

In the management of postsurgical lesions of the diabetic foot the combined use of negative pressure wound therapy and homologous platelet gel can promote healing  
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Introduction: postoperative lesions on the diabetic foot pose a not easy therapeutic problem. The purpose of this study was to present the experience of the combined use of vacuum assisted closure (VAC) and homologous platelet gel (PG) in complex post-infection diabetic foot ulcers. Material and Methods: in the period between July 2009 and February 2010, we treated five patients with postsurgical lesions wider than 5 cm<sup>2</sup> left open to heal by secondary intention. VAC treatment for two weeks was then followed by no more than 10 applications of PG (always considering suitability and traceability criteria for transfusional use of blood) once a week. Patients with type 2 diabetes mellitus, aged  $\geq$  18 years, included in the study and followed up weekly for 3 months, presented an adequate perfusion of the foot assessed with the help of TcPO<sub>2</sub> ( $>$  40 mmHg). Two cases of the above mentioned patients were submitted to a distal revascularization. The foot lesions result classified as grade 2 or 3 according to the Wagner classification. Results: after three months all five lesions were healing. In each case granulation tissue forming increased following to the first PG application, while complete re-epithelization was obtained later and pain was reduced in every treated patient. Conclusions: the combined use VAC and PG appears to be very useful in the treatment of postsurgical lesions of diabetic foot. Topical haemotherapy with PG and before VAC therapy may be considered as an adjuvant treatment of a multidisciplinary process, useful to enhance therapy of cutaneous ulcers