

WOUND AWARENESS

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Wounds are caused by many conditions

Knowing the aetiology of your wound and correcting contributing factors, will be the key to appropriate treatment. Engaging a specialist Wound Care Nurse Consultant, or your GP Practice Nurse will also mean continuity of care and ongoing assessment, which will contribute to an improved outcome. Diabetes, obesity, immobility, pain, poor understanding and failure of past treatments will all contribute to a poor outcome. Some complex wounds may never heal, but reducing pain, managing exudate and odour and protecting the surrounding skin will be the aim of treatment.

The role of nutrition and its influence on wound healing is well recognised

Adequate nutrition has a beneficial effect on wound healing. The body requires fluid, protein, fats and carbohydrates. It also requires micronutrients such as vitamins, minerals and trace elements. However, the role of nutrition will depend on the cause of the wound.

Wound management principles include:

- Cleansing with minimal trauma
- Removal of slough/necrosis (non-viable/dead tissue)
- Maintaining a moist wound healing environment (as it enables epithelial cells to move across the surface of the wound)
- Prevention/ reduction of infection/bio-burden
- Protection of damaged or healing tissue

Assessing the wound is very important

The colour, depth and type of exudate (fluid from a wound), will guide which dressings are most appropriate. A pink wound may indicate a wound in the final stages of healing

with new epithelium (outside layer of cells). A red wound may have granulation tissue filling it, with epithelium starting to form. Both these types of wounds will need protection of the delicate healing tissue and maintenance of a moist wound healing environment. A yellowy wound may indicate some slough which must be removed before healing will occur. Green wounds may indicate an increase in bacterial cells and it is important to reduce this bio-burden. A black wound may indicate a hard layer of eschar (dead tissue), and this must be removed by an experienced wound care nurse before healing commences.

Exudate is another important factor in wound assessment

Addressing moisture imbalance in a wound is essential for healing to take place. Maintaining a moist wound healing environment is the aim, but too much moisture will overload the wound and “macerate” it. Maceration of the skin occurs when there has been prolonged exposure to moisture or wound exudate, which may cause the skin to break down. Exudate from a chronic wound can actively damage healthy tissue.

Observing the dressing and assessing whether it is dry, moist, wet, saturated or leaking will help indicate whether the correct dressing is being used. If the dressing is saturated or leaking then this may cause maceration to the surrounding skin and either a more absorbant dressing or a more frequent dressing change is required.

Advanced dressings are designed to be left in place for some days and if the correct dressing is chosen, enable healing to take place by leaving the wound bed undisturbed.

On observation, if the dressing is dry, it may adhere to the wound bed. A hydrogel may be used to donate moisture to the wound to enable healing.

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FACT SHEET

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Advanced wound care products have different functions

There are wound irrigation products to help cleanse the wound bed and reduce bio-burden. Some products donate moisture to a dry wound, some maintain the moisture, others control the moisture. There are gentle silicone dressings, anti-microbial dressings and odour controlling dressings. The choice of wound care product is dependent on an accurate and ongoing assessment of the wound and surrounding skin.

There are many different factors that influence wound healing. Your healthcare professional will be able to advise you in the care best suited to your wound.

References

Cutting K.F. (2000) The management of skin maceration. Nursing Times 96:45, 35-36
Available at www.nursingtimes.net
Sussman, G. Wound Management.
The Next Step. Ausmed Conference 2011
White, Wendy (2011) 'Woundcare' BeBright
Study Series 2011

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