

A Summary of UK Evaluation of the ActivHeal® Range of First Line Dressings

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Introduction

The decision making process for healthcare professionals wishing to select an appropriate dressing for the treatment of a particular patient can be a complicated process.

A dressing is described as a covering on a wound that is intended to promote healing and provide protection from further injury¹. In 1982, Turner² outlined seven criteria for the optimum dressing:

- To maintain high humidity at the wound/dressing interface
- To remove excess exudate
- To allow gaseous exchange
- To provide thermal insulation
- To be impermeable to bacteria
- To be free of particles and toxic wound contaminants
- To allow removal without causing trauma to the wound²

The selection of any wound management product should be based on a holistic assessment of the patient and their wound. It is necessary to look at the whole patient, including the underlying cause and patient-related concerns, before looking at the wound itself³. The assessment will provide baseline information about the condition of the wound that will then ensure an appropriate plan of care to aid healing⁴.

In the July 2006 Wounds UK E-newsletter, Timmons advocated the classification of wound care products into first, second and third line therapies⁵, where first line treatments could be viewed as those which we apply to wounds that are viewed as healing in a 'normal' fashion. Timmons describes first line products as hydrogels, alginates, hydrocolloids, foams and hydrofibres⁵. The ActivHeal® range consists of a hydrogel, alginates, hydrocolloids and foams and can therefore be thought of as a range of first line wound care products.

The ActivHeal® products are intended to be of at least comparable performance to other products in the same category, and to offer the NHS a cost effective range of first line dressings.

Independent laboratory testing has shown ActivHeal® dressings to have comparable physical properties to market leaders⁶. However, when an individual Trust is considering using a wound care product they often need to validate this in the clinical setting. The MedLogic Clinical Support Nurse Team has provided administrative and clinical support to a number of Trusts to assist them in undertaking clinical evaluations of the ActivHeal® dressings range.

This poster presents data compiled from clinical evaluations from 9 NHS Trusts* (4x PCT, 5x hospitals).

Method

A standard comparative clinical evaluation tool was offered to all Trusts* interested in evaluating ActivHeal® products. Using a standard evaluation form has meant that, with permission, results from a number of Trusts* can be collated to give substantial numbers of dressing changes and hence allow an assessment of statistical significance.

The clinical evaluation tool is a simple form that uses a list of 11 properties to compare the ActivHeal® dressing to the dressings which had previously been used;

- Patient comfort
- Dressing change frequency
- Ability to absorb exudate
- Ability to retain exudate
- Exhibits maceration on removal
- Ease of application
- Ease of removal
- Softens necrotic tissue
- De-sloughs
- Adverse reaction
- Stays in place

The clinicians involved in the evaluation were asked to base their assessment on as many or as few of these 11 properties as they felt were important in evaluating the particular dressing, and to rate the ActivHeal® dressing according to whether it was worse than, equivalent to, or better than, the original dressing.

The form includes sections for:

- ActivHeal® Dressing Used (Film, Hydrocolloid, Alginate Felt, Alginate Rope, Hydrogel, Foam Island (Adhesive), Foam Non-Adherent)
- ActivHeal® Dressing Name and Size used
- Hospital or PCT Name and Clinician's Name
- Description of Wound and Date of assessment
- Wound healing state (Necrotic, Sloughy, Granulating, Epithelialising, Cavity)
- Property of the ActivHeal® Dressing assessed (11 properties)
- How many days did the dressing stay in place for?
- Signature of Clinician

Results

Alginate Dressings

Patient Comfort, Maceration, Softening Necrotic Tissue, Adverse Reaction and Stays in Place

Figure 1 shows that clinicians found ActivHeal® Alginates to be equivalent to, or better than, the existing dressing in these categories.

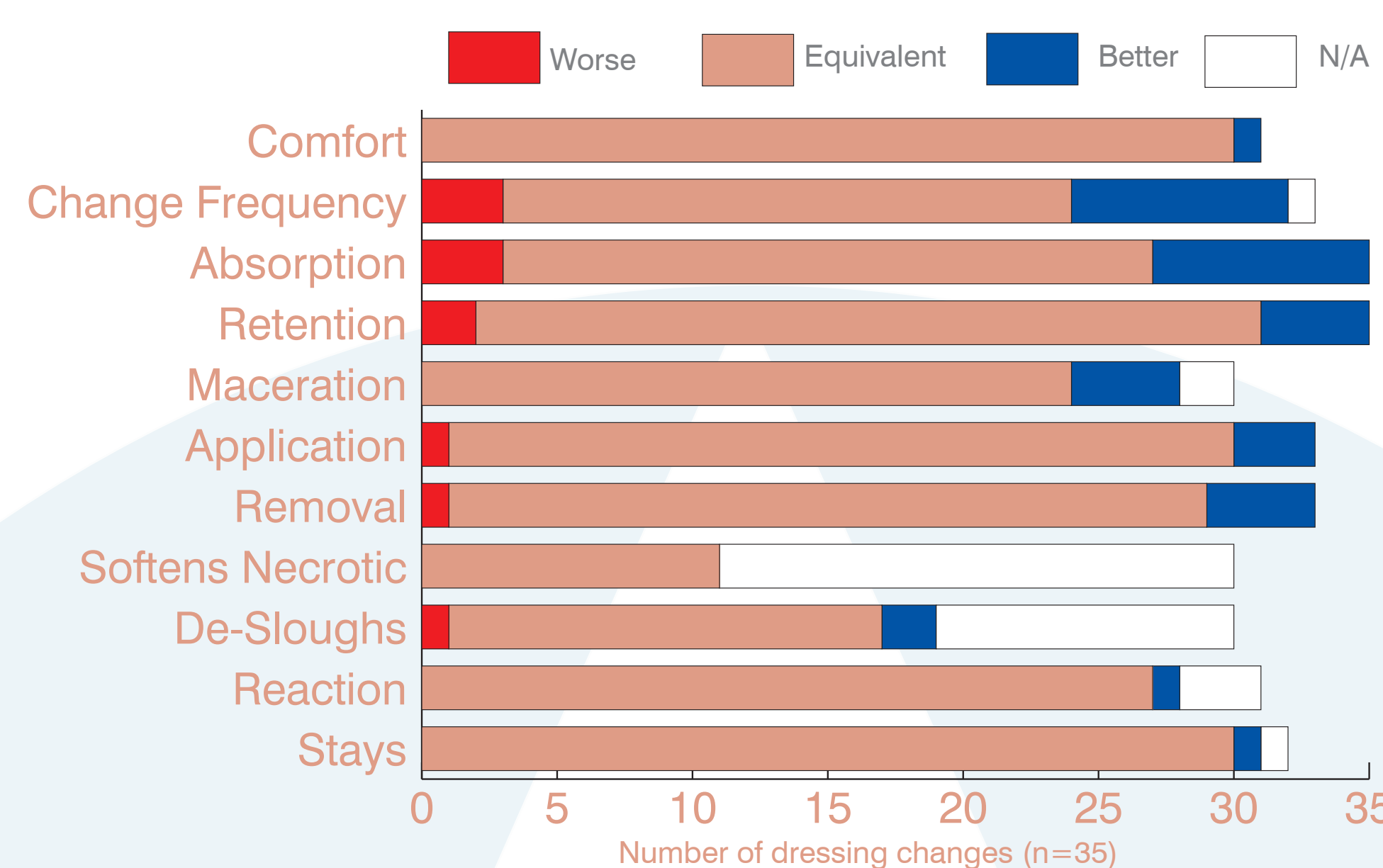


Figure 1: Summary of results for alginate dressing changes.

Dressing Change Frequency, Ability to Absorb Exudate, Ability to Retain Exudate, Ease of Application, Ease of Removal and De-Sloughing

A small percentage of clinicians found that ActivHeal® Alginate dressings were worse than the existing dressing in these categories. However, most clinicians found that ActivHeal® Alginate was equivalent to, or better than, the existing dressings.

Foam Dressings

Dressing Change Frequency, Ability to Retain Exudate, Softening Necrotic Tissue, De-Sloughing and Adverse Reaction

Figure 2 shows that ActivHeal® Foam dressings were found to be equivalent to, or better than, existing dressings in these categories.

Patient Comfort, Ability to Absorb Exudate, Exhibits Maceration on Removal, Ease of Application, Ease of Removal and Stays in Place

A small percentage of clinicians found that ActivHeal® Foam dressings were worse than the existing dressing in these categories. However, most clinicians found that ActivHeal® Foam was equivalent to, or better than, the existing dressings.

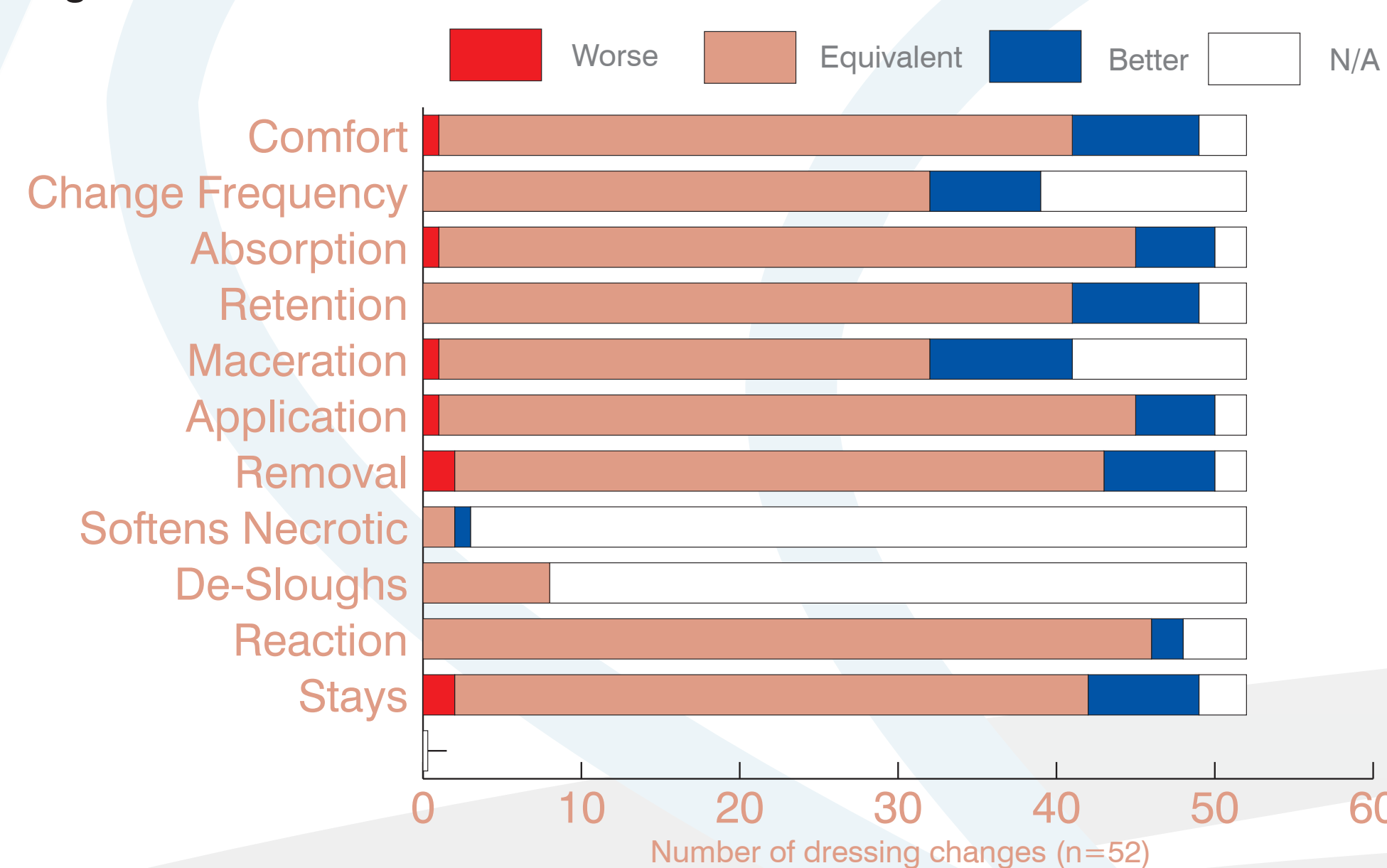


Figure 2: Summary of results for foam dressing changes.

Hydrocolloid Dressings

Softening Necrosis, De-sloughing and Adverse Reaction

This graph shows that ActivHeal® Hydrocolloid dressings were equivalent to, or better than, existing dressings in these categories.

Patient Comfort, Dressing Change Frequency, Ability to Absorb Exudate, Ability to Retain Exudate, Exhibits Maceration on Removal, Ease of Application, Ease of Removal and Stays in Place

A small percentage of clinicians found that ActivHeal® Hydrocolloid dressings were worse than the existing dressing in these categories. However, most clinicians found that ActivHeal® Hydrocolloid was equivalent to, or better than, the existing dressings.

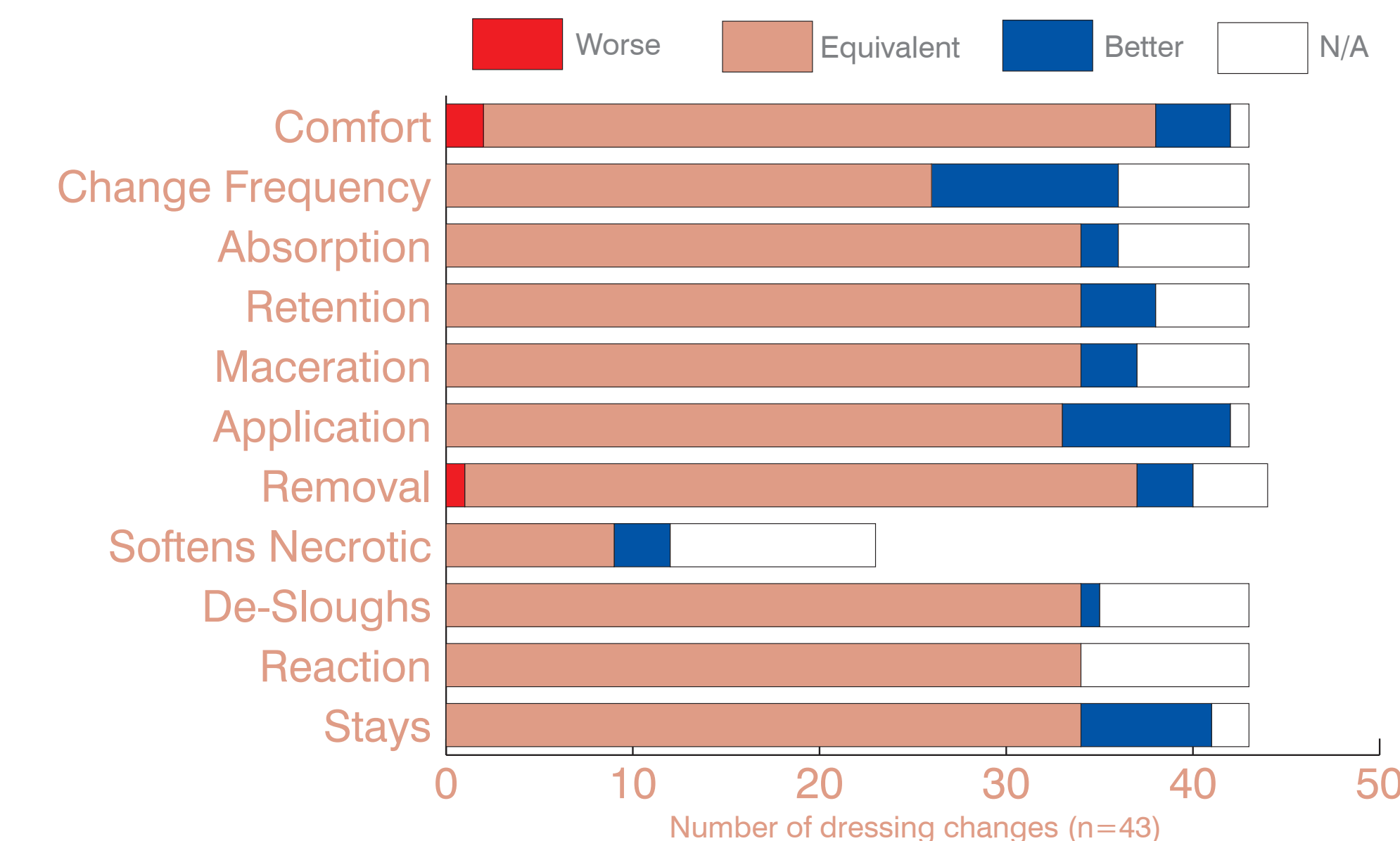


Figure 3: Summary of results for hydrocolloid dressing changes.

Hydrogel Dressings

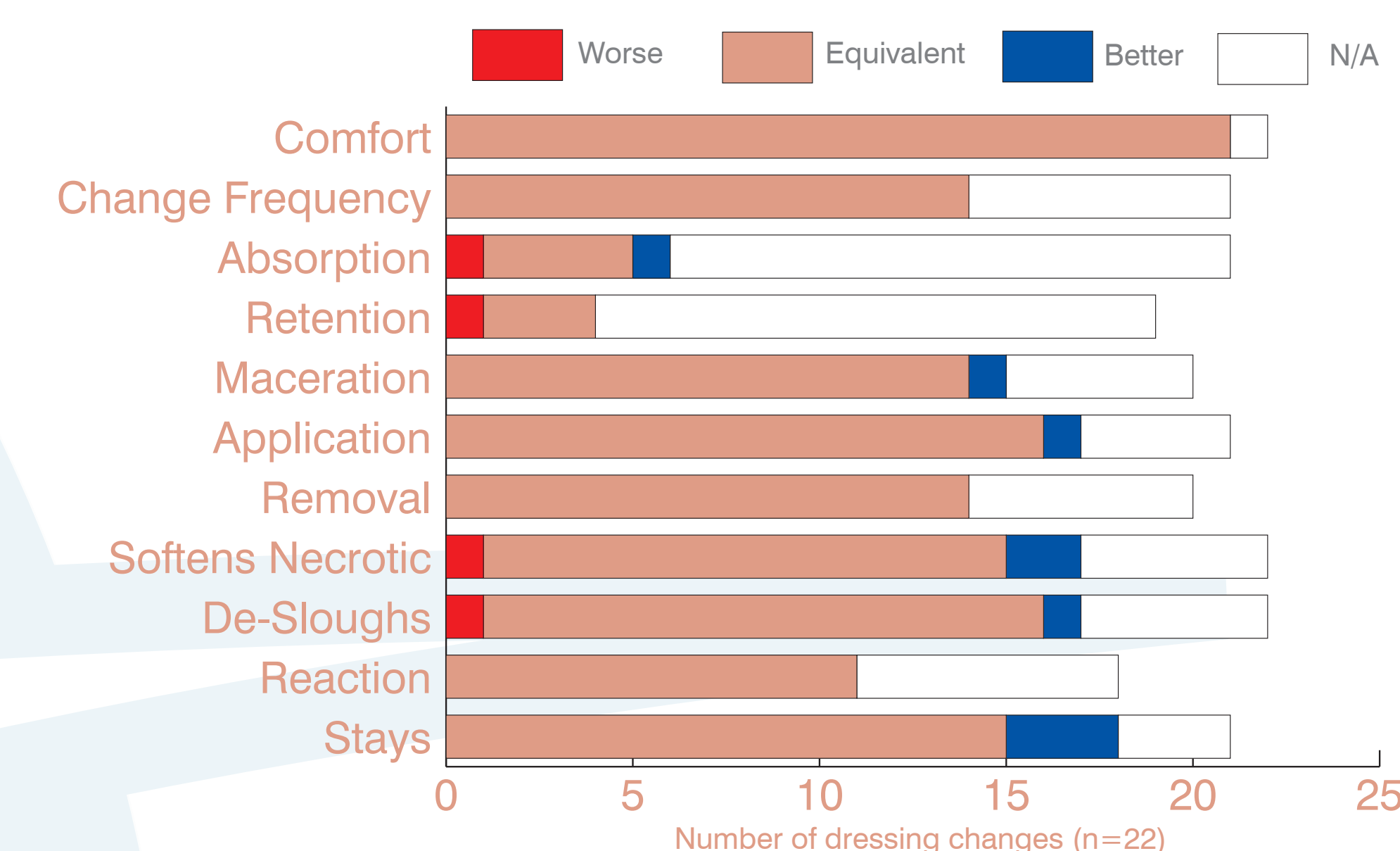


Figure 4: Summary of results for hydrogel dressing changes.

Patient Comfort, Dressing Change Frequency, Exhibits Maceration on Removal, Ease of Application, Ease of Removal, Adverse Reaction and Stays in Place

This graph shows that ActivHeal® Hydrogel was equivalent to, or better than, existing dressings in these categories.

Ability to Absorb Exudate, Ability to Retain Exudate, Softening Necrosis and De-sloughing

A small percentage of clinicians found that ActivHeal® Hydrogel dressings were worse than the existing dressing in these categories. However, most clinicians found that ActivHeal® Hydrocolloid was equivalent to, or better than, the existing dressings.

Conclusion

This poster has shown that during clinical evaluations of ActivHeal® dressings (over 152 dressing changes, and comparing 11 performance characteristics):

- 2.1% of the responses considered the performance of ActivHeal® to be worse than the previous dressing
- 86.4% of the responses considered the performance of ActivHeal® to be equivalent to the previous dressing
- 11.5% of the responses considered the performance of ActivHeal® to be better than the previous dressing

These results have enabled clinicians from a number of the Trusts involved to start using some, or all, of the dressings from the ActivHeal® Dressings range.

References

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- Timmons J (2006) *"Third Line Therapies"* *Wounds UK Woundcare E- Newsletter*. July.
- Surgical Materials Testing Laboratory report*. Data on file.

*All Trusts involved were consulted and permission sought to use data from their clinical evaluation in this poster. Although many Trusts have evaluated ActivHeal, only data from those who gave permission has been presented here. The names of all clinicians, and their corresponding NHS Trusts have been purposely kept anonymous, for reasons of confidentiality.