

IMPACT OF A GEL WITH BETA-GLUCAN* IN FIVE WOUNDS WHERE HEALING WAS STALLED

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Introduction

Aim:

Report on five community care patients whose hard to heal wounds were treated with a topical Beta-Glucan gel*

Method:

The Beta-Glucan gel was evaluated over an 8-week period on a variety of wound types in a cohort of 5 participants all of whom had hard-to-heal wounds. Prior to intervention with the Beta-Glucan gel, the wounds had been managed with local standard care dressings

Results:

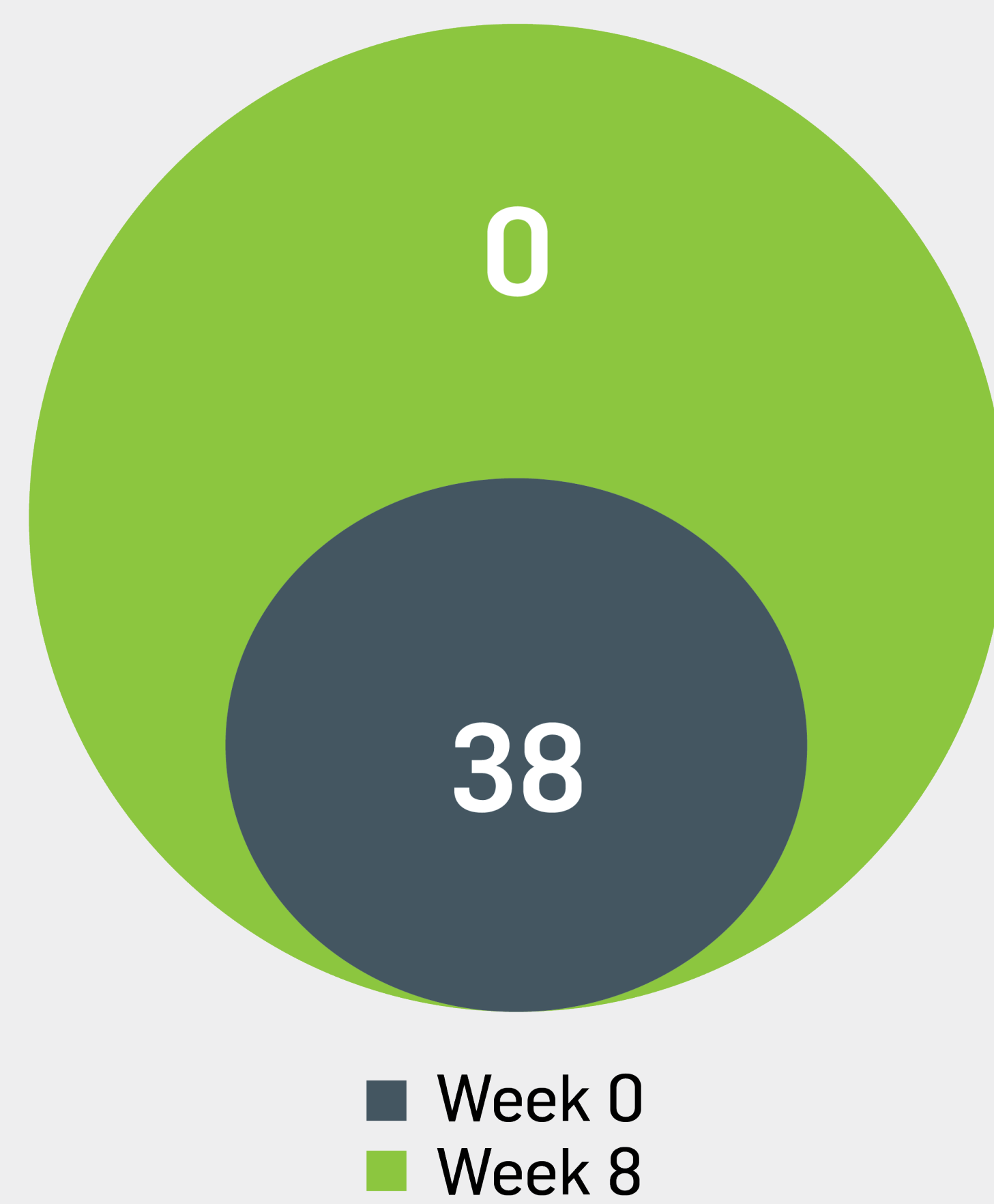
These stalled wounds had failed to progress using standard care dressings. The duration of these wounds ranged from 4 to 12 weeks. Table 1 summarises the 5 participants' wounds in terms of wound type, existing dressing regime under which the wounds failed to make progress, and the wound surface area on enrollment and on week 8. One wound healed at week 5 and one at week 9.

Wound duration (weeks)	Wound type	Existing dressing	Surface area at week 0 (cm ²)	Surface area at week 8 (cm ²)
4	Vasculitic leg ulcer	Foam, Superabsorbent, Hydrogel	55	30
4	Venous leg ulcer	Non-adherent dressing, Antimicrobial, Superabsorbent, Compression (class 1)	35	1 (healed week 9)
4	Pressure ulcer (bone/tendon exposed)	Non-adherent dressing, Superabsorbent, Hydrogel	40.5	12
12	Venous leg ulcer	Non-adherent dressing, Superabsorbent, Hydrogel	15.75	7.7
8	Pressure ulcer	Foam, Hydrofiber	8.1	0 (healed week 5)

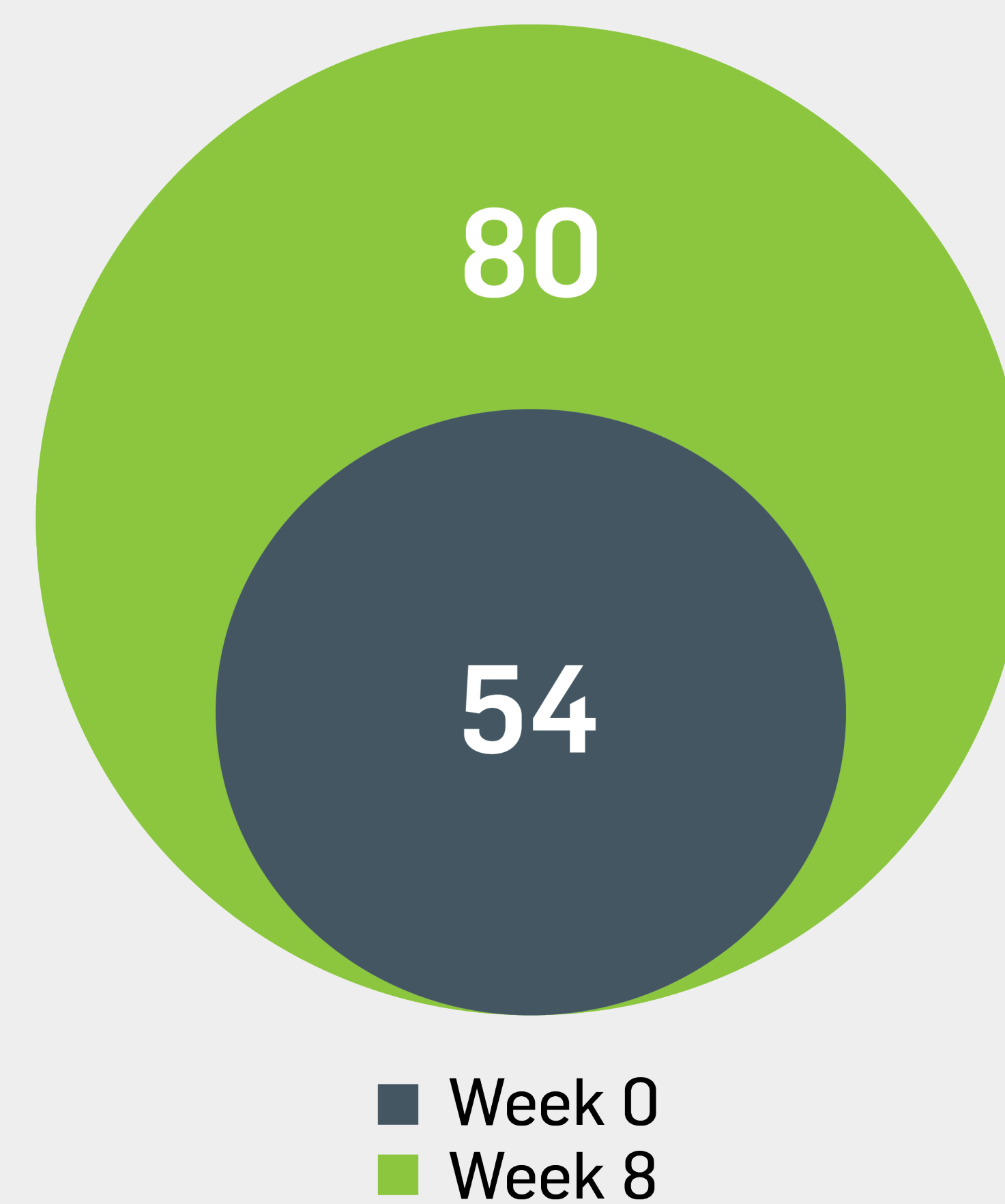
Table 1: Wound duration and change in surface area week 0 – week 8

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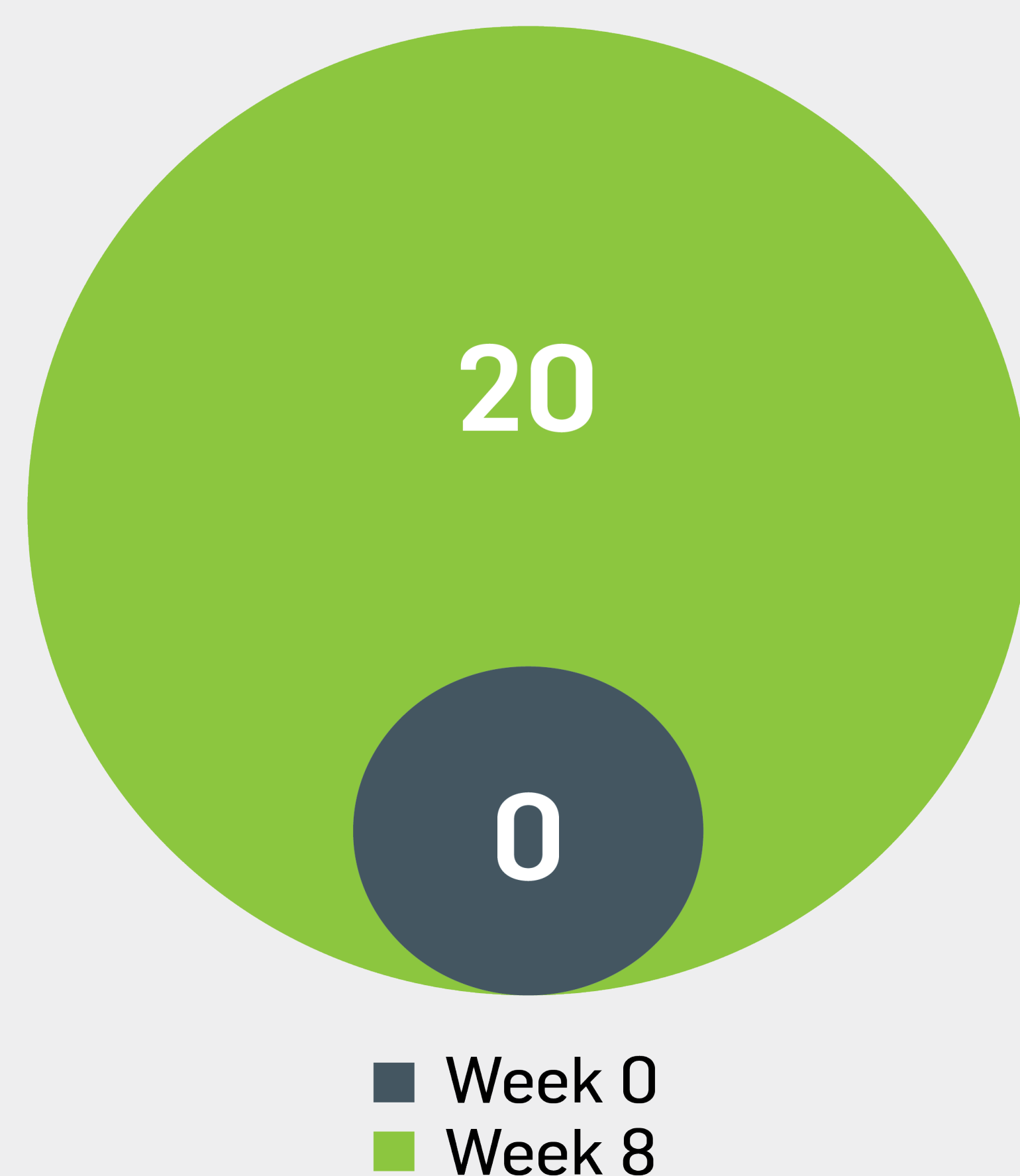
Slough in %



Granulation in %



Epithelialisation in %



The change in wound surface area from week 0 to 8 is 67%.

The mean wound pain score at week 0 was 5. At week 4 it was 3, and this decreased to 1 in week 8.

Conclusion

This cohort of 5 patients had failed to make any progress towards healing when using local standard care dressings. Following intervention with the gel containing Beta-glucan, 2 wounds healed.

There was a progressive reduction in wound surface area thus converting these previously stalled wounds to a healing trajectory.

A concurrent improvement in tissue type (decrease in slough and increase in granulation and epithelialisation) and a decrease in wound pain was observed.

*the gel with Beta-glucan is marketed as Woulgan
This poster was supported by an educational grant from Biotec Beta-Glucans, Tromso, Norway

Table 2: Decrease in slough and the increase in granulation and epithelialisation tissue