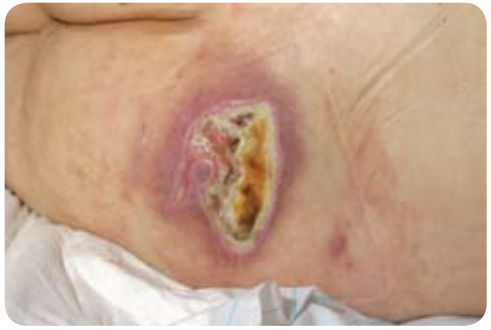
The use of Advadraw® to remove necrotic tissue from a grade 3 pressure ulcer

The patient

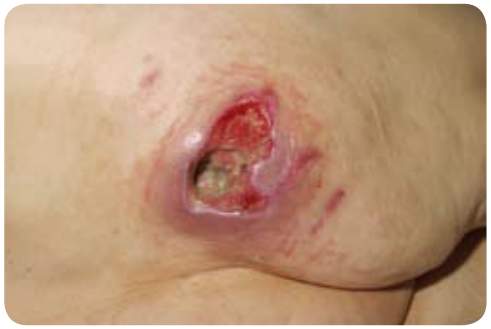
Mr S, an 86-year-old gentleman was admitted into hospital after being found in bed by his family unconscious. He was diagnosed as having had a CVA causing a dense left sided weakness with pneumonia. At the time of admission it was identified that he had pressure damage to his right buttock.

Background

His past medical history was that he had a previous CVA, hypertension, high cholesterol and prostate cancer. Mr S was living independantly up until this admission into hospital.



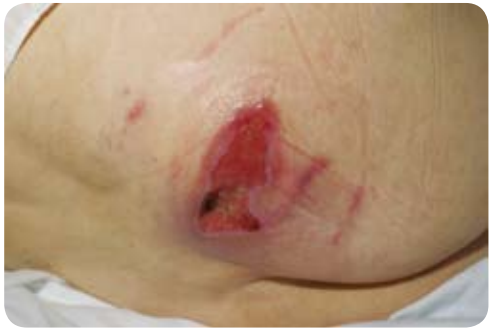
Once on the ward it was assessed that he had a grade 3-pressure ulcer (EPUAP) to his right buttock. The length was 6cm with a width of 5cm; depth was not assessed due to necrotic tissue, however there was evidence of pink tissue. Margins were oedematous with extensive surrounding blanching erythema, a slight malodour was present with moderate levels of exudate. It was

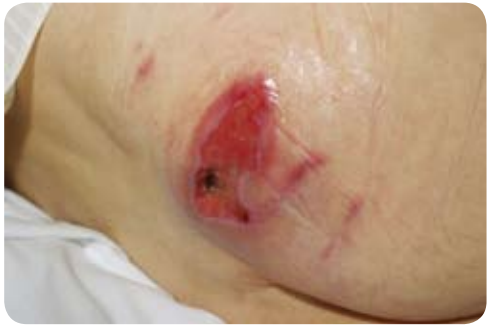


decided that he was too unwell for surgical debridement, so he was recruited into the evaluation of Advadraw®. Advadraw® and Advadraw Spiral® were commenced with tegaderm as the secondary dressing, redressed every 48 hours.

Sixteen days later it was identified that most of the necrotic tissue had been removed. The wound could now be assessed for depth, which was 2.5cm, no sinuses or undermining were evident. Exudate was managed successfully as there was no evidence of maceration. However, this gentleman did have an episode of confusion and agitation, which dislodged the dressing causing slight damage to the surrounding skin. This therefore indicates that the dressing needs to reflect the shape of the wound and should not be placed on healthy skin.

A further ten days later, significant improvement could be seen as the depth was now 1.5cm with the width being 3.5cm and the length remaining at 6cm. The granulating tissue appeared healthy with obvious epithelialisation to the margins, surrounding erythema and oedema had reduced.





Results

At this point he had commenced rehabilitation and was starting to sit out for periods of up to 45 minutes.

- *Surgical debridement had been avoided*
- *Pain levels had significantly reduced.*
- *The granulating tissue was of good quality and significant healing was evident.*
- *Exudate management had been successful.*

Nursing Intervention

- *Tissue Viability had given advice and supported staff with the application of Advadraw®.*
- *TV assessed the wound on a weekly basis with ward staff redressing every 48 hours.*
- *It was commented by staff that the product was easy to apply once trained and aware of how it worked.*

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Lynne Goodwin RGN Tissue Viability Support Nurse North Bristol NHS Trust