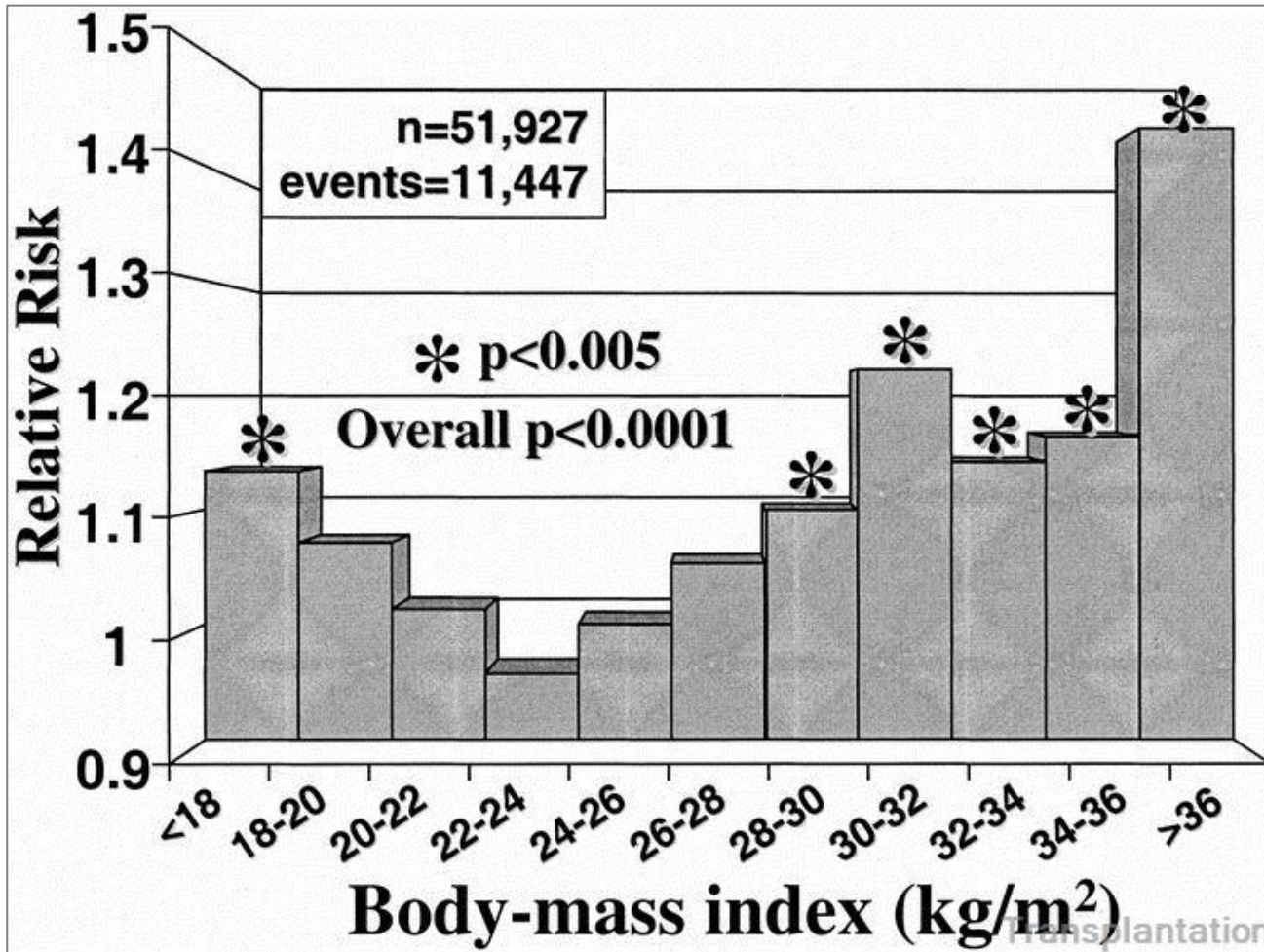


Wound issues

Chris Russell

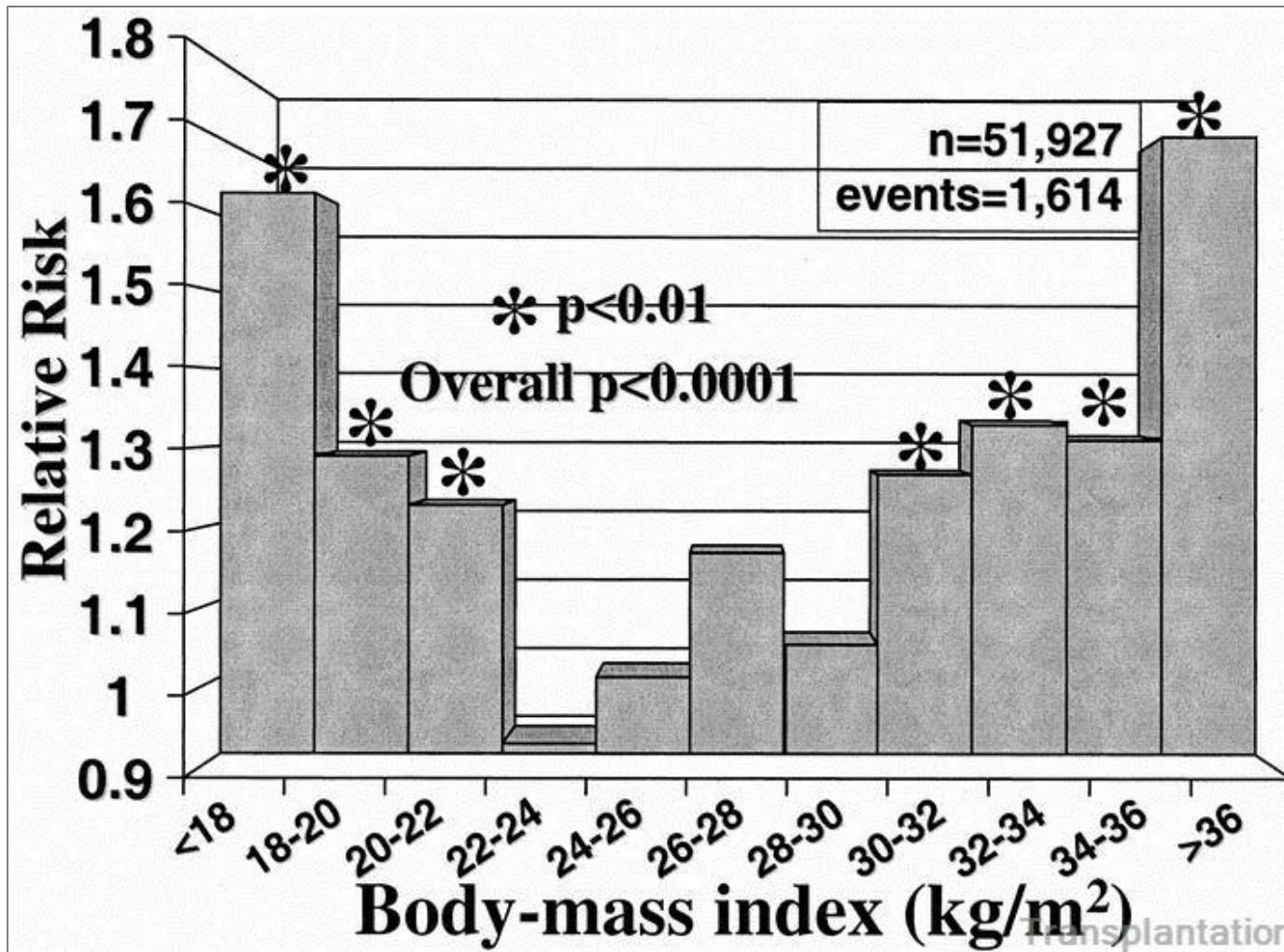
BMI – death censored graft loss



Relative risk for death censored graft loss by BMI.

Meier Kreische from 51,927 pts in USRDS

BMI – RR of infectious death



Relative risk
for infectious
death by BMI.

Meier Kreische
from 51,927
pts in USRDS

BMI in indigenous patients

- Often very different body habitus
- Women often large overhanging apron – grave problems with post-op wound breakdown
- BMI often < 30
- Often diabetic – increases risk of complications

Wound breakdown

- Two NT indigenous pts
- 115kg and 69kg (BMI data not available, but both short!)
- Both spent 5 months in hospital with wound breakdown
- One died, one survived

Five month admission





Wound healing

- Diabetes
- Obesity
- Immunosuppression
 - Steroids
 - Sirolimus
- Haematoma

Glycaemic Control

- Adelaide study 2001
- 50 diabetic pts
- Tight glycaemic control decreased risk of post-op infection: not specifically wound infection
- Previously shown to decrease deep sternal infection in diabetic pts undergoing cardiac surgery

Issues

- BMI restrictions
 - Indigenous BMI not equivalent!
- Waist/hip ratio probably better
- Body habitus
- Tight glucose control – often diabetic

- ?Apronectomy