Limb Salvage in Diabetics
Using Electromagnetic Therapy

By Aletha W. Tippett, M.D.

Abstract:

Purpose
Diabetics suffer one lower extremity amputation every 6 minutes in the U.S.—82,000/year. A pulsating electromagnetic therapy that increases oxygen tension in the treated tissue and reported to enhance healing and increase arterial circulation was tried for severe cases of circulatory compromise and wounds in diabetics with threatened limb amputation.

Method
All diabetics with wounds and PVD were treated. Three representative cases of diabetics offered amputation of lower extremity due to severe wounds, treated with electromagnetic therapy and concomitant wound care are reviewed.

Results
Case 1: 59 year old Vietnam veteran with onset of gas gangrene in the left foot. Patient scheduled for urgent amputation, but instead had wide surgical debridement, followed by wound care and electromagnetic therapy. The patient had 100% granulation of the wound by day 85 and regained weight bearing.
Case 2: 63 year old barber with previous left BKA with gangrene and flatline toe waveforms on the right, offered amputation of his right leg. Treatment with electromagnetic therapy and conservative management resulted in complete resolution of the gangrene and normal toe waveforms.
Case 3: 48 year old former NFL player with chronic wounds on his right leg. Patient in severe pain and scheduled for amputation. Electromagnetic therapy and wound care resulted in complete healing of all wounds, and regaining of ambulatory status.

Conclusion
Pulsating electromagnetic therapy can be a valuable adjunctive modality to improve circulation, enhance healing of wounds, and preserve limbs when there is vascular compromise, even in diabetic patients.

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Methods

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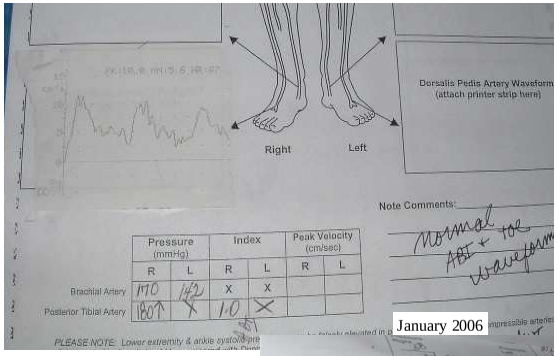

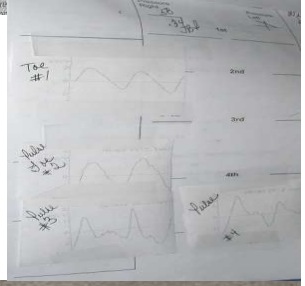

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