



CASE STUDY: LEG ULCER MOST LIKELY CAUSED BY TRAUMA WITH UNSPECIFIED NEUROPATHY

BACKGROUND

Clinical assessment of patient-related factors indicated a hard to heal ulcer and the clinic decided to implement Woulgan from beginning of treatment. The patient was a woman, under 50 years old, with leg ulcer of unknown aetiology, located on her lower leg above the lateral malleolar. The wound started out as a hematoma with unspecified neuropathy diagnosed. The patient was otherwise healthy with no complicating medications or underlying diseases. The ulcer was very painful, and had been present for 1 week when she first came to the clinic. The patient was a non-smoker with good nutritional status, and normal weight and mobility.

CLINICAL ASSESSMENT AND TREATMENT

First consultation 25th January 2016. Some necrotic tissue/fibrin/dried blood were mechanically removed by debridement. Debridement was performed after application of local anaesthetic cream to the wound. The level of exudation was defined as moderate with normal colour and odour. Swab showed no pathogenic microbes.

At presentation - 25th January 2016
(Figure 1)

Some erythema in the surrounding skin and slight swelling were observed. Mixed type of tissue identified and the non-vital tissue was removed. Width was measured to be 3.5 cm. Woulgan was applied in a thin layer to the wound bed and covered with a foam dressing. Compression was not applied. For the first two weeks Woulgan was applied twice weekly, which was reduced to once a week from week 3.

Week 2

- Wound size reduced and more granulation tissue observed
- Less erythema and swelling
- Less maceration
- No debridement necessary

Week 4

- Wound size reduced
- Granulation tissue covering >90% of the wound
- No maceration

Week 5 - 29 February 2016

- Complete healing observed

- The improvement of the wound was visible from visit to visit
- After 5 weeks and 7 Woulgan applications, the ulcer was healed
- The patient experienced the dressing changes and the application of Woulgan as comfortable and painless

Other:

- No pain relief treatment needed
- No aggravating maceration of the surrounding skin was observed during the treatment
- Both patient and clinician were satisfied with the result of the treatment
- Simple to apply and easy to use and no safety issues reported
- Woulgan treatment resulted in reactivation of the healing process and complete healing of a severely stalled wound



Figure 1: Wound at presentation



Figure 2: Week 2 of Woulgan treatment



Figure 3: Week 4 of Woulgan treatment

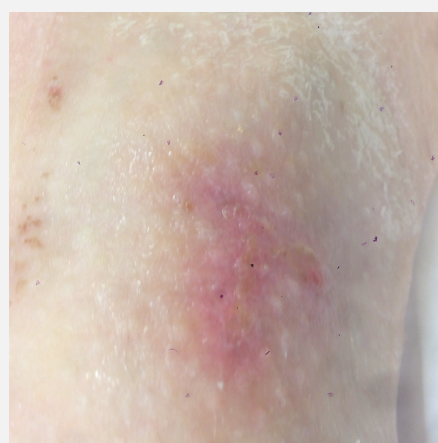


Figure 4: Week 5 of Woulgan treatment

RESULTS AND DISCUSSION

- The improvement of the wound was visible from visit to visit.
- After 5 weeks and 7 Woulgan applications, the ulcer was healed
- The patient experienced the dressing changes and the application of Woulgan as comfortable and painless
- No aggravating maceration of the surrounding skin was seen
- No safety issues were reported
- Simple to apply and easy to use