

**ADVANCED TECHNIQUE IN ABDOMINAL WOUND CLOSURE**

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**Aim:** The aim of this presentation will be to describe a technique used to close open abdominal wounds. We experience many open abdominal wounds due to infection, abdominal compartment syndrome, trauma, infected mesh, incisional hernia, tumour resection and multiple operations through the same incision line. Common techniques to treat these cases include primary direct closure, mesh, and local flaps with free tissue transfer or Human Acellular Dermis.

**Method:** A two-step technique is used at this organization. First, a Negative Pressure Wound Therapy device is applied to the wound to stimulate the formation of granulation tissue and to decrease the oedema. The dressing is changed two times per week for 2 weeks creating a thick, strong layer of fibrotic tissue formation at the peripheral edge of the wound. The second stage involves the closing of the wound with a method called the 'Advanced Zarouni Technique'. This is done by deepithelialising a 2 cm area around the wound. The outer border of the raw area is incised deep into the muscle fascia. This creates an undermining of the surrounding skin approximately 5 cm deep in all directions. The deepithelialised skin is then inverted to cover the weak central abdominal wall acting as new fasciocutaneous tissue, creating a new anterior wall. The undermined skin is then closed directly over the new abdominal wall.

**Conclusion:** We have done hundreds of cases with this technique in our department without any complications which will be illustrated in detail.