Effective Wound Management Influences Quality of Life

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Goals/Objectives

This case study illustrates chronic wound management's impact on a patient's quality of life.

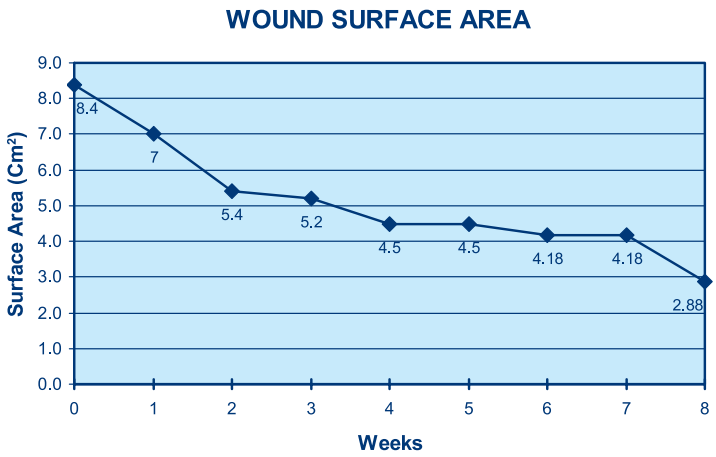
Purpose

Quality of life issues are increasingly gaining attention.[1] The ability of a patient to perform activities of daily living and return to baseline standards is vital. By addressing the multiple concerns that are related to managing a chronic disease, effective wound care can positively influence quality of life.[2] This case study describes a patient who, after receiving antimicrobial gauze dressing and compression therapy for 8 weeks, was able to return to work following a 5 year absence.

Methods

The patient presented with a left lateral malleolus venous ulcer and consented to a 12 week trial period with antimicrobial gauze dressing.* During the trial's duration, the patient returned to the clinic weekly for wound assessments. At that time, general health was assessed through vital signs and inquiries regarding any changes in the patient's prescriptions. Wound assessments included measurements of the wound surface area (L x W = cm^2) and depth, as well as photography, wound swab cultures, and dressing changes. Wound swab cultures were collected via the Levine method and sent to an independent Clinical Laboratory Improvement Amendments (CLIA) certified central laboratory.

Although initially reluctant to receive compression therapy, the patient agreed to this prescribed treatment. The 4 x 4 inches (10 x 10 cm) antimicrobial gauze square was administered as a dry sterile dressing under standard compression. The baseline leg ulcer measured 3.0 cm x 2.8 cm x 0.2 cm. At Week 8, the leg ulcer had decreased to 2.4 cm x 1.2 cm x 0.2 cm.



Results

In the span of 8 weeks, the patient's wound surface area went from 8.4 cm^2 to 2.88 cm^2. This calculates to a 66% reduction in wound size. Clinical assessments reported the wound bed filling with pink granulation tissue and remaining free of necrotic tissue. The periwound area skin was assessed as being intact without maceration or erythema present. The patient verbalized increased comfort as well. His reported pain scores on 1-10 scale reduced from an "8" to a "3". Overall microbiology data were unremarkable. Despite the single appearance each of two opportunistic microbes (Acinetobacter baumannii haemolyticus and Pseudomonas aeruginosa), these isolates were reported as < 10^5 cfu/mL ("colonization"). However, the most dramatic outcome was the patient's improved quality of life. By Week 8, the patient withdrew from the 12 week trial period, citing the reason as being able to return to his employment. Prior to the trial period, he had been unable to work for 5 years.

Discussion/Conclusion

Although not measured by a validated scale, this case study clearly demonstrates how chronic wound management influences quality of life. After 8 weeks of consistent wound care, this patient's wound surface area decreased by 66% while his comfort level increased. By the 8th week, the patient felt improved enough to return to work after a 5 year absence.

The impact of effective wound management upon quality of life should not be underestimated.[3] Thorough assessment of the chronic wound and application of the most appropriate intervention, in this case antimicrobial gauze dressing and compression therapy, can facilitate the patient's return to baseline performance.

REFERENCES

1 Ferris M.D., Frank D., Al Khateib M.H.A., M.S.N., Ahmad Abdullah, Fromantin, Isabelle et al. (2007). "Palliative Wound Care: Managing Chronic Wounds Across Life's Continuum: A Consensus Statement from the International Palliative Wound Care Initiative." *Journal of Palliative Medicine* 10 (1): 37-39; February 1, 2007.

2 Phillips, T., Stanton, B., Provan, A., Lew, R. (1994). "A Study of the Impact of Leg Ulcers on Quality of Life: Financial, Social, and Psychologic Implications." *Journal of the American Academy of Dermatology*. 31 (1): 49-53; July 1994.

3 Iglesias, CP, Birks Y, Nelson, EA et al. (2005). "Quality of Life of People with Venous Leg Ulcers: A Comparison of the Discriminative and Responsive Characteristics of Two Generic and A Disease Specific Instruments." *Quality of Life Research* 14 (7): 1705-18; September 2005.

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*Kerlix™ AMD Antimicrobial Gauze Dressing, Covidien, Mansfield, MA, 02048, USA.

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