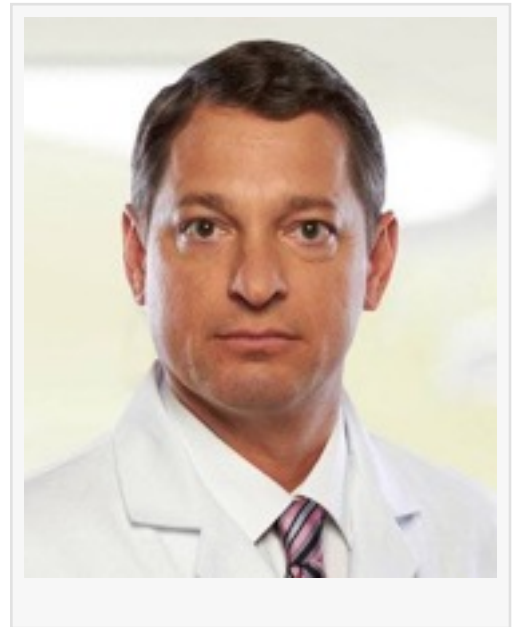


Vigna Law Group: Heel Decubitus Ulcers, a Major Health Care Concern

Stage IV Heel bedsores sores have the worst prognosis and often lead to lower limb amputations

SANTA BARBARA , CALIFORNIA , UNITED STATES , March 18, 2024 /EINPresswire.com/ -- "These stage IV heel pressure ulcers represent a major health and economic burden and can be difficult to treat" ... David C. Bosanquet, MD, Consultant Vascular Surgeon at NHS.

Dr. Greg Vigna, wound care expert and national decubitus ulcer attorney states, "Stage IV Heel bedsores sores have the worst prognosis and lead to lower limb amputations. Simply caused by broken hospitals and nursing homes that provide inadequate bedside care."



What did Dr. Bosanquet report in "A review of the surgical management of heel pressure ulcers in the 21st century" published in International Wound Journal:

"The mainstay of management of stage I-III heel pressure ulceration centers on offloading and appropriate wound care, successful healing in stage IV pressure ulcers is often only possible with surgical intervention.

“

Nurses keep dependent patients safe by providing assisted pressure relief and identifying changes in medical status. If these things are not happening, then the hospital is broken."

Greg Vigna, MD, JD

Such intervention includes simple debridement, partial or total calcanectomy, arterial revascularisation in the context of coexisting peripheral vascular disease, or using free tissue flaps.

Amputation may be required for failed surgical intervention, or as a definitive first-line procedure in

certain high-risk or poor prognosis patient groups."

Read Dr. Bosanquet's review: <https://onlinelibrary.wiley.com/doi/full/10.1111/iwj.12416>

Dr. Vigna states, "Partial removal of the heel bone or calcanectomies may be necessary for deep decubitus ulcer or those with infected bone to allow for closure, others require total calcanectomies or even amputations of the leg to achieve healing. These are difficult wounds to heal with or without osteomyelitis (bone infection)."

Dr. Vigna, "Prevention of bedsores is paramount, and keeping patients safe with attentive bedside care is the most important point aspect of hospital medicine. Nurses keep dependent patients safe by providing assisted pressure relief and identifying changes in medical status. If these things are not happening, then the hospital is broken."

Dr. Vigna concludes, "Patients with serious heel decubitus ulcers should be evaluated by physicians with the skills for providing skin grafting, partial and complete calcanectomies. Patients should have vascular evaluation early to ensure the inflow of blood is optimized. Other diagnostic testing includes an MRI of the foot to rule out osteomyelitis."

To learn more: <https://vignallawgroup.com/decubitus-ulcer-help-desk/>

[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 due to poor nursing care at hospitals, nursing homes, or assisted living facilities. 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 and nursing home neglect cases that result in bedsores nationwide.

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