

# The use of Activon® Tulle on an overgranulated grade 3 pressure ulcer

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Male, 66 years old with Korsakoffs psychosis, stable weight on supplements, very aggressive at times. Ward report it was a grade 3 pressure ulcer from ill fitting footwear that appeared to over granulate, initial phone advice said to use a foam, unclear why this didn't happen. The dressing had not been changed for five days prior to visit, reported as IRF. The wound type was classified as complex due to its odd presentation on the second toe.

## Review notes 01.10.2007

Healing: Yellow/red

Infection: Local

Exudate: Low/medium

Dressings used-

Primary: Atrauman,

Secondary: Release



Infected - malodorous and friable, very wet, previous swab negative, query anaerobic infection, SHO looking at metronidazole course whilst await new swab results. Prescribed Inadine and Tegaderm foam non adhesive cut into a T shape and folded round toe, foam will arrest over granulation and absorb exudate. Pics to be sent to TVN at UHL (University Hospitals Leicester) for opinion as not something seen by LPT TVN before to this extent. Not measured due to curvature. Suggested should speak to Consultant regarding referring for a biopsy.

## Review notes 15.10.2007

Healing: Yellow/red

Infection: Local

Exudate: High/low

Dressings used-

Primary: Inadine

Secondary: Tegaderm Foam non adhesive



UHL suggested x ray to rule out osteomyelitis, done 5.10.2007, negative, agreed that next stage was biopsy, referral done by medics. Prescribed Activon® Tulle for anti-inflammatory effect. The toe remains friable but not malodorous, continue inadine as a temporary measure whilst awaiting Activon® Tulle from pharmacy, curvature made measurement impossible.

## Review notes 18.10.2007

Healing: Red

Infection: Critically colonised

Exudate: High/low

Dressings used-

Primary: Inadine

Secondary: Tegaderm Foam non adhesive



An improvement in friability noted, awaiting dermatology appointment, Activon® Tulle applied for anti-inflammatory effect on over granulation - this remains the working diagnosis until seen by dermatology, tegaderm foam non adhesive as secondary dressing, cavilon to peri wound and adjacent toes to protect from moisture damage, change daily, Modern Matron over seeing whilst I'm on annual leave.

## Review notes 30.10.2007

Healing: Yellow/red

Infection: Colonised

Exudate: Medium/low

Dressings used-

Primary: Activon® Tulle

Secondary: Tegaderm Foam non adhesive



Discussed with Staff Nurse, she said the toe is improving, went to dermatology last week but no biopsy as they didn't have enough staff! Unable to visit as no car.

## Review notes 11.11.2007

Dressings used-

Primary: Activon® Tulle

Secondary: Tegaderm Foam non adhesive

Less raised in appearance, seen by dermatology, query squamous cell, awaiting biopsy results.

## Review notes 20.11.2007

Healing: Red

Infection: Colonised

Exudate: Medium/low

Dressings used-

Primary: Activon® Tulle

Secondary: Tegaderm Foam non adhesive

Discussed with SHO, biopsy result is clear, continues to respond well to anti inflammatory effect of honey, continue current care.

## Review notes 09.12.2007

Healing: Yellow/Red

Wound Dimensions Length: 0.9

Infection: Colonised Breadth: 0.7

Exudate: Low Area: 0.63

Dressings used-

Primary: Activon® Tulle

Secondary: Release

Significant contraction, healthy epithelium and surround, granulation is flat, small area of slough still to debride, ensure orthotic footwear worn to prevent further ulceration. Change primary dressing to non-adherent contact layer to protect healthy granulation and progress wound to healing.

