

2nd International Conference on**ADVANCES IN SKIN,****WOUND CARE AND TISSUE SCIENCE**

November 9-10, 2017 | Frankfurt, Germany

ATYPICAL WOUNDS: DIAGNOSIS AND MANAGEMENT**Valentina Dini***

*University of Pisa, Italy

Wounds are defined as chronic when they fail to proceed chronologically through the stages of healing to achieve structural and functional integrity. The majority of chronic wounds originates from vascular insufficiency, neuropathy, or prolonged pressure. Atypical wounds are those not secondary to these causes, but rather the result of infection, metabolic disorders, neoplasms, and inflammatory processes¹. An estimated 10% of lower extremity ulcers are due to these less frequent etiologies². Although a wound biopsy generally is recommended in the case of refractory, nonhealing ulcers or when wounds present with atypical signs and symptoms, little is known about the distribution of atypical ulcers. A biopsy usually renders useful diagnostic information to inform management decisions and is especially important when treating an atypical wound³. The suspicion that an ulcer is atypical arises when the clinical presentation differs from what is commonly encountered. A wound should be evaluated for an atypical etiology if it is present on a location unusual of a common chronic wound, appears different from a common wound, has unusual symptoms, including pain out of proportion to that of a common wound, or does not respond to conventional therapy⁴. Pain is commonly a sign of infection, but it also may be associated with inflammatory causes of atypical ulcers including pyoderma gangrenosum and vasculitis. Ulcers that do not heal at the expected rate despite receiving treatment should be biopsied to elucidate an undiagnosed etiology or an additional cause. A broad differential diagnosis exists for these ulcers. Providing wound care with the goals of optimizing wound healing by decreasing swelling, controlling the bacterial burden, and avoiding an irritant or allergic contact dermatitis are equally important. Treatment of the underlying illness will often improve the ulceration as well. A multi-disciplinary approach is necessary to manage these patients.