

# Use of a Soft Silicone Foam Dressing to Change the Trajectory of Destruction Associated with Suspected Deep Tissue Pressure Ulcers

**Citation:** Sullivan R. Use of a silicone foam dressing to change the trajectory of destruction associated with suspected deep tissue pressure ulcers. *MedSurg Nurs.* 2015;24(4):237-67.

**PubMed link:** <http://www.ncbi.nlm.nih.gov/pubmed/26434036>

## Synopsis

In this 24 month retrospective study, a soft silicone, multi-layered bordered foam was applied over suspected deep tissue injuries (sDTIs). The ulcers were then observed by the Wound Care Specialist throughout hospitalization (1 day to 14 weeks duration) for a pattern of healing or deterioration. A total of 77 adult hospitalized patients with 128 sDTIs were followed for 377 encounters.

**Results:** The study identified patient outcomes in considerable contrast to those previously published. Of the 128 ulcers, 66% (85 ulcers) of ulcers progressed toward healing or resolved, 24% (31 ulcers) remained the same and 9.3% (12 ulcers) deteriorated. One sDTI progressed to full thickness. Often demonstrable healing started early with progress observed as early as day 4. At that time, 24 ulcers resolved completely and five were progressing toward resolution.

In areas at high risk for fecal or urinary incontinence or with limited dressing adherence, offloading without the dressing was implemented. Of those utilizing offloading without the dressing, only 7.8% improved and 4.3% resolved.

Of the 9.3% of ulcers that deteriorated, significant (98.4%) noncompliance with the dressing protocol was found.

The significant resolution seen is largely attributed to implementation of the soft silicone, multi-layered bordered foam dressing (Mepilex® Border Sacrum; Mölnlycke® Health Care) as standard of care.

## Additional Notes on Methodology

- A standard Pressure Ulcer Prevention (PUP) Bundle was implemented in all cases.
- Parameters followed included: demographics, the evolution of the sDTI including site, presentation, measurements, tissue consistency and treatment. When a finding of significant sDTI recovery was assessed, a secondary analysis focused on commonalities and variables that may have contributed to the improved patient outcomes.

## Additional notable discussions:

- The author notes that no published literature was found demonstrating similar resolution pattern for sDTIs with any treatment.
- The prevalence of sDTIs appears to be increasing. Although pressure ulcers in general decreased approximately 1% in 2009, the proportion of ulcers identified as sDTI increased to 9%, exceeding that of stage III and IV ulcers.
- Approximately 75% of stage II ulcers heal within 8 weeks yet only 52% of stage IV pressure ulcers heal within 1 year. 38% never heal.
- The cost to treat stage III or IV ulcers can easily reach over \$100,000/ulcer.
- Pressure ulcers result in more than 17,000 lawsuits and are the second most common claim for wrongful death.

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