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A set of techniques for the treatment of decubitus in patients in a chronic critical condition

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One of the most important medical and socially significant problems in the world is the treatment and rehabilitation of patients with severe brain damage who are in a chronic critical condition. The consequences of severe traumatic brain injuries and acute disorders of cerebral circulation, operated neoplasms, as well as anoxic brain lesions inevitably lead to prolonged passive bed rest, persistent inability to self-care.

As it is known, patients in a chronic critical condition due to severe brain damage are at high risk of decubitus ulcers, since they have a combination of predisposing factors: on the one hand, pronounced disorders of consciousness and persistent neurological deficit; on the other hand, constantly high pressure on the integumentary tissues, displacement, friction, high humidity, microcirculation disorders and limitations of the patient's mobility. The incidence of decubitus ulcers in hospitals is still high. Decubitus ulcers in patients in a chronic critical condition are poorly treatable, often worsen or relapse, which significantly limits and slows down rehabilitation measures, increases the duration of the patient's stay in the hospital, and contributes to the development of septic complications. As part of the new scientific and clinical direction-"invasive rehabilitation of patients in need of prosthetics of vital functions", the Federal Scientific and Clinical Center for Resuscitation and Rehabilitation has developed a number of conservative and minimally invasive surgical techniques for the treatment of decubitus ulcers in patients in chronic critical condition: Nutritional status correction programs; stimulating techniques (laser technologies, electrical technologies), biostimulating techniques (compositions based on fibrin complex), and surgical methods.

Recent publications

1. Krylov Kirill Yu, Sergeev Ivan V, Yakovleva Alexandra V, Yagubyan Ruben S, Yakovlev Alexey A, Petrova Marina V. The role of indirect calorimetry in the treatment and rehabilitation of patients in long-term unconsciousness after brain damage. Clinical nutrition and metabolism. 1, № 1, c. 10-16
2. Yakovlev A A, Shulutko A M, Osmanov E G, Gandybina E G, Gogokhia T R. Low-energy laser technology in the complex treatment of bedsores in patients with severe brain damage. Georgian medical news, Assotsiatsiia delovoi pressy Gruzii (Russian Federation), № 6, c. 7-12
3. Yakovlev A A, Shulutko A M, Osmanov E G, Yakovleva A V, Natroshvili A G, Nasirov F N, Batalova A R. Objectification of the choice of therapeutic tactics for decubital ulcers in patients in chronic critical condition due to brain damage. Moscow Surgical Journal, № 2, c. 90-97.

Speaker Biography

Alexey Iakovlev graduated from the Moscow Institute of Medical and Social Rehabilitation in 2007 with a degree in "Medical care". Later, he studied in a clinical residency in the specialty surgery at the Russian National Research Medical University named after N. I. Pirogov, underwent professional retraining in the specialty health organization and public health, completed professional training in the specialty oncology, completed professional training in the specialties endoscopy and medical and social expertise. Valid certificate of good clinical practice. Received a diploma of higher school teacher. Work experience in medical organizations is 14 years. Head of the Research Institute of Rehabilitation of a Federal Scientific and Clinical Center of Intensive Care and Rehabilitation. Author and co-author of 37 scientific publications. 5 copyright certificates: A patent for an invention. He is a member of the regional public organization Surgical Society - Wounds and Wound Infections (Russia) and The European Pressure Ulcer Advisory Panel (Europe).

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