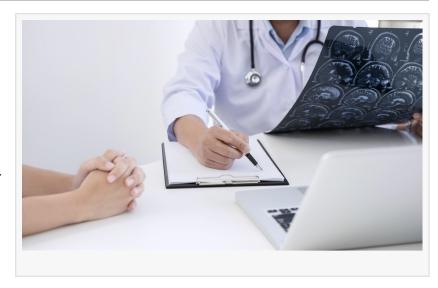


Bedsore Litigation Update: Ineffective Decubitus Ulcer Care in Focus

In our study, patients with Medicare or Medicaid were significantly more likely to develop a pressure ulcer than patients with private insurance...

SANTA BARBARA, CA, UNITED STATES, January 5, 2024 /EINPresswire.com/ -- "In our study, patients with Medicare or Medicaid were significantly more likely to develop a pressure ulcer than patients with private insurance... Our results indicate that Black and Hispanic patients had significantly higher odds



of developing a pressure ulcer than White patients" ... Sun Jung Kim, Ph.D, Journal Patient Safety. Vol. 00, Number 00, Month 2023.

(https://journals.lww.com/journalpatientsafety/fulltext/9900/vulnerability to decubitus ulcers a nd_their.178.aspx)



Patients with hospital acquired or nursing home acquired bedsore must have access to plastic surgeons as part of long-term acute care hospitalizations."

Greg Vigna, MD, JD

What else did Dr. Kim's study reveal? (Vulnerability to Decubitus Ulcer and Their Association with Healthcare Utilization: Evidence from Nationwide Inpatient Sample Dataset From 2016 to 2020 in US Hospitals) (https://journals.lww.com/journalpatientsafety/fulltext/990 0/vulnerability to decubitus ulcers and their.178.aspx)

- 1) "Among 48,786,216 nationwide inpatients, 3.9% had decubitus ulcers.
- 2) Patients who were Black, older, male, or those reliant on Medicare/Medicaid had a statistically significant increased risk of decubitus ulcers."

Dr. Greg Vigna, national decubitus ulcer attorney has concerns, "There is no reliable evidence in the literature that patients with Grade 4 decubitus ulcer of the sacral region with an associated bone infection who are treated with conservative wound care without flap closure go onto heal in rates that would support that conservative management of these diagnoses represents

effective care. Too many patients are dying without receiving a consultation from a plastic surgeon who can provide surgical procedures for cure."

Greg Vigna, MD, JD, national decubitus ulcer attorney explains, "Literature shows that patients with Stage IV pelvic decubitus ulcers who aren't treated with flap closure have over a 44% risk of being readmitted with complications of osteomyelitis and 17% have died within 1 year. Patients with hospital acquired or nursing home acquired bedsore must have access to plastic surgeons as part of long-term acute care hospitalizations. There should be a discussion with the patient and their family as to treatment options. There is no reliable evidence that conservative wound care for deep Stage 3 or Stage 4 is effective at preventing chronic bone infections, sepsis, and death."

Dr. Vigna concludes, "Reconstruction for a patient with Grade 4 sacral, ischial, and hip decubitus ulcers is indicated for patients who have osteomyelitis or without osteomyelitis for those who desire cure. At the time of flap closure if there is necrotic bone present it should be debrided to viable bone or resected. Duration of antibiotics depend on if there is there is confirmed osteomyelitis or sufficient other evidence of osteomyelitis. Patients who have suffered these injuries must get to the hospitals with a plastic surgeon available to provide this life-saving care for cure. Without plastic surgeons the care is often ineffective."

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 at hospitals, nursing homes, or assisted living facilities. The <u>Vigna Law Group</u> along with Ben C. Martin, Esq., of the Martin Law Group, a Dallas Texas national pharmaceutical injury law firm, jointly prosecute hospital and nursing home neglect cases that result in bedsores nationwide.

Resources:

https://issuu.com/academyccm/docs/post_acutecare

https://journals.sagepub.com/doi/full/10.1177/20499361231196664

https://link.springer.com/chapter/10.1007/978-3-662-45358-2_6

https://www.nature.com/articles/s41393-022-00758-1

https://journals.lww.com/journalpatientsafety/fulltext/9900/vulnerability to decubitus ulcers an d their.178.aspx

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