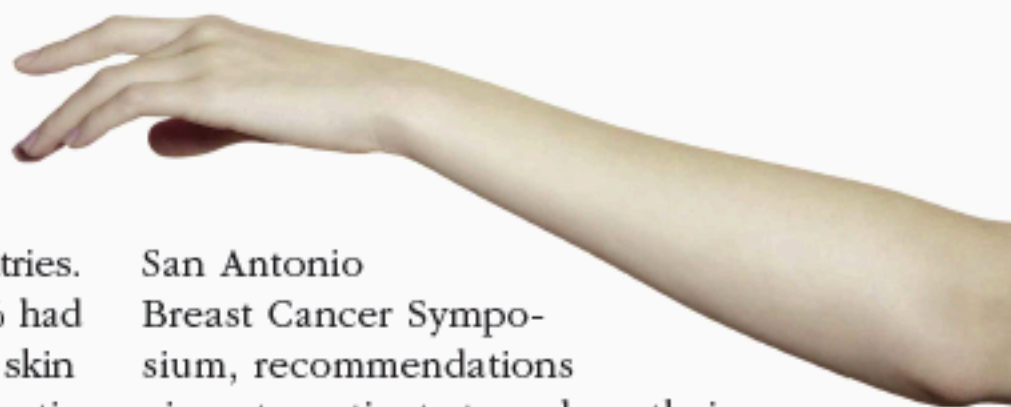
**“The effects of using a moldable skin barrier on peristomal skin condition in persons with an ostomy: Results of a prospective, observational, multinational study”** reports that this type of barrier is effective in preventing and healing peristomal skin complications and is rated as good or

excellent by most patients.

The study, published in *Ostomy Wound Management*, included 561 patients from 90 centers in three countries. In the patients with a new stoma, 90% had intact skin at baseline, 96% had intact skin after 2 months, and 98% rated overall satisfaction with the barrier as good or excellent. In patients with an existing stoma, intact skin was observed in 39.5% at baseline and 86% after 2 months, with 96.5% of patients rating overall satisfaction with the barrier as good or excellent.

### Recommendations to prevent lymphedema questioned

According to data **presented** at the 2014



San Antonio

Breast Cancer Symposium, recommendations given to patients to reduce their risk of lymphedema may not be effective.

Blood draws, injections, and blood pressure measurements in the at-risk arm and air travel without a compression sleeve did not increase the risk of lymphedema. The researchers did find that axial lymph node dissection and a higher preoperative body mass index were significantly associated with the development of lymphedema. ■

## Wound Care questions can help you speed healing!

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## Quiz Time

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Which of the following is an advantage of a dry-suction chest drainage system?

- a. Lower levels of suction pressure
- b. Variable bubbling, which indicates proper functioning
- c. A steady bubbling sound, which indicates proper functioning
- d. Higher levels of suction pressure

Go to

**AmericanNurseToday.com/quiz-time-9/**  
for the answer!