# A microcurrent dressing reduces *C. acnes* colonization in patients undergoing shoulder arthroplasty or arthroscopy: a prospective case series

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# **Synopsis**

When applied preoperatively at the planned surgical incision site, microcurrent dressing may contribute to a reduction in perioperative infections, including prosthetic joint infection (PJI), and may be effective in reducing the incidence of surgical site *Cutibacterium acnes (C. acnes)* colonization.

# **Background**

- While the rate of PJI after primary shoulder arthroplasty is approximately 1% to 4% in the literature, it can increase to as high as 10% in young, male patients after reverse shoulder arthroplasty.
- C. acnes infections of the shoulder are a significant concern in shoulder arthroplasty. C. acnes is particularly challenging to diagnose and eradicate and is a substantial cause of morbidity.
- The use of a microcurrent dressing as a prophylactic preoperative dressing to alter skin flora and thereby decrease the risk of PJI has not yet been investigated.

# **Study Objective**

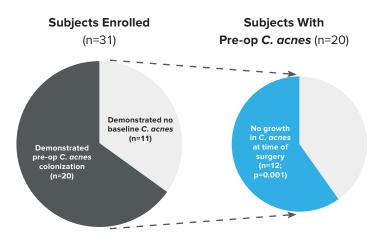
Evaluate the efficacy of a microcurrent dressing in reducing *C. acnes* skin colonization and the risk of PJI of the shoulder.

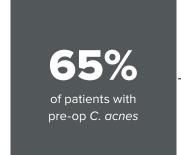
# Study Design and Methods

Design	Patients	Procedure	Treatment
Prospective case study	20 patients with preoperative <i>C. acnes</i> colonization	Elective shoulder arthroplasty or arthroscopic shoulder surgery	2 days prior to surgery:     Skin culture swab taken,     dressing applied over     planned surgical site      Immediately prior to surgery:     Dressing removed, repeat     swab taken
			Upon initiation of surgery: Full-thickness biopsy taken for culturing

# Results

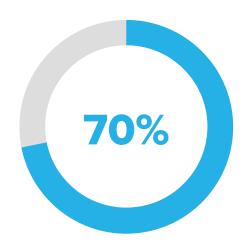
Preoperative application of a microcurrent dressing resulted in significantly diminished *C. acnes* skin burden at the time of surgery in patients undergoing elective shoulder arthroplasty or arthroscopic shoulder surgery.





60%
of patients who received pre-op microcurrent dressing showed no growth in *C. acnes* at intra-op biopsy





of *C. acnes* persist in skin despite standard chlorhexidine skin preparation<sup>1-3</sup>

>50%

of *C. acnes* cultures carry resistance to more than one antibiotic<sup>4</sup>

50%-60%

rate of *C. acnes* infection following revision of shoulder surgery<sup>2-4</sup>

\$47,696

maximum average Medicare payment for shoulder joint revision<sup>5</sup>

#### References

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