COMPLEX CASE SERIES OF PATIENTS WITH VARIOUS STAGNATING WOUNDS TREATED WITH A COLLAGEN DRESSING IN A NURSING HOME SETTING

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Aim :

Efficacy of a *collagen dressing on inflammation reduction and re-starting healing was evaluated in four fragile elderly patients with stagnating wounds of various etiology, treated in a nursing home setting.

Methods:

Case ascertainment was used. Patients received a *collagen dressing and a **foam or an ***alginate as a secondary dressing, for a maximum of 14 days, after which the collagen dressing was discontinued and the foam used as a primary dressing. Wound healing was assessed using clinical observation and digital photographs, comparing day 0 versus day 14 results. Patients were then followed until wound closure.

Conclusion:

The case series results indicate the use of collagen to effectively start up the stagnating healing process.

Case 1:

The 82-years old female patient with a stagnating abdominal wound after reconstruction of an ileostomy. She has diabetes melitus type1 (insuline: 8 a.m, 23 units; 6 pm, 36 units). Leakage of stool into the wound occurs frequently. Previous regime: Rinsing with saline, alginate covered with the plate of the 2 piece ostomy system. At 3 days there was no improvement. New regime: As described for case 1. After 8 days of collagen dressing use, granulation and epithelialization started. Fig 1, Fig. 2 and Fig.3.

Case 2:

86-Years old, otherwise healthy male patient, status after his total hip, the surgery wound became infected. The open wound produced copious serous exudate. Fig.4.
Previous regime: Rinsing with saline, saline soaks, covered with a standard absorbent dressing. The infection had subsided, leaving a stagnating wound. New regime: As described for case 1. After 10 days of *collagen treatment, granulation started again. Fig.5. Seven days later the wound had healed.

Case 3:

92-Years old female patient with an extensive tibia skin tear, after falling. She had a stroke 8 years ago and lost part of her left arm function. Previous regime: povidon iodine gauze, covered with an absorbent dressing, fixed with a retention bandage. Fig.6. New regime: The vital part of the skin flap was adjusted over the wound. Fig.7. She received treatment with *collagen, covered with **foam and a ******tubular compression system. Fig.8. The dry skin was treated with a moisturizer. After 14 days the wound showed a significant improvement. At 21 days the wound size was 4.5x1.5 cm. Fig.8 and wound closure was achieved after a total of 7 weeks. Fig 9.

Case 4:

78-Years old male patient with a femur wound after a biopsy, when he was diagnosed with Still's disease. (Chronic joint inflammation). The staples are removed and pus was released. Fig.10. Previous regime: rinsing with water and saline soaks, systemic antibiotics. After 7 days this was changed to: *collagen, covered with an ****alginate and fixed with a film. Fig 10 – 13. After 8 weeks the wound had healed.

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*collagen dressing

Fig 1 :
Start of the new regime: Wound size: 3 x 3 x 3 cm.

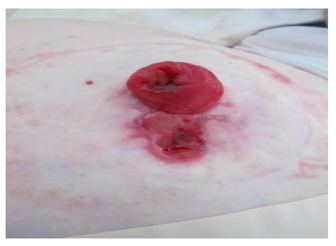

Fig 2:
Situation after 13 days, wound size: 2 x 1.5 x 1 cm.

Fig 3:
Situation after 21 days, the wound is superficial and is now covered with an alginate, fixed with a film. At day 28 the wound was closed.

Fig 4:
At the start the ulcer size is 4 x 3 x 2 cm, 30% slough, 70% granulation, with inflamed wound edges.

Fig 5:
At 14 days the wound size was 2x1.5x0.5 cm

Fig 6:
Wound size 15x3x1 cm, 90% granulation.

Fig 7:
The flap is placed over the wound

Fig 8: Situation at 21 days

Fig 9: Wound is closed at 7 weeks

Fig 10:
Staples are removed

Fig 11:
Situation at 3 weeks

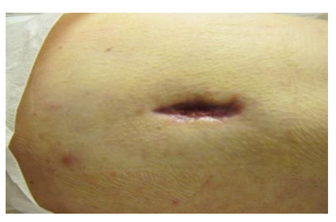

Fig 12:
Situation at 6 weeks

Fig 13:
Closed at 8 weeks

*Suprasorb® C, **Suprasorb® P, ***Suprasorb® A, ****Suprasorb® A+Ag, *****Suprasorb® F, ******Actico® Silk, Lohmann & Rauscher GmbH, Rengsdorf, Germany

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