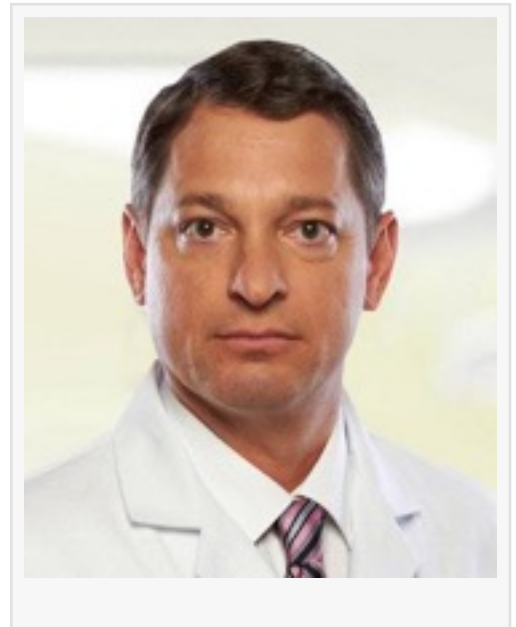


Decubitus Ulcers: The Crucial Role of Plastic Surgeons in Wound Care Teams

Plastic surgeons are the most important member of an interdisciplinary team as they offer cures for those with deep Grade III and Grade IV decubitus ulcers.

SANTA BARBARA, CALIFORNIA, UNITED STATES, July 25, 2023 /EINPresswire.com/ -- Greg Vigna, MD, JD, national malpractice attorney, wound care expert, says, "Plastic surgeons are the most important member of an interdisciplinary team as they offer cures for those with deep Grade III and Grade IV decubitus ulcers. Unfortunately, pressure ulcer trends in the United States from 2008 to 2019 show that there is a reduced frequency of operative intervention despite an increase in the proportion of ulcers that are considered severe."



Dr. Vigna states, "Not all wound care clinics and long-term acute hospitals are equal. Outcomes are related to the specialist involved and the skill, knowledge, experience, and training they possess. Patients need to be informed of the physician skill set available because patients can only receive the care that physicians offer."

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Our analysis suggests the prevalence of decubitus ulcers remained stable during the time period (2008-2019), with increased severity but reduced frequency of operative intervention.”

*Dr. John Fischer, MD, MPH,
The American Surgeon, 2023*

Dr. Vigna continues, “Recently, Dr. Samir S. Awad, MD, at the Baylor College of Medicine wrote an article describing a proposed algorithm for the treatment of Stage 3 and Stage 4 decubitus ulcers. Patients with deep bedsores must be nutritionally optimized, have their blood sugar controlled, there must be reliable pressure relief, and all patients must have stopped smoking. Those who are medically optimized with adequate nutritional status to support healing with the ability to comply with post-surgical recommendations are candidates for reconstruction. There is nothing new in this algorithm and nothing new compared to what I learned at Baylor during my residency.”

Dr. Vigna adds, “Why pressure wounds have increased in severity from 2008 to 2019 but there is

a reduced frequency of operative interventions is the question that must be investigated. Comprehensive wound care for those with Grade III and Grade IV decubitus ulcers requires the following: 1) Commitment from the long-term acute hospital and skilled nursing facilities to admit these medically complex and potentially expensive patients, 2) A physician who will manage the nutritional deficits, 3) A physician to manage the medical co-morbidities, 4) A physician to manage infectious disease issues, and 5) A physician to manage the expectations of the patient and families. Most importantly, this physician must be available 24/7 to oversee the nursing staff and therapy staff, set protocols, and oversee post-operative care to mitigate factors that cause failed flaps.”

Dr. Vigna concludes, “From my experience, plastic surgeons will gladly help these patients if a program is ready for their limited involvement. Otherwise, decubitus management is not cost-effective for them. I suspect the reduced frequency of operative intervention goes to the lack of physician leadership to take on the 24/7 commitment in managing these complex patients.”

Greg Vigna, MD, JD, is a national malpractice attorney and an expert in wound care. He is available for legal consultation for families and patients who have suffered decubitus ulcers because of poor nursing care. The Vigna Law Group along with Ben C. Martin, Esq., of the Martin Law Group, a Dallas Texas national pharmaceutical injury law firm, jointly prosecute hospital malpractice and nursing home neglect cases, nationwide.

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