

EQUINE WOUND HEALING ENHANCED BY ANIGRAN[®]

- TWO CASE REPORTS

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CASE REPORT A

A sixteen-year-old Lipizzaner stallion was presented with the dehiscence of the laparotomic wound. Anamnestic data were reporting laparotomy in the linea alba, the colic indication. The surgery went without complications. Post-surgery treatment included drug therapy as usual. A dehiscence of the proximal part of the wound was found after nine days, the solution involved surgery (re-surgery) and conservative techniques (fixation sutures, wound toilets, iodine preparations and dressings). A ventral hernia developed during the treatment (within a month) and gradually progressed. The long-term case history of the patient described herein was not mentioning wound healing complications or other diseases.

Day 29 after laparotomy, there was a change in the treatment of the post-surgery dehiscence, Anigran applied topically. Neither clinical revision nor ultrasonographic examination of the dehiscence after two days demonstrated serious disruption of peritoneum or post-surgery adhesions (Figure 1), the condition of the wound shown on Figure 2. The wound was showing a low and poor granulation and other typical symptoms of post-surgery dehiscence. In the median line, the wound size was reaching about 30 cm. Dressing and application of Anigran were carried out in two-day intervals. On day 6 of the treatment, the wound was showing secretion and improved quality of the granulation tissue. Progressive improvement in the dehiscence healing is visible in the image made after sixteen days of the treatment using Anigran (Figure 3).

The wound was covered with a high-quality granulation tissue, the formation of the epithelisation rim and wound contraction occurred. The defect size was 18 cm. The subsequent monitoring recorded the healing process in further time frames under the dressing and then without the dressing (Figure 4 and 5). The overall condition of the patient during therapy did not alter; the patient was accepting food and was not showing other clinical symptoms.

The case prognosis is good; the ventral hernia on the site of the dehiscence is irreversible. The local Anigran application with a dressing successfully resolved the potential complication of the laparotomy in the described case. No general treatment was administered during the Anigran therapy.



Figure 1. ultrasonography - dehiscence of the laparotomic wound, day 31 after surgery



Figure 2. day 3 of Anigran[®] treatment



Figure 3. - day 16 of Anigran[®] treatment



Figure 4. the wound after 2 months of therapy using Anigran[®]



Figure 5. wound after 4 months of therapy using Anigran[®]

CASE REPORT B

An eight-year-old English thoroughbred mare has caused itself a laceration-bruised wound on the lateral surface of the fetlock joint of the left hind limb. The wound was treated by lavage using a solution of povidone-iodine, the mare being generally administered antimicrobial therapy for eight days. The mare was in month 5 of pregnancy.

After eight days, the revision of the wound was carried out and the therapy changed to Anigran® applied topically (Figure 6). The revision showed deep necrosis, infection with low discharge and a skin pocket in the proximal part of the wound. Irritation of the fetlock sheath and adjacent structures was minimal. The mare was showing limping, first degree. A careful debridement of the wound was carried out, Anigran® administered locally and a thin monolayer covering dressing applied to the wound, the animal re-dressed on a three to four day basis.

On day 6 of the treatment using Anigran®, the wound was entirely lacking secretion.

The hypergranulation tissue was excised (Figure 7). The day 13 of the Anigran® therapy, the skin pocket was completely closed, the wound showing no signs of necrosis and infection (Figure 8). Moderate hypergranulation was ablated surgically.

Monitoring the healing process after six days showed a satisfactory wound contraction, with the second ablation of the overgrowing tissue performed (Figure 9). On day 26, the wound was left without the dressing, with Anigran® applied topically once per day (a thin layer). The wound healing under the scab completed within three weeks. Total consumption of Anigran® was 120 ml. The case prognosis is favourable.



Figure 6. the wound condition prior commencement of the treatment using Anigran®



Figure 7. day 6 of Anigran® treatment



Figure 8. day 13 of Anigran® treatment



Figure 9. day 26 of Anigran® treatment