Authors' Reply

Sir,

We appreciate Viroj Wiwanitkit's^[1] comments on our article: "Comparison of vacuum-asisted closure (VAC) and moist wound dressing in the treatment of diabetic foot ulcers".^[2] They have mentioned that although VAC can be useful for diabetic foot care, its complications such as retention of polyurethane foam should be kept in mind.

Negative pressure wound therapy (NPWT) or VAC therapy is a closed-loop, non invasive active system, characterised by a controlled and localised negative pressure applied on porous polyurethane absorbent foams. It promotes healing of acute and chronic wounds.^[3]

Every therapeutic modality has its own advantages and disadvantages. For example, in NPWT, small fragments of foam can be left in the wound and delay the wound healing. This is a very rare complication and there are many randomised clinical trials which show that NPWT is a safe and effective treatment modality for different acute or chronic ulcers with different etiologies.^[4,5] So, there is no doubt that only qualified

medical/paramedical personnel should use it to avoid possible complications that can occur after an improper application. [3]

In conclusion, we believe that using VAC by a trained and expert medical team is a very safe and effective therapeutic option for diabetic foot ulcers in well selected patients.

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