

## Exklusionslista Bensår/Exclusion list Leg ulcer

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The following studies have after full text review, not fulfilled the inclusion criteria and do therefore not form the basis for the evidence-based results. A single study might have occurred in several interventions but is only reported once.

A bilayered living skin construct (APLIGRAF) accelerates complete closure of hard-to-heal venous ulcers
Abisi S, Tan J, Burnand KG. Excision and meshed skin grafting for leg ulcers resistant to compression therapy. <i>British Journal of Surgery</i> . 2007;94:194-7.
Ahnlide I, Bjellerup M. Efficacy of pinch grafting in leg ulcers of different aetiologies. <i>Acta Derm Venereol</i> 1997;77:144-145.
Alvarez OM, Fahey CB, Auletta MJ, Fernandez-Obregon A. A novel treatment for venous leg ulcers. <i>Journal of Foot and Ankle Surgery</i> . 1998;37:319-24.
Andriessen A, Polignano R, Abel M. Monitoring the microcirculation to evaluate dressing performance in patients with venous leg ulcers. <i>Journal of wound care</i> . 2009;18:145-6.
Andriessen A, Polignano R, Abel M. Monitoring the microcirculation to evaluate dressing performance in patients with venous leg ulcers. <i>J Wound Care</i> 2009;18:145-6.
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Armstrong DG. Manuka honey improved wound healing in patients with sloughy venous leg ulcers. <i>Evidence-Based Medicine</i> 2009;14:148.
Arnold TE, Stanley JC, Fellows EP, Moncada GA, Allen R, Hutchinson JJ, et al. Prospective, multicenter study of managing lower extremity venous ulcers. <i>Ann Vasc Surg</i> . 1994;8:356-62.

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Arosio E, Ferrari G, Santoro L, Gianese F. A placebo-controlled, double-blind study of mesoglycan in the treatment of chronic venous ulcers. <i>European Journal of Vascular and Endovascular Surgery</i> 2001;22:365-372.
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Bishop JB, Phillips LG, Mustoe TA, VanderZee AJ, Wiersema L, Roach DE, et al. A prospective randomized evaluator-blinded trial of two potential wound healing agents for the treatment of venous stasis ulcers. <i>Journal of Vascular Surgery.</i> 1992;16:251-7.

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Bitsch M, Saunte DM, Lohmann M, Holstein PE, Jorgensen B, Gottrup F. Standardised method of surgical treatment of chronic leg ulcers. <i>Scandinavian Journal of Plastic and Reconstructive Surgery and Hand Surgery</i> . 2005;39:162-9.
Bizer LS, Ramos S, Weiss PR. A prospective randomized double blind study of perioperative antibiotic use in the grafting of ulcers of the lower extremity. <i>Surgery Gynecology and Obstetrics</i> 1992;175:113-114.
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Dale JJ, Ruckley CV, Harper DR, Gibson B, Nelson EA, Prescott RJ. Randomised, double blind placebo controlled trial of pentoxifylline in the treatment of venous leg ulcers. <i>BMJ: British Medical Journal</i> ;319:875-8.
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Demling RH, Niezgoda JA, Haraway GD, Mostow EN. Small intestinal submucosa wound matrix and full-thickness venous ulcers: preliminary results. <i>Wounds: A Compendium of Clinical Research &amp; Practice</i> 2004;16:18-22.
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Dunford C. The use of honey-derived dressings to promote effective wound management. <i>Prof Nurse</i> 2005;Apr 20:35-8.
EMLA cream as a topical anesthetic for the repeated mechanical debridement of venous leg ulcers: a double-blind, placebo-controlled study
Escaleira R, Cardoso M, Rego J, Macedo P, Midoes A. Efficacy of a two-component compression system for the therapy of venous leg ulcers. <i>J Wound Care</i> 2010;19:104-9.
Falabella AF, Carson P, Eaglstein WH, Falanga V. The safety and efficacy of a proteolytic ointment in the treatment of chronic ulcers of the lower extremity. <i>J Am Acad Dermatol.</i> 1998;39:737-40.
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Franks PJ, Moffatt CJ. Health related quality of life in patients with venous ulceration: Use of the Nottingham health profile. <i>Quality of Life Research</i> . 2001;10:693-700.
Franks PJ, Moody M, Moffatt CJ, Martin R, Blewett R, Seymour E, et al. Randomized trial of cohesive short-stretch versus four-layer bandaging in the management of venous ulceration. <i>Wound Repair &amp; Regeneration</i> . 2004;12:157-62.
Franks PJ, Moody M, Moffatt CJ, Patton J, Bradley L, Chaloner D, et al. Quality of life in a trial of short stretch versus four-layer bandaging in the management of chronic venous ulceration. <i>Phlebology</i> . 2004;19:87-91.
Franks PJ, Oldroyd MI, Dickson D, Sharp EJ, Moffatt CJ. Risk factors for leg ulcer recurrence: a randomized trial of two types of compression stocking. <i>Age Ageing</i> 1995;24:490-4.
Gethin G, Cowman S. Manuka honey vs hydrogel -- a prospective, open label, multicentre, randomised controlled trial to compare desloughing efficacy and healing outcomes in venous ulcers. <i>Journal of Clinical Nursing</i> . 2009;18:466-74.
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Gohel MS, Barwell JR, Earnshaw JJ, Heather BP, Mitchell DC, Whyman MR, et al. Randomized clinical trial of compression plus surgery versus compression alone in chronic venous ulceration (ESCHAR study)--haemodynamic and anatomical changes. <i>Br J Surg</i> . 2005;92:291-7.
Gottrup F, Jorgensen B, Karlsmark T, Sibbald RG, Rimdeika R, Harding K, et al. Reducing wound pain in venous leg ulcers with Biatain Ibu: a randomized, controlled double-blind clinical investigation on the performance and safety. <i>Wound Repair Regen</i> . 2008;16:615-25.

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Gottrup F, Jorgensen B, Karlsmark T, Sibbald RG, Rimdeika R, Harding K, et al. Less pain with Biatain-Ibu: initial findings from a randomised, controlled, double-blind clinical investigation on painful venous leg ulcers. <i>Int Wound J.</i> 2007;4 Suppl 1:24-34.
Grabs AJ, Wakely MC, Nyamekye I, Ghauri ASK, Poskitt KR. Colour duplex ultrasonography in the rational management of chronic venous leg ulcers. <i>British Journal of Surgery</i> 1996;83:1380-1382.
Greguric S, Budimcic D, Soldo-Belic A, Tudoric M, Baricevic B, Cajkovic V, et al. Hydrocolloid dressing versus a conventional dressing using magnesium sulphate paste in the management of venous leg ulcers. <i>Acta Dermatovenerologica Croatica</i> 1994;2:65-71.
Guan H, Wang Y, Zhang B, Ye W, Fu W, Liang W, et al. Comparison of beraprost and ticlopidine in Chinese patients with chronic peripheral arterial occlusion: a multicenter, single-blind, randomized, controlled study. <i>Current Therapeutic Research</i> 2003;64:488-503.
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Harding K, Sumner M, Cardinal M. A prospective, multicentre, randomised controlled study of human fibroblast-derived dermal substitute (Dermagraft) in patients with venous leg ulcers. <i>Int Wound J</i> 2013;10:132-137.
Harding KG, Krieg T, Eming SA, Flour ML, Jawien A, Cencora A, et al. Efficacy and safety of the freeze-dried cultured human keratinocyte lysate, LyphoDerm 0.9%, in the treatment of hard-to-heal venous leg ulcers. <i>Wound Repair Regen</i> 2005;13:138-47.
Harma M, Asko-Seljavaara S, Lauharanta J. Surgical treatment of chronic leg ulcers [11]. <i>Acta Derm Venereol</i> 1994;74:484-485.
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Heinen M, Borm G, van der V, Carine, Evers A, Oostendorp R, et al. The Lively Legs self-management programme increased physical activity and reduced wound days in leg ulcer patients: Results from a randomized controlled trial. <i>International Journal of Nursing Studies</i> . 2012;49:151-61.
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Hommel L, Ruffieux P, Saurat JH. Treatment of chronic leg ulcers by grafts: A long-term evaluation. <i>Dermatology</i> 1996;193:160.
Humphreys ML, Stewart AHR, Gohel MS, Taylor M, Whyman MR, Poskitt KR. Management of mixed arterial and venous leg ulcers. <i>British Journal of Surgery</i> . 2007;94:1104-7.
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Iida O, Soga Y, Hirano K, Kawasaki D, Suzuki K, Miyashita Y, et al. Midterm outcomes and risk stratification after endovascular therapy for patients with critical limb ischaemia due to isolated below-the-knee lesions. <i>European Journal of Vascular and Endovascular Surgery</i> . 2012;43:313-21.
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Karimi L, Miller C, Kapp S, Newall N, Lewin G, Carville K, et al. Client perceptions of two types of antimicrobial dressings and compressions bandaging. <i>Wound Practice &amp; Research</i> . 2010;18:124-32.
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Nedanstående studier har efter fulltextgranskning inte uppfyllt inklusionskriterierna och ligger således inte till grund för de evidensbaserade resultaten. En och samma studie kan ha förekommit i flera interventioner men redovisas endast en gång.

The following studies have after full text review, not fulfilled the inclusion criteria and do therefore not form the basis for the evidence-based results. A single study might have occurred in several interventions but is only reported once.

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## Exklusionslista Bensår/Exclusion list Leg ulcer

Nedanstående studier har efter fulltextgranskning inte uppfyllt inklusionskriterierna och ligger således inte till grund för de evidensbaserade resultaten. En och samma studie kan ha förekommit i flera interventioner men redovisas endast en gång.

The following studies have after full text review, not fulfilled the inclusion criteria and do therefore not form the basis for the evidence-based results. A single study might have occurred in several interventions but is only reported once.

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