

Clinical results about an antimicrobial solution (Dermacyn® Wound Care) in the treatment of infected chronic wounds



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One of the most ancient treatment for chronic wounds is antisepsis. New guidelines about WBP, and the next evolution TIME, highlightened the concepts of continuous debridement and bacterial balance. Actually industries are giving to the operators new technologically advanced products to this aim.

AIM OF THE STUDY

Evaluation of the clinical performance of an antiseptic solution Dermacyn ® Wound Care

DERMACYN® WOUND CARE is a new conception superoxydized antimicrobial solution with significant cleansing activity.

MATERIALS AND METHODS

We evaluated 40 patients with infected wounds following the criteria of Cutting and Harding; analyzed data have been: pain (VAS), improvement/resolution of the clinical signs of infection, bad odour reduction, white blood cells count and duration of hospitalization.

Patients have been randomized into two groups:

- □ Group One: systemic antibiotic therapy (Ceftriaxonum 2 gr/day + Teicoplanin 400 mg/day + Metronidazolum 1 gr/day) and topical treatment with povidon iodine
 - solution (two dressings per day).
- □ Group Two: systemic antibiotic therapy (Ceftriaxone 2 gr/day + Teicoplanin 400 mg/day + Metronidazolum 1 gr/day) and topical treatment with Dermacyn® Wound
 - Care soaked cotton gauzes on a layer of non-adherent dressing (two dressings per day).

Groups	Age	Male	Female
ONE	76,3 (43-82)	7	13
TWO	79,1 (67 – 84)	9	11

Casuistics

Pain increasing Exudate increasing Wound area extension Stop of the repairing processes Bad odour Bridging Frequent bleeding Inflammation of the surrounding skin

RESULTS

Groups	VAS	Clinical signs	Odour +	WBC
ONE	8.3 (6 -10)	20	19	15,8
TWO	8 (6 -10)	20	18	14, 9

Beginning items

Groups	VAS 7 days	Clinical signs reduction days	Odour reduction days	WBC 7 days	Days of hospitalization
ONE	4,1	7,9 (6-15)	19 (5 -10)	11,6	12,3 (8 -19)
TWO	4,3	5,4 (3 -9)	02 (1-4)	11,2	8,2 (7 -10)

Results

CONCLUSIONS

DERMACYN® WOUND CARE showed better results about analyzed parameters especially in terms of days of hospitalization and clinical signs reduction.

Pain reduction was quicker in group two, however we have no data only the clinical subjective sensations of the patients