

The use of Activon Tulle® on a grade 3 pressure ulcer

Male, 66 years old with Korsakoffs syndrome, stable weight on supplements, very aggressive at times. On presentation the wound type was classified as complex, situated on the second toe. Odd presentation, ward report it was a grade 3 pressure ulcer from ill fitting footwear that appeared to over granulate, initial phone advice said to use a foam, unclear why this didn't happen. The dressing had not been changed for five days prior to visit, reported as IRF.



Review notes 01.10.2007

Healing: Yellow/red
 Infection: Local
 Exudate: Low/medium
 Dressings used - Primary: Atrauman,
 Secondary: Release
 Infected - malodourous and friable, very wet, previous swab negative, query anerobic infection, sho looking at metronidazole course whilst await new swab results. prescribed inadine and tegaderm foam non adhesive cut into a T shape and folded round toe, foam will arrest over granulation and absorb exudate. pics to be sent to TVN at UHL for opinion as not something seen by LPT TVN before to this extent. not measured

due to curvature. Suggested should speak to consultant regarding referring for a biopsy.



Review notes 15.10.07

Healing: Yellow/red
 Infection: Local
 Exudate: High/low
 Dressings used Primary: Inadine
 Secondary: Tegaderm Foan non adhesive
 UHL suggested x ray to rule out osteomyelitis, done 5.10.07, negative, agreed that next stage was biopsy, referral done by medics. The toe remains friable but not malodourous, continue inadine as a temporary measure whilst awaiting honey from pharmacy, curvature made measurement impossible.



Review notes 18.10.07

Reviewed by: Practitioner I
 Healing: Red
 Infection: Critically colonised
 Exudate: High/low
 Dressings used Primary: Inadine
 Secondary: Tegaderm Foan non adhesive
 An improvement in friability noted, awaiting dermatology appointment, Activon Tulle® applied for anti inflammatory effect on over granulation - this remains the working diagnosis until derms seen, tegaderm foam non adhesive as secondary dressing, cavilon to peri wound and adjacent toes to protect from moisture damage, change daily, Modern Matron over seeing whilst I'm on annual leave.



Review notes 30.10.07

Healing: Yellow/red
 Infection: Colonised
 Exudate: Medium/low
 Dressings used Primary: ActivonTulle®
 Secondary: Tegaderm Foam non adhesive
 Discussed with SN Heena, she said the toe is improving, went to derms last week but no biopsy as they didn't have enough staff!
 Unable to visit as no car.



Review notes 20.11.2007

Healing: Red
 Infection: Colonised
 Exudate: Medium/low
 Dressings used Primary: Activon Tulle®
 Secondary: Tegaderm Foan non adhesive
 Discussed with dr au-yong, biopsy result is clear, continues to respond well to anti inflammatory effect of homey, continue current care.

Review notes 09.12.07

Healing: Yellow/Red
 Wound Dimensions Length: 0.9
 Infection: Colonised Breadth: 0.7
 Exudate: Low/Low Area: 0.63
 Dressings used Primary: Activon Tulle®
 Secondary: Release
 Significant contraction, healthy epithelium and surround, granulation is flat, small area of slough still to debride, ensure orthotic footwear worn to prevent further ulceration. Change primary dressing to non-adherent contact layer to protect healthy granulation and progress wound to healing.