

Clinical Trial of a New Foam Dressing for the Local Management of 10 Donor Sites

Catherine R. Ratliff, PhD, APRN-BC, CWOCN, Patrick Garvey, MD, David B. Drake, MD,
University of Virginia Health System, Charlottesville, Virginia

Introduction

Split-thickness skin grafts are frequently performed surgical procedures but consensus does not exist regarding optimal donor site care. The overall efficacy of various dressings is usually determined based on healing, associated pain, and expense. This is a clinical evaluation of a non-adhesive absorbent foam dressing* on the donor sites of 10 patients undergoing split-thickness skin grafting.

Methodology

The placement of the non-adhesive absorbent foam dressing* on the donor site was done in the operating room at the time of the surgery. The foam was then covered with a transparent film dressing to secure it. Patients were seen in the clinic one week later for their first postoperative check-up at which time the dressing was removed and the donor site was assessed. Patients were asked about pain associated with the donor site. If needed, the non-adhesive absorbent foam dressing was reapplied and patients were followed until complete healing of the donor site occurred.

Results

Ten patients, 8 men and 2 women, undergoing split-thickness skin graft participated in the study. The ages of the patients ranged from 39 to 64 with a mean of 53.5 years. A total of 16 foam dressings* were used for these ten subjects (range 1–3; mean 1.6 dressings). Six patients only needed one dressing change before the donor site was healed. Seven of the 10 donor sites were located on the left thigh with 2 on the right thigh and one on the right forearm. The average size of the donor site was 62.25 cm². When asked about pain or problems with the dressing, patients did not report any pain or problems with the donor site or the dressing itself.

Conclusion

This clinical trial of 10 patients indicated that a non-adhesive absorbent foam dressing* is a good option for covering donor sites.

* Product used was **Restore** Non-Adhesive Foam Dressing with TRIACT Technology by Hollister Wound Care LLC.

Objectives:

1. To provide clinical experience in reducing patient pain using a foam dressing on split-thickness skin graft donor sites.
2. To provide clinical experience in reducing the number of dressings applied and time saved during dressing changing using a foam dressing on split-thickness skin graft donor sites.

Methodology

- Placement of the non-adhesive absorbent foam dressing* on the donor site was done in the operating room at the time of surgery
- Foam was covered with a transparent film dressing to secure it
- Patients were seen in the clinic one week later for post-operative check-up
- Dressing was removed and donor site assessed
- Patients were asked about pain associated with the donor site
- If needed, the non-adhesive absorbent foam dressing was reapplied and patients were followed until complete healing of the donor site.

Results

- 10 patients (8 men, 2 women) undergoing split-thickness skin graft
- Age range 39 to 64 years
 - Mean: 53.5 years
- 16 foam dressings were used
 - Range: 1 to 3 dressings per patient
 - Mean: 1.6 dressings
 - Mode: 1 dressing. Six patients only needed one dressing change before donor site healed

- Location of donor site
 - 7 left thigh
 - 2 right thigh
 - 1 right forearm
- Average size of donor site: 62.25 cm²
- Patients did not report any pain or problems with the donor site or the dressing itself

Case Study 1: 57 year old male with a donor site on the left thigh

Picture of original dressing placed in the operating room on the donor site 6 days prior for coverage of a scalp defect following resection of recurrent dermatofibrosarcoma.



Patient after the foam dressing was removed with a healed donor site 6 days after surgery.



Case Study 2: 64 year old male with a donor site on the right thigh

Picture of the original foam dressing placed in the operating room on the donor site 6 days prior for coverage following resection of squamous cell carcinoma of right foot.

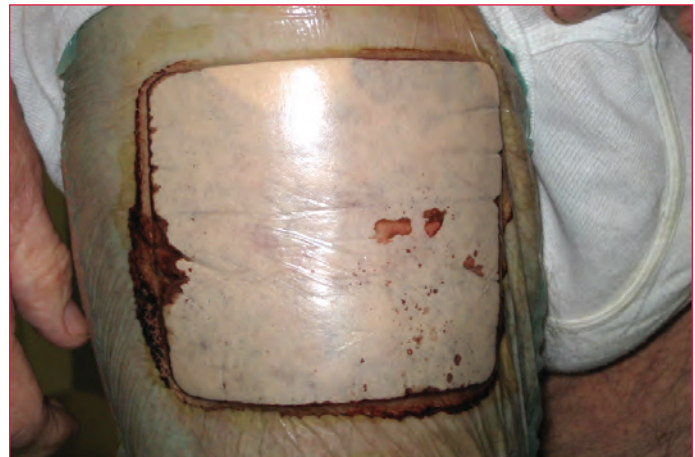


Patient after the foam dressing was removed. Patient required 2 additional foam dressing changes before his donor site healed approximately 4 weeks after surgery.

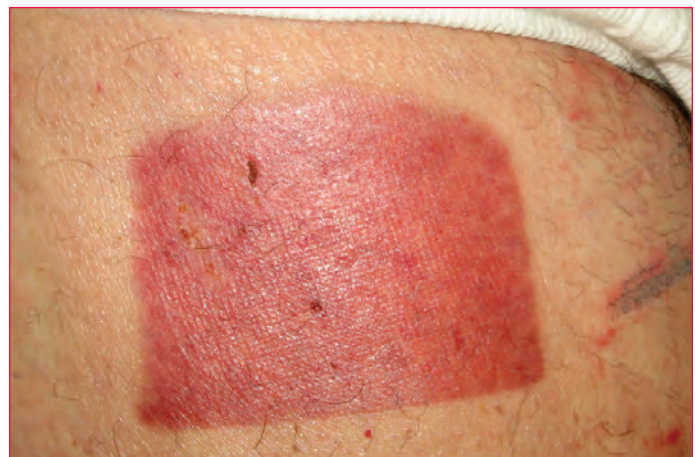


Case Study 3: 62 year old male with a donor site on the right thigh

Picture of the original foam dressing placed in the operating room on the donor site 8 days prior to coverage of facial wound which originated from resection of squamous cell cancer on the floor of the mouth.

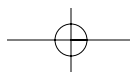


Patient after the foam dressing was removed. Patient required one more foam dressing, and donor site was healed one week later.



Conclusion

This clinical trial of 10 patients indicated that a non-adhesive absorbent foam dressing* is a good option for covering donor sites.



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Hollister Wound Care LLC

Libertyville, Illinois 60048
1.800.323.4060

Distributed in Canada by

Hollister Limited

95 Mary Street
Aurora, Ontario L4G 1G3
1.800.263.7400

www.hollisterwoundcare.com

