

HYPERBARIC OXYGEN THERAPY FOR PLASTIC & RECONSTRUCTIVE SURGERY

HyOx treats the following approved and covered conditions:

- Compromised skin grafts and flaps
 - Referral Protocol: Immediately, when post-surgical site shows signs of poor perfusion (dehiscence, necrosis, blistering, erythema) and infection
- Pre- and post- surgery in a previously radiated area (prior to breast reconstruction or augmentation) to create viable, hyper-oxygenated tissue
 - Referral Protocol: When patients with a history of radiation therapy require surgery in the affected are
- Acute peripheral arterial insufficiency (chronic, non-healing wounds PO_2 of ≤ 40 mmHg common in peripheral arterial occlusive disease and diabetic lower extremity wounds)
 - Referral Protocol: After 30 days of patient presenting no healing progression with traditional wound care
- Necrotizing soft tissue and bone infections (including necrotizing fasciitis, chronic osteomyelitis, non-clostridial myonecrosis, crepitant anaerobic cellulitis, zygomycosis, and Fournier's Gangrene)
 - o Referral Protocol: Immediately, after confirmation of progressive infection
 - In chronic refractory osteomyelitis, when the progressive infection fails to respond to definitive surgical debridement and four to six weeks of antibiotic therapy

Thermal burns

 Referral Protocol: Immediately, to help minimize edema, preserve marginally viable tissue, protect the microvasculature, enhance host defenses, and promote wound closure

Benefits of Hyperbaric Oxygen Therapy:

- Supports and salvages tissues at risk from circulatory compromise: free skin grafts, pedicle flaps, random flaps, irradiated wounds and flaps, composite grafts, as well as free flaps by supersaturating the body with oxygen to promote healing of hypoxic tissue (1)
 - Thereby reducing the need for regrafting and repeat flap procedures
- Helps heal ischemic-reperfused tissues in skeletal muscle (2)
- Improves local host immune response, clears infection, enhances tissue growth and angiogenesis leading to progressive improvement in local tissue oxygenation and healing of hypoxic wounds
- Prevents conversion of partial to full thickness injury
- Preserves microcirculation (3)
- Stimulates angiogenesis in irradiated tissue helping achieve better outcomes in reconstructive surgery in previously radiated areas, especially the breast and abdomen (4)
- Reduces edema and fibrosis
- Elevates the tissue oxygen tension in third degree burns and the adjacent areas
 (5) to promote angiogenesis and epithelial regeneration
- Increases axial skin flap survival when administered during or immediately after total flap ischemia (6)
- Helps resolve infections combined with antibiotic and surgical debridement, by augmenting the transport of certain antibiotics across bacterial cell walls (antibiotic transport does not occur if oxygen tension levels are below 20 to 30 mmHg) (7, 8)

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