HOW TO DRESS HARD-TO-DRESS AREAS

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HARTMANN

> Featuring a micro-adherent, silicone interface and borders, so no additional materials are required to secure the dressing. Dressing changes can be carried out atraumatically and almost painlessly.





Semi-permeable backing film

> Bacteria and showerproof

Absorbent core

Consisting of:

- Diffusion laver

Green hydrophobic backing

> Absorbs and retains exudate

- Unique SAP and cellulose combination

absorber polymer dressing in enabling self-care of wounds. Community Wound Care Fletcher J (2007) Dressings: cutting and application

guide. World Wide Wounds

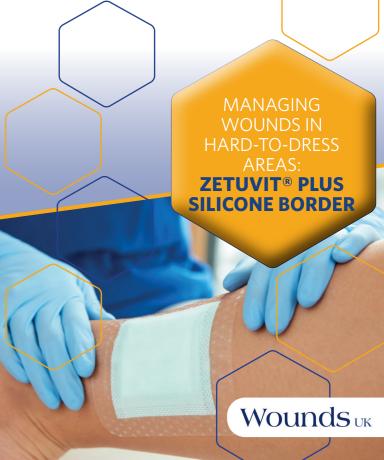
Data on file (1): 27. Z+SilBorder_Thickness Data on file (2): 27.7+SilBorder Add Feat adhesiveness assessment

of Superabsorbent Dressings Perfectus Paper; Poster presented at Wounds UK, Harrogate, UK Probst A (2019) Zetuvit Made Easy. Wounds International Stephen-Haynes J et al (2018) Wounds UK 14(5) World Union of Wound Healing Societies (2019) Consensus Document, Wound Exudate: effective assessment and management Wounds International

Hydrophilic non-woven > Quick uptake of exudate into absorbent core Silicone wound contact laver and border

Data on file (3): 27. Z+SilBorder benchmark References Davies LO et al (2017). Odour Sequestration Properties Barrett S et al (2020) Clinical evaluation of a super







HARD-TO-DRESS AREAS

ZETUVIT® PLUS SILICONE BORDER

Despite the existence of a huge range of dressing products in a wide variety of shapes and sizes, dressing wounds in some anatomical areas - such as over joints, ears, axillae, hands, sternum, the peristomal area, buttocks and sacrum, feet, heels and digits - can be a challenge.



Challenges of hard-to-dress areas that lead to delayed healing

(Fletcher, 2007)

- Poor fit and conformability
- Frequent dressing changes due to low adherence
- May cause traumatic skin damage on removal
- High levels of exudate that leaks from poor fit and conformability.

Inappropriate dressing selection for highly exuding wounds

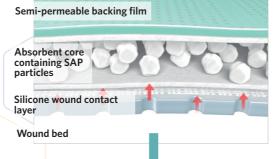
2 out of 3 patients are treated with inappropriate dressings (Stephen-Haynes, 2018). A challenge of treating highly exuding wounds is dressing leakage, and the associated problems including odour, patient discomfort, pain and maceration to the peri-wound skin.

SOLUTION?

Holistic assessment of the patient and wound will identify the the patient needs, the priorities in management and direct dressing selection. If the wound is in a hard-to-dress area, consider:

- How the patient's lifestyle will impact on the location of the wound/ dressing (i.e. need for bathing or showering, level of mobility)
- Amount and type of exudate
- Status of the peri-wound skin
- A product that is easy to apply and can fit the anatomical area.

Zetuvit® Plus Silicone Border is a superabsorbent polymer (SAP) dressing with a silicone interface and border, suitable for treatment of injured skin in acute and chronic wounds with moderate to high levels of exudate, providing optimal mositure management. It is recommended as a primary and secondary dressing (WUWHS, 2019), and it is available in a range of sizes.



Silicone Border absorbs wound exudate from the wound bed, which in chronic wounds often contains damaging components (e.g. excess MMPs).

Zetuvit® Plus



The SAP particles swell when exudate is absorbed and keep it in the dressing. Wound inhibitors in exudate, like MMPs, are retained within the SAP particles.

SUITABLE FOR SHARED CARE

Why is Zetuvit® Plus Silicone Border the ideal dressing for use in hard-to-dress areas?

- Conforms to body contours
- The transparent border can be cut to size and shape
- Unique combination of cellulose and SAP provides comfort and cushioning [Data on file 1]
- Atraumatic dressing changes due to silicone contact layer [Data on file 2]
- Simple, intuitive application; suitable for a range of wound types
- Better absorption and retention of exudate compared to similar wound dressings alleviates concerns of odour or leakage [WUWHS, 2020; Data on file 3, Davies et al, 2017]
- Can be used under compression.

Advice to support patients change their own dressing (WUWHS, 2020; Barrett et al, 2020)

- Empower the patient to not be fearful of changing their own dressing. Be honest and open about what they should expect, ensuring roles and responsibilities are clearly understood
- Ask if they would like to involve a family member or carer to be involved
- Deliver information at an appropriate level for the patient. It may be useful for the clinician to take a video of the dressing change process so the individual can watch and learn how to do it themselves
- Consider suggesting a wound journal (such as HOME) this can be a useful conversation starter at the next appointment
- Select dressings that are simple for the patient to use.