

## CASE STUDY : Treatment of exuding venous leg ulcer with the superabsorbent wound dressing curea P1

**Introduction:** The leg ulcer is the most common type of chronic wound. According to the German Institute for Wound Healing the average prevalence over all age groups is just 0.2%, but increases for the age group of over 70 years up to 2.5%. The treatment costs per patient are approximately 10,000 €, for Germany this accumulates to an economic cost of 1 billion €<sup>1</sup>. Besides the improvement of the social situation of the patients, an effective treatment bears a high potential to unburden the health insurance system. Further more it is of economic importance to avoid that patients have to stop working – wound odour can inflict severe social issues – or to reintegrate them as fast as possible. The question how the duration of wound healing and the attending circumstances (pain and odour) are dealt with, are not only of medical but also of social and economic concern.

**Case description:** At an private surgical practice in Berlin, two outpatients with venous leg ulcer where treated from August to October 2011. The treatment and the healing progress where monitored:

Patient		Age of the wound	Initial wound size	Terminal wound size	Duration of observation
<b>A</b>	f, 87 years	12 month	35,0 cm <sup>2</sup>	5,5 cm <sup>2</sup>	8 weeks
<b>B</b>	m, 57 years	4 month	5,5 cm <sup>2</sup>	1,1 cm <sup>2</sup>	6 weeks

**Therapeutic approach:** The wounds were dressed with curea P1 in the dimensions of 10x10 cm or 10x20 cm respectively. And during the dressing change, the wounds were cleaned with wound lavage (to some extend disinfectant). The dimension of the dressing used was chosen according to the actual wound size. Initially the dressings were changed three times per week and with the healing progress reduced to two times per week.

**Patient A** came to the practice, because her venous leg ulcer above the right ankle did show significant healing despite an intensive wound care with various materials for more than one year. Her overall condition was good and she was mobile. During the eight weeks of treatment and observation, the wound size was reduced about 84%. Wound pain and odour vanished within the first weeks of treatment.



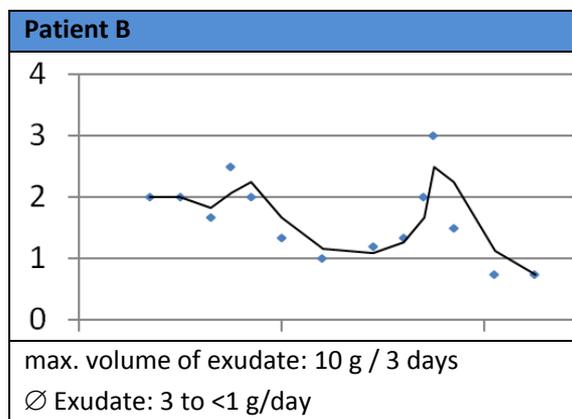
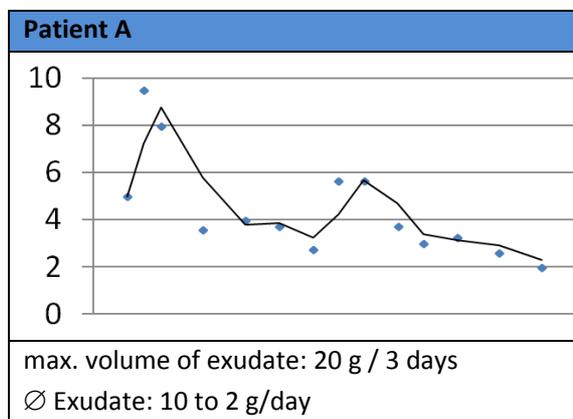
**Patient B** suffers for 15 years from untreated recurrent trunk and side branch varicose veins, but was in a good overall condition and mobile. The patient refused to have the varicosis treated. Accessory symptom of the varicosis is an venous leg ulcer above the right ankle. During the observation time of six weeks, the wound size could be reduced about 80%. The wound pain vanished during the first weeks of treatment. Unfortunately the leg ulcer increased after this time due to the untreated varicosis, as it happened during the last eight years regularly.

<sup>1</sup> KLARE R., EDER S. (2008): Erfolgreiches Therapiekonzept des Ulcus cruris, Deutsches Institut für Wundheilung, Radolfzell.

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**Exudation:** Interestingly no quantities of exudation of different aetiologies are published in the relevant journals. To have some exemplary data, the used dressings were weighted and the average volume of exudate per day was calculated from the weight.



Technically, the curea P1 10x10 cm dressings can absorb up to 100 g exudate (phys. NaCl). This capacity has not been depleted by far during our observation. But to protect the periwound skin effectively against maceration, the dimension of the dressing has to be chosen according the actual wound size. The absorptive core should overlap for approximately two cm.

**Summary:** Of course, a good dressing can not replace the treatment of the main cause for a leg ulcer. But the efficiency of curea P1 can be evaluated as successful: The healing progress was clearly visible and significant and in both cases wound odour and pain were dispelled within the first weeks of treatment. The wound dressings could be changed easily and without pain for the patient. Exudate is absorbed safely without leakage and maceration was not present in an extend that would have indicated further action.

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