Low Frequency Nerve Stimulation for Leg Ulcers: Clinical Effectiveness
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Acknowledgments:

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About CADTH: CADTH is an independent, not-for-profit organization responsible for providing Canada’s health care decision-makers with objective evidence to help make informed decisions about the optimal use of drugs, medical devices, diagnostics, and procedures in our health care system.

Funding: CADTH receives funding from Canada’s federal, provincial, and territorial governments, with the exception of Quebec.
Research Questions
What is the clinical effectiveness of low frequency nerve stimulation for wound healing of leg ulcers?

Key Findings
No relevant literature was identified regarding the clinical effectiveness of low frequency nerve stimulation for wound healing of leg ulcers.

Methods
A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2012 and February 11, 2017. Internet links were provided, where available.

Selection Criteria
One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

<table>
<thead>
<tr>
<th>Population</th>
<th>Adults with venous or mixed arterial and venous leg ulcers, including diabetic ulcers</th>
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<tr>
<td>Intervention</td>
<td>Low frequency nerve stimulation device for wound healing (e.g., geko device)</td>
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<tr>
<td>Comparator</td>
<td>Usual care (wound dressing and compression therapy)</td>
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<tr>
<td>Outcomes</td>
<td>Clinical benefits and harms, including wound healing, pain, and edema</td>
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<tr>
<td>Study Designs</td>
<td>Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies</td>
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</tbody>
</table>

Results
Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials and non-randomized studies.

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, or non-randomized studies were identified regarding the clinical effectiveness of low frequency nerve stimulation for wound healing of leg ulcers.

References of potential interest are provided in the appendix.

Health Technology Assessments
No literature identified.
Systematic Reviews and Meta-analyses
No literature identified.

Randomized Controlled Trials
No literature identified.

Non-Randomized Studies
No literature identified.
Appendix — Further Information

Non-Randomized Studies – Healthy Volunteers

Review Articles

Alternate Indication

Additional References

Alternate Indication