



WOULGAN ON UNHEALED SKIN GRAFT (TRANSPLANT) - AN EXAMPLE OF USE

BACKGROUND

Male, 79 years old. Active and in good health. On 20th August 2016, he fell from a ladder and hit a garden tool, resulting in an acute trauma (deep wound) at his right elbow/underarm. He was admitted to the hospital the same day and the wound was primarily revised and sutured, and later covered with paraffin gauze nets and dry dressings. 10 days later the patient got re-admitted due to a serious infection in the wound. The following days, the wound needed to be cleaned and prepared for a skin transplant. A new skin graft was applied on 9th September 2016 - followed up twice a week by outpatient wound care. On 5th October 2016, he was referred to his GP with an instruction for using honey products. The wound was highly exuding so the GP unit decided not to continue with this but initialised a week's treatment with fiber dressings instead, with the aim to dry out the wound.

13th October 2016: Woulgan treatment was initiated. For the first two weeks, new Woulgan was applied twice a week. The last two weeks, it was applied once a week. As cover dressings, silicon sheets were used with a Mepilex on top.



Figure 1: 19th Oct 2016 - 3 remaining unhealed areas at the edge of the transplant. Some secretion seen in the removed dressing and some swelling and signs of inflammation present.



Figure 2: 19th Oct 2016 - The largest area measured 3 cm. Some yellow necrosis/fibrin and coagulated secretion seen.



Figure 3: 19th Oct 2016 - The wound was washed with a cleansing agent.



Figure 4: 19th Oct 2016 - Mechanically debrided with a sharp tool.



Figure 5: 19th Oct 2016 - Cleansed and debrided. Vital tissue seen in all wounds.



Figure 6: 19th Oct 2016 - New Woulgan applied by using a plastic spatula.



Figure 7: 19th Oct 2016 - A thin layer of Woulgan is enough.



Figure 8: 19th Oct 2016 - To protect the fragile tissue properly, a silicon net was applied as the contact layer. This was covered with a foam dressing.



Figure 9: 14th Nov 2016 - After 4 weeks of Woulgan treatment (6 applications), treatment was stopped. The open areas were filled up and had healed fast and nicely. No redness or maceration seen. To protect the fragile area, only a dry dressing was used.

No antibiotics or additional medication needed during the Woulgan treatment period. The patient experienced no discomfort or safety issues and was very satisfied with the result of the treatment. The HCPs were also satisfied with the result.