

Management of pressure ulcers in patients with amyotrophic lateral sclerosis

Author: Cerame S. Registered Nurse. Hogar para la 3ª edad. Xunta de Galicia. A Coruña.

Aim

Patients with amyotrophic lateral sclerosis (ALS) are usually confined to bed within a few years from the onset of the disease. The aim of this work is to describe our experience in the management of this complex case with a specific dressing.

Methods

We present the case of a 48 year old man with ALS and a pressure ulcer (stage IV) totally dependent in daily activities. We evaluated the isolation of wound with contact to stools and the wound healing process. The wound was evaluated at each dressing change. The patient's pain was measured with a visual analogue scale at application and removal of the dressing.

Results

Initially the dimensions of the wound were 8.6 x 5.7 cm without signs or symptoms of infection but with a high level of pain and exudate. An important reduction of pain was observed. Gelling Foam Dressing showed great absorption and retention capacity (even under compression). The average dressing change was every 7 days.. A normal condition of the periwound skin was observed. The wound showed an excellent progression towards healing and a complete wound closure was obtained after x days/weeks?.

Conclusions

The capacity for absorption and retention of the gelling foam dressing, even under compression (sacrum), led to a reduction in the frequency of dressing changes which contributes to improve the quality of life of the patient.

Image 1



- Initial image**
- Cavitated wound
 - Necrotic tissue
 - Perilesional damage

Image 2



- Application of antimicrobial Hydrofiber® technology dressing (Aquacel® Ag) and Hydrofiber® technology dressing (Aquacel®) to absorption.
- Application of a secondary cover dressing

Image 3



- X days later**
- Very important improvement
 - Non cavitated wound
 - Non perilesional skin damage

Image 4



- Ulcer area reduction**
- Presence of slough tissue

Image 5



- Improvement of ulcer**
- Epithelization tissue

Image 6



- Application of a Gelling Foam Dressing (Versiva® XC)

Image 7



- Reduction of ulcer area**
- Less exudation

Image 8



- Presence of epithelisation tissue**

Image 9



- Complete closure of wound**
- Instauration of protection to prevent recidive of wound

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