

ASSESSMENT OF A SEQUENTIAL TREATMENT IN DIFFERENT KINDS OF WOUNDS

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•INTRODUCTION•

Moist therapy has been shown to be effective in wound healing processes in different lesions. In the case of infected wounds, we are presented with a new challenge when it comes to using them.

•OBJETIVE•

To evaluate patient and lesion in a comprehensive manner, so that this evaluation will allow us to choose a healing protocol appropriate to each lesion.

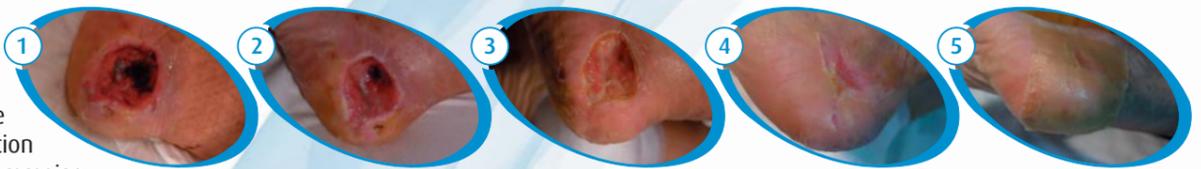
•METHODOLOGY•

Those lesions that exhibited infection were managed with an antimicrobial dressing (Aquacel™ Ag), while those that did not were treated with an Hydrofiber™ dressing (Aquacel™). In those lesions exhibiting large amounts of exudate, a secondary dressing (Versiva®) was used. Finally, an extra-thin hydrocolloid dressing (Varihesive® Extra Thin) was used as a protector for fragile tissues. Three clinical cases records are presented to illustrate the diagram:

► FIRST CASE. NON-INFECTED HEEL PRESSURE ULCER.

91 year-old female with multiple basic pathologies. She presented a stage IV pressure ulcer on the outer area of her heel with 8 weeks of evolution. The previous treatment was cleaning with water and application of povidone-iodine solution and gauze. The patient went into the emergency unit with fever, and suppuration and bad smell. Surgical debridement was performed due to an osteomyelitis.

The treatment started with Varihesive® Hydrogel, Aquacel™ and Versiva®. Postural changes were used and an air cushion was set in place (PICTURE 1). One week after the beginning of the treatment, there is a reduction of the wound's size though the exudate level remains high with presence of slough (PICTURE 2). Three weeks later, a 43% reduction of the initial lesion was recorded (PICTURE 3). After 4 months of treatment with Aquacel™ and Versiva® the wound was healed (PICTURE 4). Once the wound was healed, Varihesive® Extra Thin was applied to protect the newly-formed tissues (PICTURE 5).



► SECOND CASE. A TRAUMATIC INFECTED LESION OF THE HAND.

A 90 year-old patient with incipient dementia and partial dependence. He shows a no penetrating wound on the left hand treated with povidone-iodine during 1 week. The whole hand was inflamed and a culture was done testing positive for *E. coli*.

Systemic antibiotic therapy was initiated and treated with Varihesive® Hydrogel, Aquacel™Ag, and Versiva® were carried out (PICTURE 1). Eight days later, there was a good evolution of the wound, the pain was reduced, and the rest of the hand recovered its elasticity and colour (PICTURE 2). Generalised positional oedema was observed caused by the immobility of the extremity. After 20 days of treatment an important reduction of the wound's size was observed. After 46 days of treatment with Aquacel™ Ag and Versiva®, the wound was considered to be healed (PICTURE 3). Varihesive® Extra Thin was applied as a protection for the newly-formed tissues (PICTURE 4).



► THIRD CASE. A TRAUMATIC INFECTED WOUND ON THE 3RD FINGER OF THE LEFT HAND.

The patient showed a traumatic infected wound caused by a lawnmower on the 3rd finger of the left hand.

At the Health Centre the treatment applied was povidone-iodine and gauze. The photograph was taken 48 hours after the injury (PICTURE 1).

The wound showed lawn residues. The lesion was irrigated with saline and a treatment with Aquacel™Ag was initiated (PICTURE 2).

Appearance of the wound after 25 days of treatment in moist environment healing. After 1 month of treatment with Aquacel™Ag, the wound was healed (PICTURE 3).



CONCLUSIONS

A precise diagnosis of the lesion should be carried out, an appropriate protocol chosen, and follow-up maintained for long enough to be able to observe results. Of the 3 cases mentioned it was observed that the wound-healing guidelines proposed with Aquacel™ (Hydrofiber® technology dressing), Aquacel™ Ag (ionic silver-containing Hydrofiber® technology dressing), Versiva® (dressing that combines 3 technologies), and Varihesive® Extra Thin (for the protection of fragile areas) obtained good results with regard to promote the healing process of the different wounds, ease of use and improvement in the patient's quality of life.