SILVERCEL®

LEVEL TWO - CASE STUDIES
Clinical experiences of using a silver hydroalginate dressing in Austria, Switzerland & Germany.


KEY POINTS

• A retrospective, multicentre case-series study, describing the effectiveness of SILVERCEL® in the treatment of moderate to highly exuding colonized or infected wounds

• Seventy-six patients were reviewed, at 12 central European specialized wound-care centers, and results showed that SILVERCEL® combated infection, reduced pain and promoted healing

• Results suggest that SILVERCEL® had a positive effect on patient quality of life

STUDY OBJECTIVE
To evaluate the effectiveness of SILVERCEL® in the management of moderate to highly exuding colonised or infected wounds, in a retrospective multicentre study.

METHODS
Seventy-six Patients attending 12 specialized wound-care centers in Austria, Switzerland and Germany were reviewed between Sept. 2005 and Feb. 2006.

The EWMA (European Wound Management Association) position paper was used by all participating centers to consistently evaluate wound infection.

Patients with chronic wound of all types and showing signs of local infection or bacterial colonization were included in this study. If wounds showed overt signs of systemic infection, antibiotics were also given.

Primary dressing: SILVERCEL®; secondary dressing was chosen to maintain a moist wound healing environment and prevent leakage, and was determined by practitioner.

Assessment included effect on wound healing, wound infection, pain (VAS scale) and overall impression of the dressing.
RESULTS
Seventy-six patients each with one wound were included in this clinical evaluation and at baseline:

- 19 had increased signs of infection (increasing malodour, pain, colonized with bacteria or low exudate levels)
- 57 showed overt signs of local infection (discharge of pus, malodour, pain, high exudate levels, erythema and local warmth)

Of the 57 wounds defined as locally infected, 41 (72%) responded to treatment & showed no signs of infection after 33 days of treatment; 16 wounds (28%) showed persistent signs of infection, however they were at reduced levels based on overall parameters.

Wound healing status was assessed visually using characteristics such as % granulation, % re-epithelisation, % reduction fibrinous tissue. The majority of wounds were found to have improved (80%) or healed (8%) after 33 days of treatment; only 1% was reported as deteriorated.

After 33 days treatment there was a marked reduction in wound pain.

Scores for ongoing wound pain at baseline and at the end of treatment

CONCLUSIONS
This retrospective study found that SILVERCEL® in conjunction with systemic antibiotic therapy, promoted wound cleansing, controlled inflammation and bacterial load, reduced pain and improved healing in chronic wounds of diverse aetiologies with clinical signs of local infection.