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# DIABETIC FOOT IN ALGERIA - ILLUSTRATION No II --

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#### **Abstract:**

The case: One post COVID 19 case to illustrate our article: Diabetic Foot in Algeria:

https://www.sciforschenonline.org/journals/endocrinolog y/IJEMD165.php

### The Patient:

- Male: 53 years old
- Diabetic type 2, Insulin dependent
- HbA1c: 9,31 %
- High blood pressure
- Moderate renal impairment
- Heart failure with pericardial effusion.
- Blindness post retinopathy
- Arteriopathy: Médiacalcose with thrombosis of the posterior tibial and Pedial arteries on the left and on the right, and multiple stenoses.
- No venous involvement
- Diabetic neuropathy
- Pressure sore in both heels
- COVID 19

#### Treatment:

Our therapeutic:- local treatments consist of a water bath and H2O2 at 10 volumes, followed by the application of LEADERMAX\* (local ointment) and MAGGOT THERAPY daily until detachment or debridement.

- CARBON DIOXIDE THERAPY SESSIONS (CDT)
- Broad spectrum antibiotic therapy at first and then, targeted antibiotic therapy.
- Anticoagulants: Aspegic / Plavix, after opinions of the cardiologist and the nephrologist
- Once the maggots will have split the lesions into the area to be removed and the underlying budding due to the improved vascularity of the floor, surgical debridement was performed.
- The relay is then taken by dressings with ALTRAZEAL\* and BELCIC\* cream.
- Physical activity, walking with complete discharge, and anti-oedema posture.

## **LEFT FOOT**







### **RIGHT FOOT**





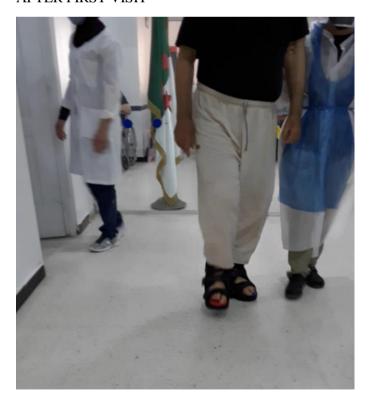
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## **RESULTS**



THE PATIENT RESUMED WALKING 28 DAYS AFTER FIRST VISIT



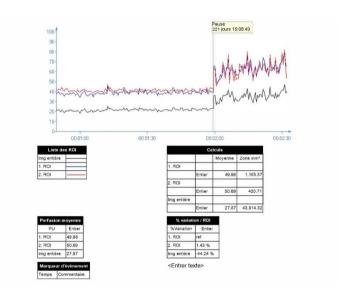
### In conclusion:

This patient, blind and victim of COVID 19, had complication of decubitus: double pressure ulcer of the heels

His treatment did not require hospitalization and complete healing was achieved within 7 months.

We stress the importance of the timing of the debridement, performed at 5 and 7 weeks after the first visit, to avoid worsening the lesions.

Vascularization was improved by CARBOMEDTHERAPY (CDT) weekly sessions at first for 2 months, and bi-monthly thereafter until healing, as evidenced by the comparative trace obtained during explorations by PERICAM.



The maggot therapy played an important role in the healing process.

NO CONFLICT OF INTEREST. NO INTEREST IN ANY OF THE EQUIPMENT OR PHARMACEUTICAL PRODUCTS.

## References:

- 1. Martini RK, Sherman RA. Maggot debridement therapy. J Bras Med. 2003;85:82-5
- 2. Bexfield A, Nigam Y, Thomas S, Ratycliffe NA. Detection and partial characterization of two antibacterial factors from the excretions/secretions of the medicinal maggot Lucilia sericata and their activity against methicillin-resistant Staphylococcus aureus (MRSA) Microbes Infect. 2004;6:1297-30

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- 3. Marcondes CB. !st ed. Florianopolis Editora da UFSC; 2006. Use of maggot therapy for treating diabetic foot ulcer colonized by mutlidrug resistant bacteria in Brazil.
- 4. McInnes W,RuzehajI N, Wright N, Cowin AJ, Fitridge R. Venous laceration contaminated by multi resistant organisms; Larval therapy & debridement. J Wound Care 2013;22(suppl 10):s27-30
- 5. Diabetic Foot Conference abstracts (2017). [Ref.]
- 6. Boudjenah N (2016) Diabetes and its Complications. Georgia World Congress Center, Atlanta, USA.
- 7. Boudjenah N (2016) Introduction of Carbomedtherapy Endocrine Practice. Jacksonville 22: 16.
- 8. Boudjenah A (2013) Diabetic feet: contribution of Carbomedtherapy. Diab Metab 39: A99. [Ref.]
- 9. Boudjenah N (2020) Diabetic Foot in Algeria. Int J Endocrinol Metab Disord 6. [Ref.] https://www.sciforschenonline.org/journals/endocrinology/IJEMD165.php
- 10. Boudjenah N (2016) Introduction of Carbomedtherapy. Endocrine Practice. Pro Quest 22.
- 11. Advocacy for Carbomedtherapy in the treatment of Neuropathy: https://www.sciforschenonline.org/journals/endocrinology/IJEMD169.php