

# A DRESSING THAT REDUCES PAIN NOT ONLY AT DRESSING CHANGES BUT ALSO DURING WEAR TIME!

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## INTRODUCTION

72 year old woman, kidney transplanted 2 years ago, on immunosuppressant's, anticoagulants, and high doses of corticosteroids. During a fall she contracted two grade 3 skin tears on her lower leg. The wounds did not respond to traditional treatment consisting of an alginate gel covered with foam dressings, they just continued to deteriorate. Three weeks later the patient's pain level was becoming unbearable, she had a VAS score of 8 out of 10.

## AIM

To reduce the pain level and get the wounds to heal as soon as possible as we wanted to avoid any potential infections.

## METHOD

We started to use polymeric membrane dressings\* as they have a documented effect on reducing inflammation and pain. The dressings were changed twice a week at the hospital clinic. According to our hospital protocol we used a mild wound cleanser prior to applying a new dressing.

## RESULTS

When we started using polymeric membrane dressings the wounds were covered with slough and necrosis, the wound edges were "punched out" and clearly defined and the patient had a very high pain score, 8 out of 10 according to the Visual Analogue Scale (VAS). Pain reduced to a VAS score of 2 shortly after the first dressing application.

A few weeks later the wound was fully granulated, and epithelialization could be seen from the now smooth wound edges. Both wounds were fully closed by 6 weeks.

## DISCUSSION

Polymeric membrane dressings helped achieve an ideal wound bed environment; the dressings clearly helped the wound healing process whilst protecting the delicate wound edges and preventing maceration. These dressings are very conformable; adjusting perfectly to the different contours of the wound bed. We also noted faster re-epithelialisation than what we normally see with the other dressings we use.

The patient was very satisfied with the dressings, both during wear time as well as during the actual dressing changes and was thankful that the pain had diminished so dramatically.



### Day 1

The wounds edges are steep clearly defined. Wound surface a mixture of necrotic tissue and fibrin. Size of the larger wound 5,5 cm x 1,6 cm, the smaller measures 3,5 cm x 2 cm with a depth of 0,8 cm. No signs of infection and minimal exudate. Pain level 8 out of 10. Polymeric membrane dressings are applied for the first time.



### Day 12

Granulation tissue now covers the entire wound surface of both wounds and show signs of epithelialisation from the wound edges. Polymeric membrane dressings have been changed twice a week at the ambulatory clinic. Her wound pain reduced to a VAS score of 2 shortly after the first dressing application 12 days ago.



### Day 24

The larger wound now measures 4 cm x 1 cm and the newly formed granulation tissue has reduced the defined wound edges. The smaller wound is fully granulated and almost covered with new epithelial cells. The dressings are still changed twice weekly at the ambulatory clinic and her VAS score is between 1 and 2.



### Day 38

The larger wound is now almost fully closed (it closed completely a few days after this photo was taken). During the entire treatment period the patient has been very satisfied with the polymeric membrane dressings; they were comfortable to wear, easy to change and dramatically decreased her pain and facilitated rapid healing.

## Bibliography

Beitz AJ, Newman A, Kahn AR, Ruggles T, Eikmeier L. A polymeric membrane dressing with antinociceptive properties: analysis with a rodent model of stab wound secondary hyperalgesia. J Pain. 2004 Feb;5(1):38-47.

\*PolyMem® wound dressing. Manufactured by Ferris Mfg Corp, Burr Ridge, IL 60527 USA. This case study was unsponsored. Ferris Mfg. Corp. contributed to this poster design and presentation.