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Case History 2
6th June 2019.

#Client 2. Female. Aged 64 Treatment Date. 6th-13th June 2019.
Retired Teacher.

#Treatment 1. 6th June 2019.

This lovely Icelandic lady has experienced more medical interventions than most. Diagnosed with septicaemia in 2016 following a mastectomy operation for breast cancer she entered a difficult decision process whereby both of her lower legs needed to be amputated below the knee to effectively save her life. Following this surgery she also needed to commence dialysis every 2 days due to kidney failure. The dialysis continues for the rest of her life and she needs to manage this around her day to day life around this as it leaves her exhausted for 24 hours following the treatment. Finding the most suitable times for MSTR® treatment was therefore a natural challenge.

Her attitude is very humbling, her positivity regardless of the situation creates reflection in all that meet her. Her most pressing symptoms relate to the contact point where the prosthetic and the neoprene insert meet together in relation to the surface of the amputations. On the first interaction the relief we wanted to create bypassed the need for photo taking - is apologies for not possessing photos here.

Both sites of the amputation left and right were infected and seeping. The odour as well indicated that we may have infection and this was relayed to her to visit her GP as soon as possible. The soreness and pain at these sites was very apparent - but she kept smiling.

The static prosthetics enforce a gait pattern that can only be achieved through the frontal plane and then an awkward rotation forwards to bring the leg through. The rubbing, friction and impact of this has created the local problem and the wounds. We adjusted her padding on the legs, suggested other ideas to reduce the direct contact, such as gauze pads, fleece etc. The overriding important factor was to reduce the inflammation around the scar sites, which are multiple.



The emotional impact of the situation was also very clear. A mixture of pain and frustration with a little bit of grief for her independence. She was not quick to let me know this and explained it to me in private. With a smile. She sincerely wasn't enjoying the "burden" she felt she was to family members and friends and this brought a tear to her eye. On saying this though she is defiant - probably the best word for it and ensures she takes her independence wherever she can.

I applied MSTR® for a total of 12 minutes and allowed her to rest for 20 minutes before assessing her again.

It appeared to the eye that the scars were not as angry, inflamed or itchy.

We left it alone after this to await feedback on the next treatment. Considering the complexity of the scars and the pathology, I was unsure as to what the progress or outcomes could be.

#Treatment 2. 13th June 2019.

This is a very happy lady indeed. On examination of the scars, the infection had reduced right down, any fluid, pus or blood was no longer leaking from the area and the gauze pads she had on were clear. She is able to walk more comfortably for longer periods of time on her prosthetics, increasing her ambulant time from 1 hour a day to 3 hours a day, which is essential to support the kidneys as well and has been encouraged and facilitated by her medical support team and family.

All anti-biotics have been stopped along with the steroids.

The “angriness” around the scars has faded and interestingly the folds, curves and crevasses increased in size, but were symptom free. Her attitude is still incredibly positive and she was very clear to state that this was the largest gain in her life. The ability to manage herself without people changing dressings, administering medication and checking on her all the time.



Left amputation site. The folds that you can see are not as deep or apparent on the first visit. Now they are dry and although more obvious, the tissue is healthier, more mobile and not infected.



Right leg amputation site. She felt lots of sensation on the right side, tingling, “whizzing” sensations and a flowing feeling. She is not aware of the right leg at all now when walking. No irritation.



Static Prosthetic. You can see from the picture that these particular prosthetics are not very forgiving and enforce a very particular gait causing lower back pain. I treated her for this also while we were there.

The outlook is clearer now and if we can maintain the progress on the scar sights she won't need further amputations to remove the infection.

We will continue the work over the following months.