

WOUND SPRAY

Case: parchment skin



Day 1



Case

78-year old male patient with parchment skin and a traumatic wound after falling.

Previous treatment

Healing by secondary intention and start treatment with WOUND spray on the day of the injury. Wound was initially disinfected.

Treatment with WOUND

WOUND spray was applied on to the wound and surrounding skin area after cleansing with water. The wound was covered with a fatty gauze for 10 days and with a non-woven gauze held in place with a self-adhesive gauze bandage for the remaining treatment.

Day 7



Result

- Wound closure within 21 days
- Non adherence secondary dressing
- Nurturing fragile periwound skin

Day 14



Day 21



Conclusion Health Care Professional *Karin Eggenberger, wound expert, Switzerland*

"Despite parchment skin trauma being a simple acute wound, its treatment is often challenging. The main problem is the potential adherence of a secondary dressing, which can lead to a traumatic wound opening when changing the dressing. The application of WOUND in combination with a fatty gauze prevents this. This was the patient's wish because he was very scared of pain during the dressing change. If applied daily, a non-woven gauze as secondary dressing is enough, as the oil film prevents adherence of the gauze as well. In addition, the peri-wound skin is nurtured when using WOUND and the newly formed skin seems to be very robust."



WOUND SPRAY

Treatment protocol



Treatment protocol for acute or chronic wounds

Diagnose	Treatment up to wound closure (dry, moist or wet wound conditions)		
<p>Clarify the causes of the wound.</p> <p>If necessary, treatment of the underlying cause.</p>	<p>Wound cleaning options, debridement and microbiological control</p> <ol style="list-style-type: none"> Clean the wound with water or saline solution. If the required granulation is visible, wound cleaning can be omitted. Debridement. In special situations, antiseptic treatment. 	<p>Local wound treatment</p> <ol style="list-style-type: none"> Apply 2 layers of WOUND to the wound bed, the wound edge and the periwound skin. Cover the wound with a non-woven gauze or absorber, according to wound exudate. Compression / pressure relief – if indicated. <p><i>Re-apply WOUND spray daily.</i></p>	<p>If the wound has NOT improved within 4 weeks of treatment</p> <ol style="list-style-type: none"> Have the wound assessed by a wound expert. Verify diagnosis. Investigate further. Further treatment options: <ol style="list-style-type: none"> Treat the underlying cause. Continue local wound therapy. Alternative local wound therapy

Practical notes

Based on the experience of wound specialists in different countries, we can make the following practical notes when treating patients with WOUND spray:

- In case the secondary dressing adheres to the wound, ensure that enough WOUND spray is applied onto the wound (see recommendation below) and / or adjust the secondary dressing to a dressing with a lower absorption rate.

Sprays / treatments 10ml WOUND

Treated area	Sprays per treatment	Numbers of treatments
2 x 2 cm	At least 2 x	60 x
3 x 3 cm	At least 4 x	30 x
4 x 4 cm	At least 8 x	15 x
6 x 6 cm	At least 15 x	8 x

- Always use enough oil (at least 2 sprays) on the wound, the wound edge and the periwound. One WOUND 10ml pack contains approximately 120 sprays.
- If the wound edge becomes red, be aware that this is a normal reaction during the inflammation phase, which use is part of physiological wound healing, activated by WOUND spray. The inflammation phase normally lasts 3 days.
- A typical reaction of the body during the inflammation phase is to generate more exudate. If necessary, adjust the secondary dressing to being able to absorb the amount of exudate. Do not stop using WOUND spray.
- Do not stop using WOUND spray when a scab is formed, as the oil and its fatty acids penetrate through the scab and will support the healing process from below the scab.
- The specific, natural scent of WOUND masks any wound odours.

WOUND the natural spray for acute and chronic wounds