

**FIRST INTERNATIONAL CONGRESS OF AEPROMO  
"NEW HORIZONS FOR THE OZONE THERAPY"  
Pontevedra (Galicia) Spain  
Friday 5 and Saturday 6 June, 2009**

Original language: English

Abstract  
**Ozone Therapy in Problematic wounds  
A Clinical Study**

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Problematic skin ulcers and wounds are those who are difficult to treat. Some of them end by amputation of a limb. They are one of the major challenges in medicine.

Examples of those ulcers and wounds include necrotizing soft tissue infections, diabetic foot infections, pressure ulcers and non-healing post surgical wounds. The underlying pathology can be metabolic e.g. uncontrolled long standing diabetes mellitus, vascular insufficiency e.g. peripheral vascular diseases, vascular occlusions and chronic ischemia. However other factors contribute; including chronic infections, osteomyelitis, toxemia, low immunity, impaired renal and hepatic functions.

Management of these problematic wounds and ulcers necessitates a team of a physician, a surgeon and an ozone therapy expert. The wound should be properly diagnosed, vascular status assessed, proper control of blood glucose, removal of necrotic tissues and osteomyelitis, treatment of infection, correction of malnutrition and any underlying cause.

Medical ozone as an adjuvant therapy has a major role in the treatment. Medical ozone has a powerful bactericidal effect, it enhances the circulation, stimulates the metabolism and has a positive effect on the immunity. Ozone therapy is administered systemically by rectal insufflations and locally by bagging and/or ozonated water compresses. Sessions were started by three time per week and ended by once per week.

Fifty nine patients were included in this study. Their age ranged between 23 and 75 years. Out of them 31 (52.5%) continued the treatment and 28 (47.5%) did not continue the treatment. Good results obtained with 40 (67.8%) patients. Nineteen patients out of the total (32.2%) were cured, 21 (35.6%) improved. Five patients (8.5%) did not respond and 14 (23.7%) patients were not evaluated.

It can be concluded that medical ozone is an effective adjuvant line of treatment in problematic wounds and ulcers.