### Refractory leg ulceration: reducing the burden for patients & the health service

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### Introduction

The breakdown of the skin affects many people in the UK, resulting in a massive effect on the NHS budget and the economy of the country. One of the most common forms of tissue loss in this country is due to leg ulcers. The impact of leg ulcers is often underestimated and the daily dressing changes coincided with the normal inflammatory processes leading to pain which is very hard to control.

### Purpose

The aim was to look at the impact of a new protease modulating dressing containing PHI, not only on the wound characteristics, but also its effect on the patient’s quality of life, including her wound pain.

### Methods

Evaluation of the dressing was over eight weeks, documenting relevant medical history, wound condition; exudate levels / type and peri-wound condition. Pain and wound dimensions were recorded and photographed at weekly intervals.

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### Patient 1

- **86 year old lady**
- **Venous leg ulcer x 3 present for three years**
- **six months**
- **Ex smoker**
- **Known peripheral vascular disease**
- **Previous angioplasty**
- **Hypertensive**

MS never went out of the house and had no social contact other than the visiting carer. She lived alone and would not allow her daughter to visit. Five to six visits a week were required by the district nursing team, and exudate was a problem, causing pooling around the patient when she was standing. A visiting carer changed the bed linen three to four times a week. At the beginning of the evaluation the wound was very dirty and the surrounding skin was macerated but the patient refused compression therapy for the management of her condition. Tegaderm Matrix was applied and changed on alternate days.

<table>
<thead>
<tr>
<th>Date (DD/MM/YYYY)</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>03/09/2007</strong></td>
<td>Outer ulcer – 4cm x 6cm, sloughy Inner ulcer 3cm x 2cm, static Excessive leakage Maceration</td>
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<tr>
<td><strong>14/09/2007</strong></td>
<td>Inner ulcer - 2cm x 1 cm, granulating</td>
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<tr>
<td><strong>24/10/2007</strong></td>
<td>Outer ulcer – 3cm x 5 cm, granulating Inner ulcer - 0.5cm x 0.25cm, granulating Minimal serous exudate</td>
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<td><strong>25/09/2007</strong></td>
<td>Initial wound dimensions 14cm (l) x 10cm(b) x 3cm(d)</td>
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<tr>
<td><strong>07/11/2007</strong></td>
<td>Wound dimensions 10cm (l) x 7cm (b) x 1.5 (d)</td>
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### Discussion

This evaluation has shown significant benefit to the patients’ quality of life highlighted by the patients’ themselves and the district nursing teams. The nurses in particular noted a significant reduction in home visits required and workload without compromising standards of care. They were able to reduce visits from daily, and nightly in some cases, to alternate days with the omission of weekend home visits altogether. This allowed the district nurse team to allocate their time to other patients. The impact on persona relationships was also highlighted. MS has now started to see her daughter regularly and VS is now more comfortable with visitors in her own home. In both cases the reduction of both pain and exudate levels were key components in this renewed social interaction.

### Conclusions

The findings of these case studies highlight the fact that leg ulceration affects so many things in the sufferer’s life. However, if improvements in pain control, exudate levels and wound bed condition can be achieved, it can positively impact an individual’s life and reduce utilisation of scarce health care resources. These cases are typical of many patients in UK suffering with ulcers of the lower leg. This new protease modulating dressing has shown that it can provide the right wound environment to improve the prognosis for such patients where high levels of pain and exudate impact their quality of life.

### References


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**3M Tegaderm™ Matrix Dressing with PHI | 3M Health Care, Loughborough, UK Study and poster facilitated by 3M Health Care GF262-1**