

EFFICACY OF RTD DRESSING AND COLLOVINE LOTION IN WOUND BED PREPARATION & PERIWOUND SKIN MANAGEMENT

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Introduction

- Sibbald et al 2000 published about wound bed preparation. However, the other newer assessments such as Triangle of Wound Assessment (Dowsett and Harding 2015) gave importance to the periwound skin management. Periwound skin management is a crucial part of wound management as the keratinocytes migrate from the surrounding skin. The periwound is from the edge to 4 cm around the wound edge. The Harikrishna Periwound Skin Classification was utilized in 2015 to classify the periwound skin according to its clinical appearance (Nair et al 2018).
- Ovine Collagen helps restore tissue regenerative cells to allow porous vulnerable skin tissue to rearrange to its natural formation resulting in healthy skin repair, improved skin integrity, improved tensile strength & turgor of tissue (especially newly healed tissue).
- Glycerin, an emollient, locks in moisture at the top layer of skin, keeps the skin hydrated, improves skin barrier & improves epidermal plasticity. High concentration glycerin also provides antimicrobial protection for vulnerable skin.
- Sodium Hyaluronate (low-molecular-weight) is a humectant that penetrates deep layer till the dermis, increases water content and hydrates skin at the inner layer. It also lowers inflammation and oxidative damage.

Methodology

- Patients attending the Wound Care Unit, Department of Internal Medicine, Kuala Lumpur Hospital with chronic leg wounds were chosen by simple randomisation. Fifteen patients were chosen and assessed using the TIME concept. The wounds were cleansed with distilled water and debrided if necessary. Advanced dressings were applied. The Harikrishna Periwound Skin Classification (HSPC 2015) was utilised to classify the periwound area. Collagen, glycerin and Sodium Hyaluronate lotion was applied to the periwound area. The standard of care was maintained whereby diabetic foot ulcers

were offloaded while compression bandaging was applied for venous ulcers. Patients were seen twice a week at the wound centre.

Result

- All the periwound areas showed marked improvement due to the usage of the collagen, glycerin and hyaluronic acid lotion. The new lotion was found to be effective in moisturising and promoting new tissue growth to the periwound skin.

Conclusion

- Management of the periwound skin is an integral part of wound management. The collagen, glycerin and sodium hyaluronate lotion should be utilised as a modality to manage the periwound in chronic wounds.

Harikrishna Periwound Skin Classification (HPSC 2015)

| GRADE | TYPE | DESCRIPTION |
|------------------------|------|--------------|
| 0 | | NORMAL SKIN |
| 1 | | AT RISK SKIN |
| 2 (EXUDATE CENTRED) | A | DESSICATION |
| | B | MACERATION |
| | C | ALLERGY |
| 3 | | INFLAMMED |
| 4 | | INFECTION |
| 5 | | ATYPICAL |

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Male - 54 years old



Female - 59 years old



Male - 79 years old



Male - 69 years old



Male - 26 years old



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