



Negative pressure therapy treatment in Abdominal retail necrosis after abdominal Dermolipectomy

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Objective: to describe high definition submental liposuction and postoperative care.

Methods: Case report woman 60-year-old submitted to abdominal dermolipectomy. In the immediate postoperative period, she presented respiratory failure requiring care in the Intensive Care Unit, where she presented a complex defect due to necrosis of the abdominal flap. After hospital discharge, during outpatient follow-up she presented worsening necrosis, being referred to the plastic surgery service at a university hospital, where she was treated with surgical debridement and Negative Pressure Therapy (NPT)

Results: After 15 days of antimicrobial treatment and the wound was free of infection, treatment with a TPN dressing was started. Vacuum dressing changes were performed every seven days, with a total of three being used. The wound had a loss of partial thickness, with 96 cm² in diameter and 192 cm³ in total volume (12 X 8 X 2 cm); approximately 40% of the bed with liquefaction necrosis. One week after finishing the treatment with TPN, it was decided to perform reconstruction to close the defect in the abdominal wall. The patient was discharged from the hospital five days after surgery, without any type of complications, with a positive clinical evolution, with a significant reduction in the wound and closure under favorable conditions.

Conclusion: Negative Pressure Therapy is a system that uses an intelligent therapy unit to apply controlled negative pressure (sub-atmospheric) to the wound site. It speeds up the process of repairing and preparing the wound bed until its definitive coverage through the various methods of tissue reconstruction.