CASE STUDY

Large Necrotic Malodorous Pressure Ulcer Closed Using Unique PolyMem Silver® Dressings

AFTER 4 MONTHS OF PAINFUL TREATMENT, BEGAN MANAGING THE WOUND WITH POLYMEM WIC® SILVER® CAVITY FILLER

THE WOUND CLOSED IN JUST OVER 3 MONTHS
Large Necrotic Malodorous Pressure Ulcer Closed Using Unique PolyMem Silver Dressings

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PROBLEM
A 60-year-old lady with Alzheimer’s Disease and reduced mobility contracted a heel pressure ulcer while hospitalized for dehydration. After discharge, she was treated by the local general practitioner with Hyaluronic acid for about 4 months. The putrid ulcer, which measured 8.0 cm x 6.0 cm x 2.0 cm with visible bone, was then so foul smelling that family could not visit the patient’s home. In spite of multiple medications to decrease inflammation and pain, including opioids, the woman’s pain level was a constant 9 out of 10.

RATIONALE
PolyMem dressings help reduce wound pain directly by inhibiting the nociceptor response. Glycerol in PolyMem dressings helps make them non-adherent and helps control odours. Ingredients work together to draw and concentrate healing substances from the body into the wound bed to promote rapid healing while facilitating autolytic debridement. Slough is liquefied and absorbed by the dressing, often eliminating painful manual cleansing during dressing changes. Antimicrobial PolyMem Silver dressings are uniquely safe because silver ions are not released into the wound.

METHODOLOGY
PolyMem Wic Silver cavity filler was covered with a charcoal dressing. Together the two dressings succeeded in minimizing the wound odour. At the initial dressing application, 1 - 2 ml saline was added to stimulate autolytic debridement. Due to copious exudate, dressings were replaced 1-2 times a day at first. Dressings were changed with decreasing frequency as the wound became cleaner and began closing. Since the dressings were continually cleansing the wound bed, no rinsing at dressing changes or other intervention was needed.

RESULTS
After only two days, the wound was significantly cleaner and odour was controlled, allowing family to visit. After two weeks, dressing changes were reduced to daily and standard, rather than silver, PolyMem Wic cavity filler was used. In four weeks wound odour was gone so standard PolyMem secondary dressings replaced the charcoal dressings. At six weeks, the patient’s pain was 5. At eight weeks, she was completely pain-free without medication. At just over three months, the large cavity completely closed.

CONCLUSION
Using PolyMem Wic Silver cavity filler, fast results were obtained with respect to reduction of pain and odour, wound cleansing and healing.

OBJECTIVES
1. Review evidence for the use of PolyMem dressing to help decrease the pain associated with pressure ulcers.
2. Discuss the mechanism for passive continuous cleansing of the wound bed with PolyMem dressings.
3. Consider the advantages of using PolyMem dressing in terms of facilitating rapid formation of granulation tissue.
April 11
Initiated PolyMem Wic Silver cavity filler covered with a charcoal dressing on the 8.0 cm x 6.0 cm x 2.0 cm 4-month-old foul-smelling Stage IV heel pressure ulcer.

April 13
After only two days of twice daily dressing changes without additional cleansing, the slough is softening. Odor is controlled, allowing the family to visit the patient.

April 23
At two weeks, the slough has been cleaned out of the deep cavity by the non-adherent cavity filler. Dressing changes are now daily and silver is no longer needed!

April 30
In less than three weeks, the PolyMem Wic cavity filler has softened and removed most of the adherent slough completely atraumatically, without rinsing.

May 14
At five weeks, the wound is closing rapidly. The odor has been completely gone for a week, so standard PolyMem dressings are covering the filler.

May 31
At 7 weeks, the cavity continues filling in. Wound pain was reduced from the original constant 9 with opioids to 5 without them by week 6, and was completely gone at week 8.

June 22
Dressing changes were quick and easy. PolyMem Wic cavity filler was placed into the deep cavity and covered with a standard PolyMem dressing.

July 17
The large Stage IV pressure ulcer that defied conventional therapy for four months closed in three months using only atraumatic inexpensive dressings for debridement.

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BIBLIOGRAPHY:


ORIGINAL POSTER PRESENTED AT*:


* This version has been modified from the original; it reflects PolyMem branding.

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