Clinical and experience outcomes for the use of a new traditional negative pressure wound therapy pump on complex wounds in the post-acute setting

Leticia Vallejo,¹ Mandy Spitzer² ¹Wound Care Plus Education and Research Center and Department of Health Sciences Universidad Ana. G. Méndez, San Juan, Puerto Rico. ²Global Clinical Strategy, Advanced Wound Management, Smith+Nephew, Watford, UK.

Introduction

- Traditional negative pressure wound therapy (tNPWT) is believed to improve wound healing outcomes through a multimodal mode of action¹, including the promotion of blood flow.
- Near-infrared spectroscopy (NIRS) is a newer technology which allows clinical evaluation of changes in perfusion during treatment with tNPWT.

Methods

- Case information for 5 wounds treated in the post-acute setting with a new tNPWT system* were extracted retrospectively and recorded on anonymized forms.
- A NIRS** system was used to measure oxygen saturation, deoxygenated hemoglobin, oxygenated hemoglobin, and total hemoglobin at the wound site before initial application and throughout treatment with tNPWT.

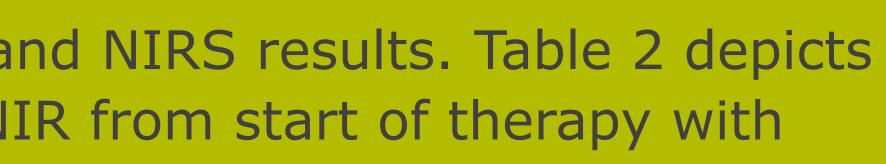
Results

- All wounds progressed or fully closed.
- Figure 1 demonstrates a case example and NIRS results. Table 2 depicts the changes in wound dimensions and NIR from start of therapy with tNPWT to final measurement.

Case	Wound Location	Wound dimensions at start of NPWT		Wound dimensions at discontinuation of wound treatment		Percentage wound dimension change (%)	
		1	Hand	3.75	unspecified	0.04	unspecified
2	Abdomen	3	1.5	0	0	100.00	100.00
3	Foot	20	40	0	0	100.00	100.00
4	Foot	4	6	0	0	100.00	100.00
5	Knee	7	2.8	0	0	100.00	100.00

Reference:

¹Apelqvist J, Willy C, Fagerdahl A, et al. EWMA Document: Negative Pressure Wound Therapy: Overview, Challenges and Perspectives. Journal of Wound Care. 2017;26:S1-S154.



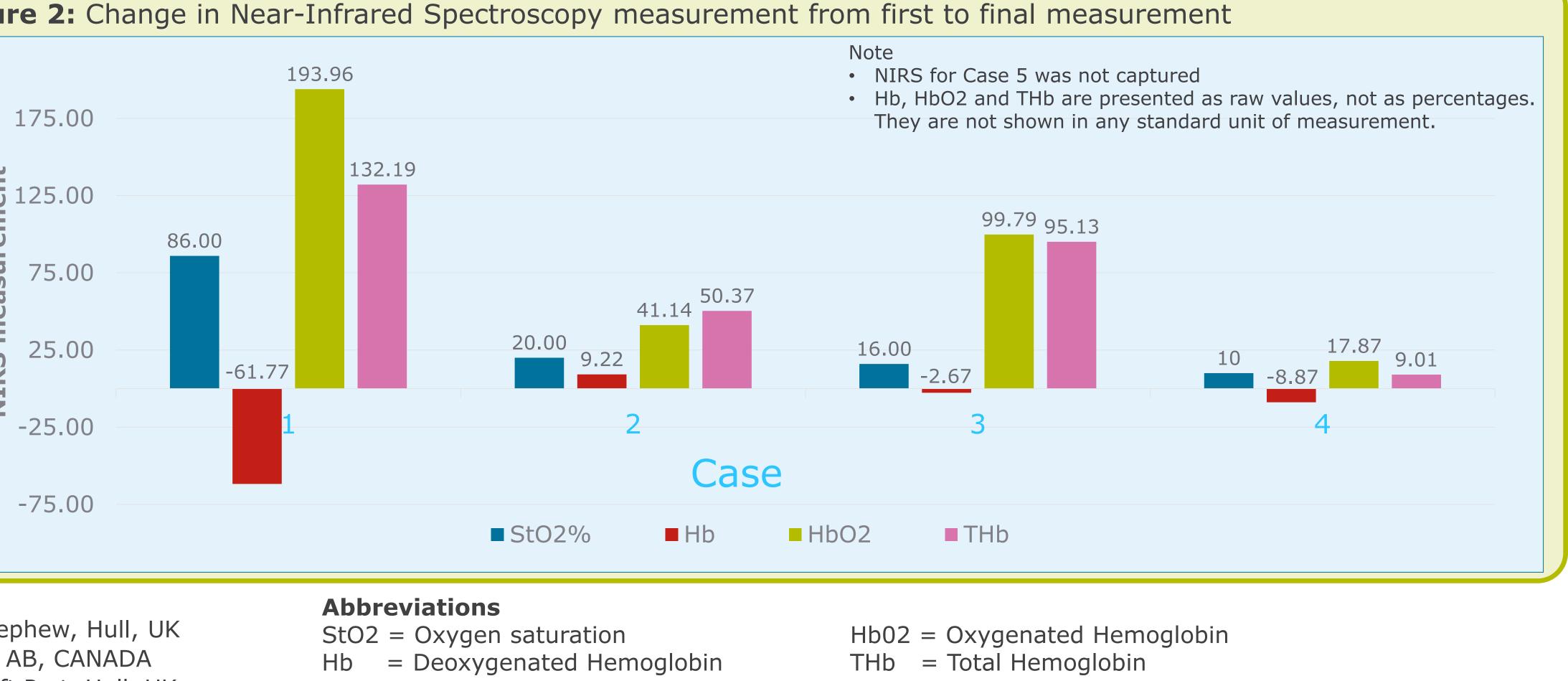
*RENASYS[™] EDGE System, Smith and Nephew, Hull, UK **SNAPSHOTNIR, Kent Imaging, Calgary, AB, CANADA [†]RENASYS[™]–F Foam Dressing Kit with Soft Port, Hull, UK

175.00

j 125.00 75.00 25.00 -25.00







Poster 2012241 presented at Symposium on Advanced Wound Care, May 2-3, 2025; Grapevine, Texas.



UNIVERSITY

SmithAephew

ANA G. MÉNDEZ

Presentation:

45-year-old male with relevant history of hypertension, diabetes mellitus, arterial insufficiency, osteomyelitis, and tinea pedis presented to the wound clinic following for wound treatment following abscess with incision and drainage.

A tNPWT dressing⁺ was applied and the tNPWT pump set to deliver continuous or variable intermittent pressure throughout the 19 days to therapy.

tNPWT was discontinued at 19 days and the wound was fully closed at day 21.

Discussion

The combination of tNPWT with NIRS monitoring provides a quantifiable method to assess wound evolution and optimize therapeutic decisions. Data collection is ongoing.