

## **The Ransart Boot**

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### **Background and aims:**

Diabetic neuropathic foot ulcers heal when offloaded. Healing rate versus time is higher with irremovable casts. Why? Because of better compliance? Because of diminished activity? We have tried to build a removable windowed cast enhancing compliance and allowing normal day life activity: the Ransart boot.

### **Materials and methods:**

This preliminary study includes 11 diabetic, neuropathic (VPT >25 V) patients (type I and II) with 9 ulcers classed A1, 1 B1 and 1 B2, mean ulcer duration: 208 +/-538 days. Patients with PAD (non palpable pulses) and with osteomyelitis (probing to bone) were excluded. All included patients received a Ransart boot and standard wound care. They continued working, while wearing the boot.

### **Results:**

10 ulcers healed, mean time: 43, 7 +/-9, 8 days. One ulcer was still active after 91 days. No serious complications were recorded.

### **Conclusions:**

The preliminary results are positive. The role of diminished activity in healing rate is challenged by this tool. Further studies are needed to clarify the respective role of compliance (enhanced by a patient friendly cast?) and activity. Quality of life, activity level, socio-economic costs are of concern.