Pyoderma Gangrenosum Treatment: A Steroid Free Option


Within the first two weeks of the initial study we decided to try the Hydrofera Blue™ on a long-term patient of ours at the Wound Care Center. This patient had multiple long-standing chronic ulcers. This patient had tried many treatment modalities over the past three years including: Silver, Hydrogel, Vaseline gauze, wet to dry dressings, and Antibiotic ointment. Once this patient became a patient of the Wound Care Center the diagnosis of Pyoderma gangrenosum was made. See case study #1

What is Pyoderma Blue™? See table 3.

How Does Pyoderma Blue™ work? The three components of the dressing noted above each play an important role in how and why this product works so well. See table 4.

The results of both studies are as follows: Initial Wound Care Center study. See table 5, Pyoderma gangrenosum study. See table 6. Overall Clinical observations. See table 7.

We are now using Hydrofera Blue™:® Radiation Burns, Foliculitis, Psoasitis, Eczema, Cellulitis, All types of chronic non-healing ulcers, necrotic wounds, Pyoderma gangrenosum, infected wounds including MRSA, VRE, and Candida Albicans. To date there have been no untoward reactions to the Hydrofera Blue Dressing.

In conclusion Hydrofera Blue™ has been effective on all types of wounds: infected wounds, venous wounds, trauma wounds, pilonidal cysts, and even Pyoderma gangrenosum. It is administered at a fraction of the cost of other dressings with similar properties. Hydrofera Blue is safe and simple to use. We have successfully treated multiple PG cases with Hydrofera Blue alone, not with the usual high dose steroids.

We would recommend the use of Hydrofera Blue on any PG wound with or without the use of steroids. I would certainly use Hydrofera Blue as an initial first line dressing on any wound in the Wound Care Center.

Hydrofera PVA Sponge

• Naturally Hydrophilic
• Extremely Soft “wet”
• Natural Vacuum
• Biocompatible
• Extremely Strong
• Micro Porous Structure
• Capture Affinity
• Used in treatment for >30 years

Hydrofera Blue™

• Methylene Blue
• Gentian Violet
• A Steroid Free Option

Hydrofera PVA Sponge

• Nature’s Fusion
• Safe and Simple to use

Pyoderma Gangrenosum Treatment

_56 year old female with Rheumatoid Arthritis for 20 years developed open wounds on bilateral lower extremities. She was treated by her primary care physician for over a year with multiple dressings including wet to dry and Silvadine. The patient presented to the wound care center, a biopsy was done and a diagnosis of Pyoderma Gangrenosum was made. The patient began using Hydrofera Blue™ dressings as part of a study group on 9/25/02. The wound duration prior to this treatment was 12 months._

The patient noted a 75% wound reduction within the first seven days of treatment and the wound edges flattened without debridement, as debridement is contraindicated in Pyoderma. On 11/03/02 the wounds converted to two smaller wounds and on 1/22/03 the wounds were healed.

_Sponsored by: Hydrofera® Pioneering Advancements in PVA Technology_

Pyoderma Gangrenosum (PG)

- The lesions usually present on the lower extremities, may also appear on trunk, upper extremities, face and mouth.
- Lesions include papules, papules, and plaques that can evolve and resolve without passing through an ulcerative stage.
- Association to lesions of PG before ulceration shows no bacterial growth. The role of bacteria cultured from ulcerated lesions is that of secondary invaders or colonizers.
- Patient clinical features of PG are the rapid development of a necrotizing ulceration.
- Phageoedematous ulcerations are characteristic, painful, the borders are undetermined and surrounded by livid red edema. Welled wound bed test appearance. Ulcer has cleft formation type of scar.
- Diagnosis clinical histotechnology is characteristic but not pathognomonic; no specific laboratory changes.


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