SUPRASORB® X – A NEW HYDROBALANCE WOUND DRESSING AND ITS USE IN CHRONIC WOUNDS

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Introduction
The treatment of chronic wounds is a daily challenge for all nurses and physicians. Besides the basic-therapy of the disease, the selection of the adequate wound dressing plays an important role. Regarding to the growing number of materials and products on the market the situation is more and more complex for the prescriber and user. One new approach are products with a broad use in the different stages of exudation and wound healing, especially the ability to absorb exudates, donate moisture (HydroBalance) and reduce wound pain. Therefore, in a clinical evaluation study the usefulness and properties of Suprasorb® X were investigated.

Method
The study was conducted on 22 patients with 27 wounds (14 chronic leg ulcers, 4 diabetic foot ulcers, 5 pressure ulcers, 4 other; wound area 0,5-154 cm², wound age 2 months – 7 years, non/mild/moderate to medium exudation, treatment over a period of 4 weeks). The treatment consists of moist wound management: Suprasorb® X and a secondary dressing selected dependent on the level of exudation (dry wound/mild exudation = foil, mild up to medium exudation = foam, medium exudation = high absorbent dressing).

Results
Following effects were documented:
All claims to the product (handling exudation from dry wound up to medium exudation) have been fulfilled
- The wound dressings stayed on the wound up to 7 days dependent on the wound situation and of the wound bed
- Fundamental growth of granulation tissue
- Considerably the choice of the secondary dressing
- Efficient cleansing growth of epithelial tissue
- Significant reduction of wound area in 4 weeks (medial from 14,7 cm² to 1,3 cm²) (comparable with first experiences in the USA¹).

Discussion
The selection of the primary dressing dependent on the wound healing stage is one of the determining options, in the management of exudate the choice of the adapted secondary dressing is the critical factor. A product with a broad field of application is a very facilitating help for the prescriber and the user. In combination with a good wearing comfort and a pain reduction it is also helpful in the need of a good patient compliance.

Conclusion
In these cases the treatment regime used over 4 weeks showed an excellent clinical efficacy of the biosynthesised cellulose wound dressing, Suprasorb® X, supporting the healing process in all wound healing stages and different exudation levels from the dry wound up to a medium exudation. The HydroBalance wound dressing is a new effective and useful way in Modern Wound Management, helping to find an easy and adequate decision. The clinical evaluation is ongoing.

References
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