

## The MIDFUT study (ISRCTN64926597) lay summary of trial results

The results of the study showed that none of the treatment strategies were more effective than the control arm, but none of the study treatments had a negative impact on participant health. Having a treatment did not mean that participants healed more quickly. This means the current standard of care for diabetic ulcer treatment is at least as good as any of these interventions. The treatments we tested cost the NHS extra money to carry out, so this means we don't need to spend extra money to get the best outcomes for patients. The study has shown that we should not be using any of the study interventions in current clinical practice. Whilst it does not improve diabetic foot ulcer healing, it will save the NHS money and prevent patients having treatments that don't improve outcomes. This also avoids the discomfort and inconvenience reported by some of the participants about the intervention treatments. Further research is required on the use of 4 week healing as a surrogate marker (a measurable indicator used in clinical research to predict the effect of a treatment on a meaningful clinical outcome) for chronic wounds.