

Managing exudate and wound healing in Lymphoedema – *an innovative approach*

Before...



ABSTRACT

This study highlights an inspirational case of a man with long standing lymphovenous oedema complicated by non-healing wounds over 10 years. The distress of the odour, exudate and daily management had led to depression and the need for maximum daily pain relief in order for him to function at all. The dressings had to be changed up to 4 times daily during work hours in order to manage the exudate. He had regular episodes of cellulitis. There was also a risk that his job would have to change due to the management of his leg and he was socially isolated.

After evaluating a new self-care regime using an innovative, simple compression device, his need for pain relief reduced rapidly within the first week and continued to diminish altogether. The exudate reduced significantly over the first 2 days and stopped altogether within 4 days. His motivation improved with each dressing change as he could see the wounds healing each time. He began to regain a socially interactive life because there was no longer an offensive odour to his legs. His lymphoedema and recurrent cellulitis were also controlled.

Originally, he was such a complex case, it was thought that nothing would help resolve his issues, however, with some very simple guidelines and the use of a device that was easy for him to manage at home he became a happy, motivated and inspirational person. His leg is wound free, the skin is hydrated and intact, and even the discolouration of long standing chronic inflammation has significantly reduced.

Juxta-CURES™



OBJECTIVE

To evaluate whether an innovative approach to wound healing and oedema control would:

- Help in a long standing, non-healing venous leg ulcer complicated by chronic oedema,
- Reduce exudate
- Improve Quality of Life
- Reduce Pain

EVALUATION

- Use of an innovative device which is inelastic, instantly re-adjustable and contains a built in pressure monitoring system to accurately apply the mmHg relevant to the specific patient (20-30-40 or 50mmHg) and therefore improve self management
- Review the possibility of reduction of exudate, and therefore reduction in dressing changes
- Assess if the system helped in combatting odour of the ulcer
- Evaluate the ulcer healing capabilities

Juxta-CURES™ was fitted to the patient according to his ankle and calf measurements and secured with its Velcro lock system

The Built in Pressure Monitoring System was used to administer the required dose of compression (40mmHg in this case study). The device is so simple to use that a patient can be shown how to check the compression throughout the day. Oedema reduction can occur within 2 hours of short stretch bandages being applied (Damstra 2011) with this device, this problem is overcome by regular checking and readjusting. Resulting in an effective way to chase down of oedema.

CONCLUSIONS

Evaluating the Juxta-CURES™ helped empower this gentleman, who went on to become pain-free, ulcer-free, independent, motivated and an inspiration to others. He now controls his condition in flat knit compression.

...and after Juxta-CURES™ treatment



During the first four days of use, the Juxta-CURES™ was left in place, readjusted throughout the day as necessary, no dressing change occurred. There was some strike through, but nothing significant.



After 4 days – exudate controlled



After one month



After two months



This gentleman now controls his healed leg in Flat Knit compression garments

Significant changes in so many aspects of life:

PAIN FREE • No longer takes medication for depression and pain relief

No Exudate:

NO ODOUR • No dressing changes • No longer embarrassed by condition

IMPROVED QUALITY OF LIFE • Able to take control of his condition without relying on Health Care Professionals and appointments • Helps organise, and plays in local Brass Band • Has an active social life.

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References:
Damstra R, Lamprou D-AA, Partsch H (2011) Prospective Trial comparing the effect of Juxta-Cure™ TM versus trico bandages in treating leg lymphoedema, presented at 23rd International Congress of Lymphology - Malmo