


THE REGULATION OF THE WATER BALANCE OF THE WOUNDS ACROSS A DRESSING

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INTRODUCTION

Chronic wounds are characterized by their high prevalence, costs and the incapacitation for the activities of the daily life of our patients (quality of life). With the new range of dressings of Modern Wound Management we do not only contributed to the necessary humidity degree for the debridement, granulation and epithelisation of a wound.

The new dressings are able to control the wound exudation, they are atraumatic. These properties result in an excellent tolerance and adaptability. New data are significantly important to establish these dressings in our daily work to show the pain control as well as the decrease of the intervals of dressing changes, the material, simultaneously the costs and time of our service.

AIM

To demonstrate the effectiveness of the treatment on patients with venous leg ulcers which exists already for 2 years.

To demonstrate the necessity of a change in the treatment of the wounds that offers a global approach to us with the purpose of obtaining a fast and effective healing.

MATERIAL AND METHODS

Descriptive study in patients with venous leg ulcers of III. degree as well as of signs of critical colonization or local infection and of a necessary exudate management.

The aim was to have simultaneously a control of the exudate, an appropriate application of an antimicrobial therapy and a reconstruction of the wound edges of the skin with only one product which result in a benefit for the patient.

Therefore we treated 5 patients - affected by vascular leg ulcers - with the new HydroBalanced biocellulose based wound dressing (HWD)* for wound bed preparation and wound healing.

A collective of 10 out-patients with critically colonised or locally infected venous or mixed leg ulcers was treated with a polihexanide-containing HydroBalanced biocellulose based wound dressing (PHWD)** (primary dressing) and a foam*** (secondary dressing). As soon as the critical colonisation or local infection was disappeared HWD* was used again.

RESULTS AND CONCLUSION

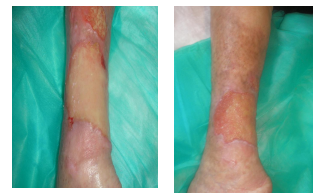
After treatment of 15 patients during the first 8 days using these HydroBalanced wound dressings, we observed

- the reorganization of the wound edges of the skin in all cases,
- exudate control in each case without maceration of neoformed tissue,
- the reduction of the change of dressings to 2 times per week and
- the facility of its application for the professional as for the patient during dressing change,
- an atraumatic treatment and
- the supply of an adequate humidity to the wound due to the fact that it absorbs and donates moisture simultaneously according to the necessities of the wound.

After these first experience with 15 leg ulcer patients and the use of these new HydroBalanced wound dressings we saw a reduction of the dressing change and a reduction of the costs, an excellent exudate control with a lower risk of macerations and an effective pain control. The wound dressings were well tolerated.

Case 1:

female
locally infected superficial
venous insufficiency
Treatment before:
paraffine tulle every 24 hours
and other treatments
Ulcer duration: 2.5 years
Compression therapy:
short stretch compression****



Case 2:

female
locally infected superficial
venous insufficiency.
Treatment before:
hydrocolloids every 3 days
Ulcer duration: 2 years
Compression therapy:
short stretch compression****



* HWD = Suprasorb® X; ** PHWD = Suprasorb® X+PHMB

*** Foam: Suprasorb® P; **** short stretch compression: Rosidal® K
Lohmann & Rauscher products