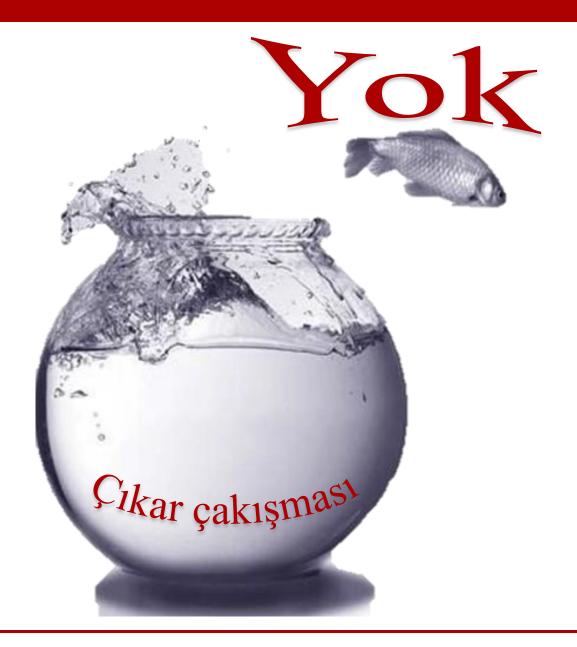


# Oksijen Tedavisi

## Dr. Mesut MUTLUOĞLU

GATA Haydarpaşa Eğitim Hastanesi Sualtı Hekimliği ve Hiperbarik Tıp Servisi



# ULUSAL SUALTI HEKİMLİĞİ VE HİPERBARİK TIP KONGRESİ

12-13 Nisan 2013 İSTANBUL











Yara İyileşmesinde Topikal Oksijenin Yeri Vardır

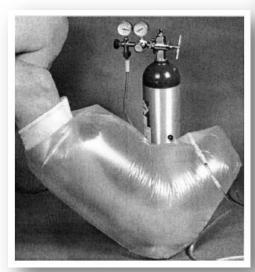
Mesut Mutluoğlu

GATA Haydarpaşa Eğitim Hastanesi, Sualtı Hekimliği ve Hiperbarik Tıp Servisi

http://www.sualti.org/tezler.html





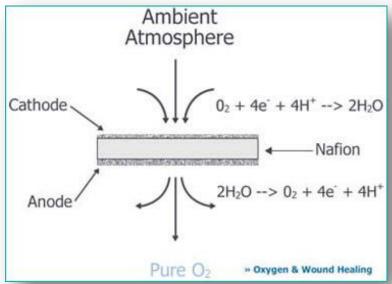
















Treatment averages 49 days to heal the wound at a cost of approximately \$47 per day, or \$2450 per patient

Boguslav H.

Fischer

1969



Topikal O2

#### Introduction

The beneficial effect of hyperbaric oxygen on some wounds and skin lesions 1-4 suggested that similar effects might be expected if topical hyperbaric oxygen were used to treat skin ulcers and pressure sores.







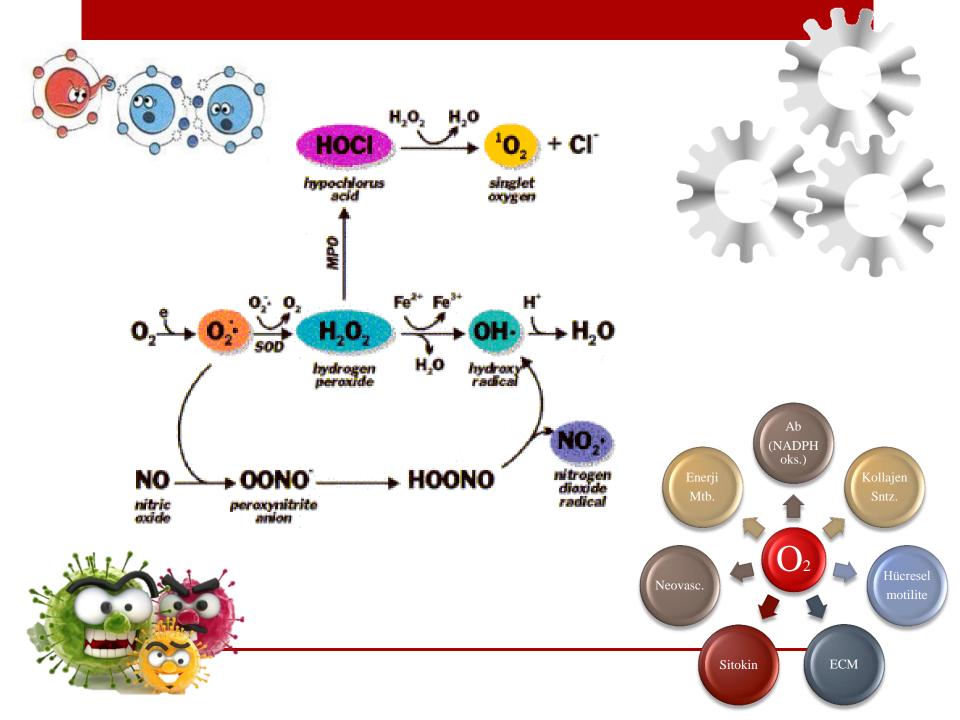
#### **EDITORIAL**

## Topical oxygen is not hyperbaric oxygen (HBO<sub>2</sub>).

C. A. PIANTADOSI

Interest in TOT is being rekindled by current scientific knowledge that cell signaling by reactive oxygen species (ROS), such as hydrogen peroxide, is involved in pathways that regulate cell growth, differentiation, and proliferation (5). Normal mammalian cells not only consume O<sub>2</sub> for metabolic purposes, but they generate ROS. Low level ROS production serves essential intra- and intercellular communication functions. Thus, basal ROS production offers certain advantages, such as facilitating adaptation to changes in milieu, and even promotes cell survival during times of stress.

The point of this discussion is that changes in wound  $PO_2$  have important physiological implications that are independent of aerobic metabolism. Therapies involving minor or locally limited changes in  $PO_2$  may have beneficial effects on wound healing. Therefore, topical application of  $O_2$  to problem wounds, although likely to produce only minimal changes in tissue  $O_2$  content relative to  $O_2$ , has a theoretical rationale. However, unlike  $O_2$ , a benefit of  $O_2$  to problem wound healing has never been demonstrated scientifically. TOT is not  $O_2$ .



## **OKSIDATIF STRESS**

THE THIN RED LINE



# OKSIDATIF HASAR







## Chandan K Sen

Wexner Medical Center at The Ohio State University
Tissue Injury and Repair - Wound Healing - Redox Biology - Regenerative
Medicine - Vitamin E Tocotrienol
Verified email at osumc.edu
Homepage

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Citations	15037	7805						
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i10-index	201	167	1996	1998	2003	2008		2013
						Show: 20	1 12 133	Next >
Title / Author	or						Cited by	Year
CK Sen, L	Packer	redox regula		ne transcrip	otion.		1743	1996
Oxidants and antioxidants in exercise CK Sen Journal of Applied Physiology 79 (3), 675-686					593	1995		
Redox si	gnaling		erging the	rapeutic po	tential of thiol ar	ntioxidants	317	1998
Dermal ex	cisional	wound heali	ng in pigs f	ollowing tre	atment with topica	lly applied		
pure oxygen  RB Fries, WA Wallace, S Roy, P Kuppusamy, V Bergdall, GM Gordillo, WS Melvin  Mutation Research/Fundamental and Molecular Mechanisms of Mutagenesis 579 (1					60	2005		



Available online at www.sciencedirect.com





Mutation Research 579 (2005) 172-181

www.elsevier.com/locate/molmut Community address: www.elsevier.com/locate/mutres

## Dermal excisional wound healing in pigs following treatment with topically applied pure oxygen

Richard B. Fries, William A. Wallace, Sashwati Roy, Periannan Kuppusamy, Valerie Bergdall, Gayle M. Gordillo, W. Scott Melvin, Chandan K. Sen\*

Laboratory of Molecular Medicine, Dorothy M. Davis Heart and Lung Research Institute and Comprehensive Wound Center, Department of Surgery, The Ohio State University Medical Center, Columbus, OH 43219, USA

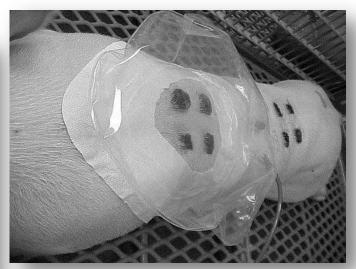
> Received 11 February 2005; received in revised form 18 February 2005; accepted 18 February 2005 Available online 18 August 2005

## **OxyLite**<sup>™</sup>

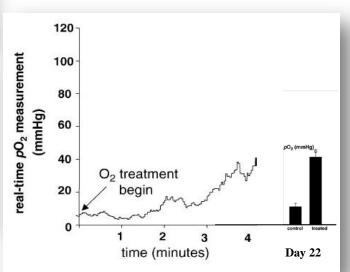
In vivo and in vitro oxygen monitoring

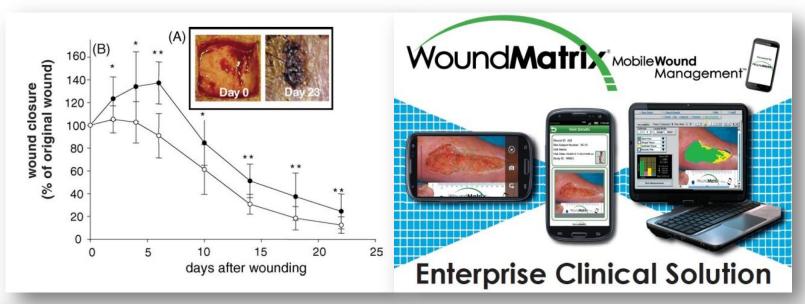


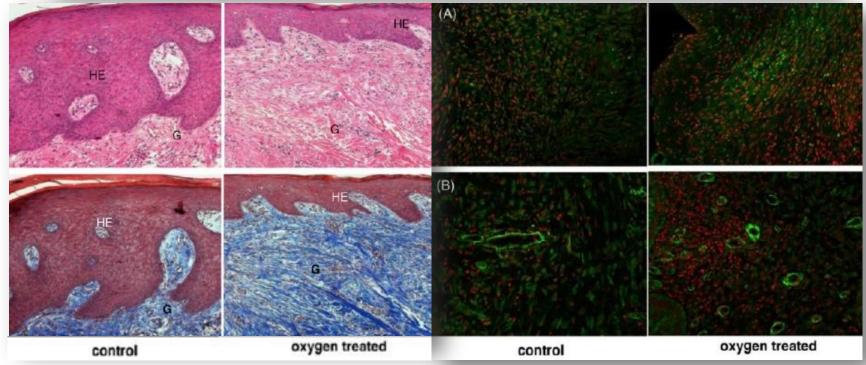
- · Hypoxic tissue culture
- Tissue engineering
- Hypoxia/ischemia in tissues



6 gün, günde 3 saat, 1 ATA, 3-6lt/dk %100 o2









#### TOPICAL HYPERBARIC OXYGEN TREATMENT OF PRESSURE SORES AND SKIN ULCERS

BOGUSLAV H. FISCHER

Reprinted from THE LANCET, August 23, 1969, pp. 405-409

n=52



Reprinted from
The Journal of Dermatologic Surgery, Inc.
Vol. 1 No. 3 October 1975 Copyright © 1975

Treatment of Ulcers on the Legs With Hyperbaric Oxygen

BOGUSLAV H. FISCHER, M.D.

n=30

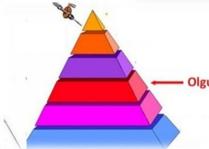


J Am Podiatry Assoc. 1982 Apr;72(4):180-5.

The effect of hyperbaric oxygen on lower extremity ulcerations.

Diamond E, Forst MB, Hyman SA, Rand SA.

n=?



Olgu serileri





## JAMA Dermatology

Article | May 1984

#### A Simplified Hyperbaric Oxygen Technique for Leg Ulcers

Madalene C. Y. Heng, MBBS, FRACP, FACD; Jennifer P. Pilgrim, MBBS; Francis W. J. Beck, MS

n=20



J Dermatol Surg Oncol. 1993 Aug;19(8):784-93.

Topical hyperbaric therapy for problem skin wounds.

Heng MC.

n=?



Ostomy Wound Manage. 2000 Sep;46(9):18-28, 30-2.

Angiogenesis in necrotic ulcers treated with hyperbaric oxygen.

Heng MC<sup>1</sup>, Harker J, Csathy G, Marshall C, Brazier J, Sumampong S, Paterno Gomez E.

n=40

Ostomy Wound Manage. 2000 Mar;46(3):52-60, 62.

Enhanced healing and cost-effectiveness of low-pressure oxygen therapy in healing necrotic wounds: a feasibility study of technology transfer.

Heng MC1, Harker J, Bardakjian VB, Ayvazian H.

n=15

Olgu serileri

Dr-Madalene-Heng-MD









Physicians

CONTACT

SOCIAL

"DEDICATED TO IMPROVING WELLNESS FROM THE INSIDE OUT"





### Topical oxygen as an adjunct to wound healing: a clinical case series

Loree K. Kalliainen, Gayle M. Gordillo, Richard Schlanger, Chandan K. Sen\*

Department of Surgery, 512 Davis Heart & Lung Research Institute, The Ohio State University Medical Center, 473 West 12th Avenue, Columbus, OH 43210, USA

Received 29 October 2002; accepted 4 November 2002

 $\overline{n=32}$ 

Clin Exp Pharmacol Physiol. 2008 August; 35(8): 957–964. doi:10.1111/j.1440-1681.2008.04934.x.



# Topical Oxygen Therapy Induces VEGF Expression and Improves Closure of Clinically Presented Chronic Wounds

Gayle M Gordillo<sup>1,2</sup>, Sashwati Roy<sup>1,2</sup>, Savita Khanna<sup>1,2</sup>, Richard Schlanger<sup>1,2</sup>, Sorabh Khandelwal<sup>1,3</sup>, Gary Phillips<sup>4</sup>, and Chandan K. Sen<sup>1,2</sup>

n=25



8	20 000 0000	Table 1. Baseline patient and	wound characte	ristics	20
1	Topical '	Characteristics	Control group	TWO <sub>2</sub> group	the
٦	<b>Treatme</b>	Age (years)	N = 11 63.4 (9.6)	N =17 62.4 (9.7)	t
l	Jicers:	Gender (male) HbA1c (%) Current smoker	8 (72.7%) 7.4% (1.2%) 0 (0%)	12 (70.6%) 7.3 (1.2) 2 (11.8%)	Study
Eric Blackman, Railton, MD, FF		Ankle-brachial systolic pressure index (mm Hg)	1 (0.18)	0.9 (0.21)	, FRCS(C); Richard
	Transcription, Tries, Tr	Wound duration before therapy (months)	3.2 (0.4)	6.1 (5.8)	
24	OSTOMY WOUND	Wound area (cm²) Wound stage	1.4 (0.6) <sup>a</sup>	4.1 (4.3) <sup>a</sup>	www.o-wm.com
		CII	0 (0%)	0 (0%)	
		CIII	0 (0%)	1 (5.9%)	
		DII	7 (63.6%)	5 (29.4%)	
		DIII	4 (36.4%)	11 (64.7%)	

Sonuç: TO tedavisi alan ve iyileşme gösteren 17 hastanın 14'ü (%82.4) ortalama 56 günde iyileşirken, kontrol grubunda iyileşme gösteren 11 hastanın 5'inde (%45.5) bu süre 93 gün olarak bulunmuştur

Vaka / kontrol

# Randomized Controlled Trial of Topical Hyperbaric Oxygen for Treatment of Diabetic Foot Ulcers

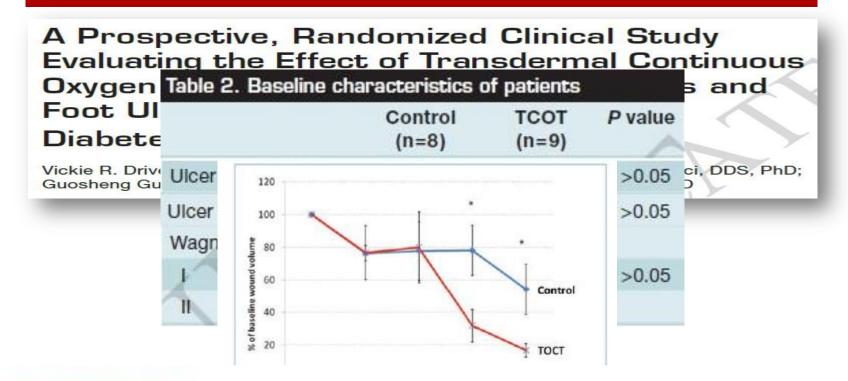
Camilo A. Leslie, MD Francisco L. Sapico, MD, FACP Virginia J. Ginunas, MT Rodney H. Adkins, PhD

TABLE 1
Baseline clinical characteristics

	Group 1 (THO)	Group 2 (control)	Total
n n	12	16	28
Age (yr)	$52.8 \pm 8.6$	$46.2 \pm 8.5$	$49 \pm 8.9$
Male/female	6/6	10/6	16/12
IDDM/NIDDM	0/12	4/12	4/24
Diabetes duration (yr)	$11.4 \pm 7.6$	$13.2 \pm 8$	$12.4 \pm 7.8$
Ulcer duration (wk)	$6.4 \pm 6.2$	$6.2 \pm 7.8$	$6.3 \pm 7$
Previous amputations	7	5	12
Abnormal arterial Doppler study			
(ankle/brachial ratios < 0.5 or > 1.5)	1 of 10	2 of 14	3 of 24
Abnormal bone scan or X rays	6	( <mark>5</mark> )	11
White blood cell count >12,000/mm <sup>3</sup>	0	2	2
Erythrocyte sedimentation rate			
(mm/h, Westergren method)	$72 \pm 31$	$66 \pm 40$	$71 \pm 36$

THO, topical hyperbaric oxygen treatment; WBC, white blood cell.

Lalettavin Murakabeli Tetebb

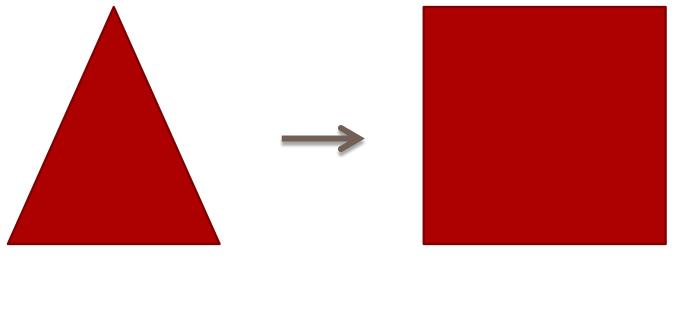


## Limitations

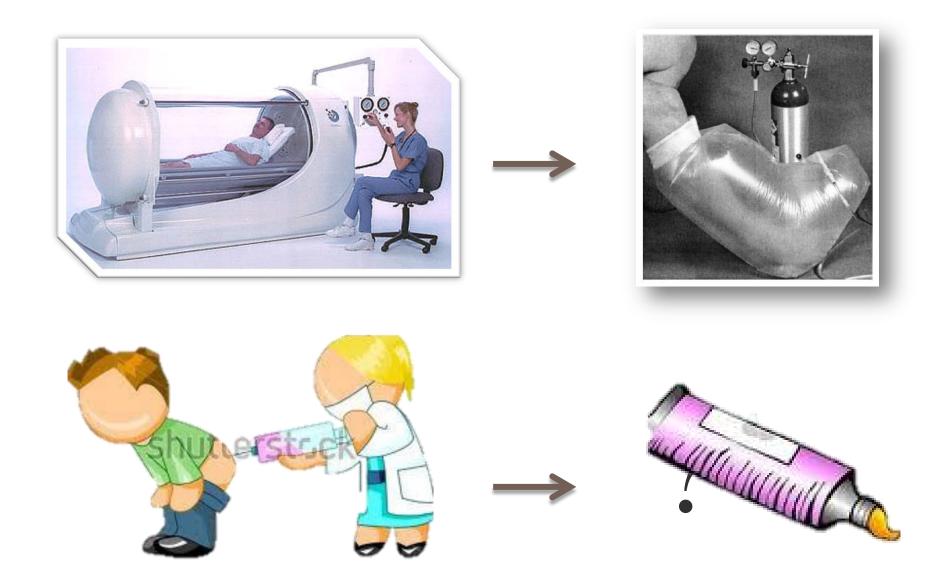
An important limitation of this study is that treatment was limited to 4 weeks and wounds were not followed until healing, so time to healing is not known. In addition, as

## Sonuç

- TOT' un yara tedavisinde kullanımı halen tartışmalı bir konudur, çok sayıda geniş ve bilimsel kanıt düzeyi yüksek çalışmalara ihtiyaç vardır.
- TOT'un kemiğe difüze olmadığı kabul edilmektedir, bu nedenle Wagner grade 3 ve üstü yaralarda etkili olmayacağı söylenebilir.
- Ayrıca Wagner grade 1 ve 2 olarak sınıflandırılan yaraların büyük çoğunluğu ideal bir yara bakım stratejisi ile iyileşebilmektedir.
- Bu şartlar altında, güvenilir ve tekrarlanabilir veriler elde edilinceye kadar TOT' un kronik yarada rutin kullanımı önerilemez.



 $3 \rightarrow 4$ 





# Teşekkürler