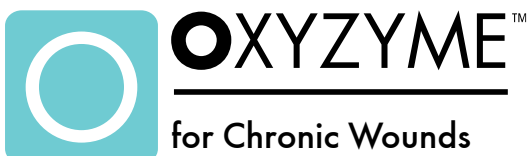




case study programme interim results

ARCHIMED CASE STUDY OXY CS001:
THE USE OF OXYZYME® ON CHRONIC
WOUNDS.

PART 5: PRESSURE ULCERS




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OXYZYME[®] CASE STUDY PROGRAMME

OXY-CS001-04/04: THE USE OF OXYZYME[®] ON CHRONIC WOUNDS



SUMMARY

- 78 year old female
- Sacral pressure ulcer
- Duration 1 year
- Wound responded poorly under occlusive secondary dressing (Granuflex)
- **STATIC**

PATIENT INFORMATION

Patient DE is a 78 year old female who presented with a sacral pressure ulcer that she had for a year.

Medical History: Alzheimers disease.

Current Medication: None

Previous Dressings: Granuflex

WOUND CONDITIONS

The wound was described as being a static granulating cavity wound with a distinct margin.

Exudate was clear but purulent, and moderate to highly exuding.

The surrounding skin was healthy.

Granuflex hydrocolloid was used as a secondary dressing throughout the case study.

ASSESSMENTS

Week 1

At the first assessment, following a week of treatment with OXYZYME[™], the wound area had not changed significantly. The condition of the wound bed, surrounding tissue and wound exudate remained the same.

Week 2

The wound was considered to be "active in areas" despite an increase in wound area (6% increase).

Week 3

By week 3 the wound remained "active in areas", but had only decreased in size by 8%, and so was therefore approximately the same size as on entry to the case study.

The exudate was less purulent, but remained high. As

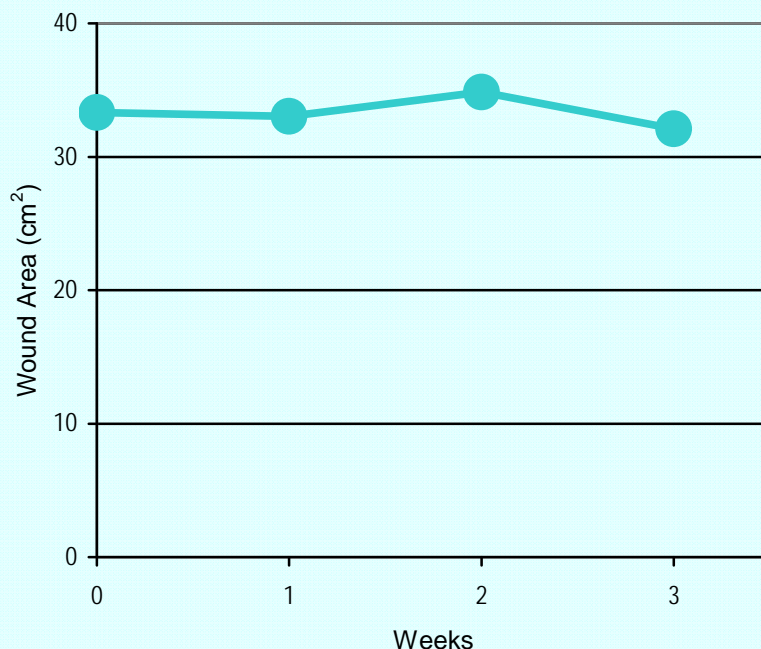


Fig. 1: Graph of change in wound area (measured by LUTM telemedicine software) with time.



Fig. 2: Wound on entry

OXYZYME[™] is contra-indicated for heavily exuding wounds the trial was stopped, with the clinician recording an assessment of "some improvement"

COMMENT

The purpose of the Case Study programme is to assess the performance of the dressing in real situations. The protocol indicates that the secondary dressing should be selected from the local formulary.

Granuflex, however, is an occlusive dressing as independent *in vitro* laboratory

testing has shown. OXYZYME[™] would therefore have been



Fig. 3: With OXYZYME[™] in place at the 1 week dressing change.

unable to deliver oxygen to the surface of the wound and so its performance would be expected to be comparable to that of a conventional sheet hydrogel.

SATISFACTION

The patient described the dressing as comfortable.

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OXYZYME[®] CASE STUDY PROGRAMME

OXY-CS001-04/10: THE USE OF OXYZYME[®] ON CHRONIC WOUNDS



SUMMARY

- 84 year old female
- Grade 4 sacral pressure ulcer
- Duration of 1 year
- Total wound area reduction of 29% within 6 weeks
- **IMPROVED**

PATIENT INFORMATION

Patient DJ is an 84 year old female who presented with a grade 4 pressure ulcer on her sacrum. The pressure ulcer had been present for 1 year. Medical history: CVA/TIA (stroke) Previous medications: co-codamol, carbamazepine, trihephenidyl, vit.c, sopliclone, codein phosphate, oramorph, arcozea Previous dressings: not documented

WOUND CONDITIONS

On entry into the case study programme the wound was measured at 12cm². The wound was described as a grade 4 (European Pressure Ulcer Advisory Panel Classification) cavity. The wound bed was 95% granulation tissue 5% moist slough. There was a moderate level of wound exudate. The surrounding tissue was erythematous.



Fig.2. Wound on entry

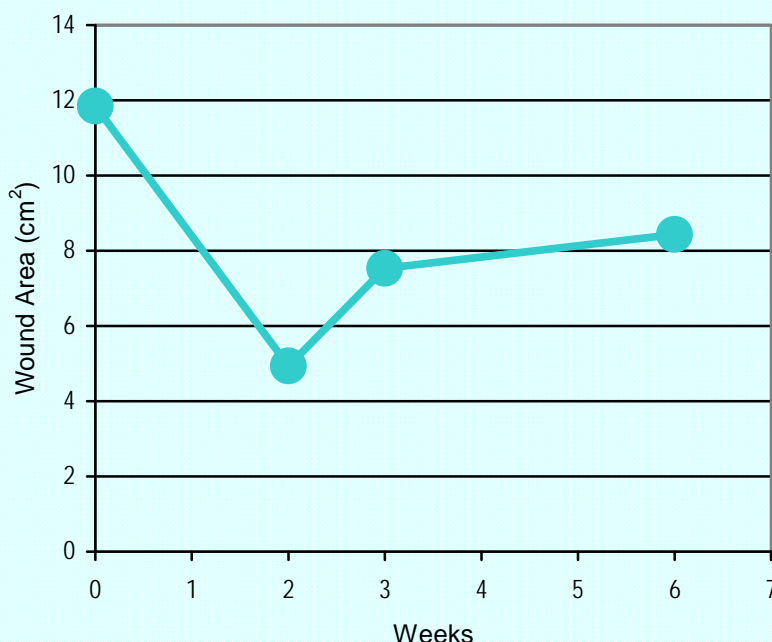


Figure 1: Graph of change in wound area (measured by LUTM telemedicine software) with time.

ASSESSMENTS

Week 1

Following treatment with Oxyzyme with an adhesive foam cover dressing the wound bed was 100% granulation tissue. The surrounding tissue remained erythematous. Exudate levels remained moderate.

Week 2

The wound was measured at 5cm² a reduction in wound area of 58%. The tissue within the wound bed continued to be 100% granulation tissue which was healthy in appearance. The clinician noted that the depth of the wound had reduced.

Week 3

The wound area had increased. The granulation tissue remained healthy in the wound bed. The surrounding tissue was healthy in appearance. Exudate levels had increased.

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Week 6

At the final assessment the wound was measured at 8cm². The wound bed was 100% granulation tissue which remained healthy in appearance. The surrounding skin was healthy. Exudate levels were moderate to high.

COMMENT

There was an overall reduction in wound area of 29% over the 6 week period.

SATISFACTION

The clinician noted that the wound had dramatically changed, granulation had increased and wound was less deep.

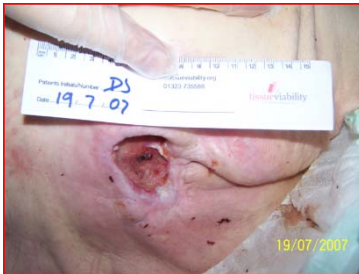


Fig.3. Wound at end of study

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OXY-CS001-14/03: THE USE OF OXYZYME[®] ON CHRONIC WOUNDS



SUMMARY

- **74 year old male**
- **pressure ulcer**
- **6 months duration**
- **IMPROVED**

PATIENT INFORMATION

Patient CN is a 74 year old male with a malleolus pressure ulcer of 7 months duration.

Medical history: chronic renal failure, anaemia, rheumatoid arthritis

Current medication:

Prednisalone, Azamioprine, Residronate, Clopidogrel, Furosemide, Rabeprazole, Tramadol, Bisoprolol, Paracetamol, Lisinopril, Rotecoxib

Previous dressings: Urgotulle SSD, Cirugel, Granugel, Cedesorb

WOUND CONDITIONS

The wound was assessed to be moderately painful on admission to the study. It was a shallow pressure ulcer with distinct wound edges. The wound bed condition was described as 70% slough and 30% granulation tissue. Exudate was clear and the peri-wound was healthy in appearance. Oxyzyme was applied to the ulcer and a secondary dressing of Mepilex border was used to secure the Oxyzyme and absorb exudate.



Fig. 1. Wound on entry to study

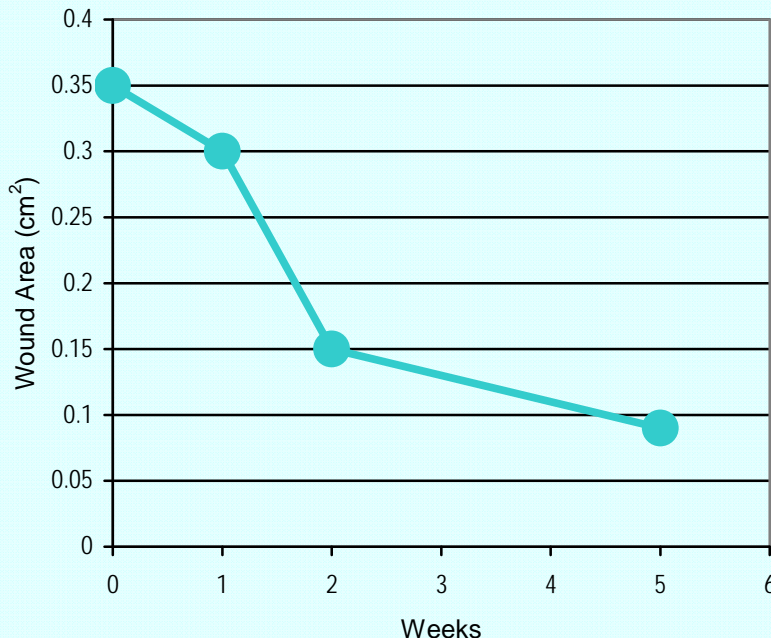


Figure 1: Wound area progress

ASSESSMENTS

Week 1

The wound was described as remaining shallow in depth with defined margins. The wound bed condition had improved to 10% slough and 90% granulation tissue. The patient expressed that the dressing was comfortable and his pain levels were moderate. The same secondary dressing was reapplied.



Fig. 2. Wound at week 1

Week 2

A further reduction in wound size was noted and the wound bed was 100% granulation tissue. No pain was experienced by the patient who also deemed the dressing comfortable during wear time.



Fig. 3. Wound at week 2

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Week 3

The wound was wound smaller. Patient started on Betnovate to treat skin rash but discontinued during this third week.

Week 4

Wound condition and area unchanged. The skin rash continued and a new ointment was applied (Trimovate).

Week 5.

The wound was smaller.



Fig. 4. Wound at week 5

Week 6

Wound bed described as 100% granulation tissue. (No photograph).

The peri-wound is healthy in appearance and exudate is clear.

COMMENTS

The investigator stated that the dressing performed much better than other dressings for this wound type and that they would recommend that Oxyzyme be added to the local formulary.

SATISFACTION

The patient was satisfied with the overall comfort of the dressing.

The pain score decreased throughout the duration of the study.