ALLEVYN Life in the treatment of leg ulceration

Debbie Simon, 5 Borough’s Partnership NHS Trust, UK

Case challenge
- Mrs. C a female in her mid-70’s
- Extensive ulceration to her left leg
- Reduced ABPI of 0.61
- Unable to tolerate reduced compression
- Type 2 diabetes
- Renal disease on haemodialysis

Key challenges
- Challenging home circumstances
- High levels of wound exudate
- Wound-associated pain
- Wound-associated malodour

Wellbeing impacts

**Physical**
Mrs. C was experiencing severe pain as a result of her wound.

**Psychological**
- Mrs. C was extremely embarrassed about the smell associated with her wound. As a result she didn’t want to leave the house.
- She had recently been discharged from the vascular service and felt like everyone had given up on her.

**Social**
Currently the wound was re-dressed on a daily basis or more frequently, with twice daily dressings often being necessary due to the high levels of wound exudate. The high frequency of dressing change coupled with her three times weekly dialysis meant that appointments and treatment dominated Mrs. C’s time. In addition to not wanting to go out owing to the malodour associated with her wound Mrs. C was so embarrassed by the smell that she had become reluctant to allow her grandchildren to visit, isolating her from her family.

Management objectives
- Better pain control.
- Appropriate dressing selection to consider:
  - Reduction in malodour.
  - Effective management of exudate allowing reduced frequency of dressing change.
- Adequate nutrition.
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Treatment

- DURAFIBER® primary dressing to manage exudate
- ALLEVYN Life secondary dressing to manage exudate, stay in place and contain odour
- Barrier film applied to protect skin surrounding the wound

Outcome

- ALLEVYN Life and DURAFIBER proved highly effective in managing the wound exudate. The effective management of exudate made it possible to reduce the frequency of dressing change from daily or more often to just 2-3 times per week, a vast improvement.

The dressing combination was well-tolerated by Mrs. C who reported a reduction in the wound-associated malodour that had been a real problem previously.