

Supported Self-Management of hard to heal pressure ulcers using a simple 3 step framework developed by

Coloplast

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Introduction

Pressure ulcers can be misdiagnosed due to various challenges in identifying and distinguishing them from other types of wounds and skin conditions.¹ The lack of necessary training in pressure ulcer management can also create uncertainty in diagnosing pressure ulcers accurately, leading to inappropriate or delayed treatment.² This can delay wound healing, raise healthcare costs and increase the risk of complications. The 3 Step Approach developed by Coloplast provides Healthcare Professionals with a step-by-step framework to effectively Assess, Prepare, and Treat wounds.³ This simplified and structured framework is designed to guide clinicians to focus on a holistic assessment to get the diagnosis right, followed by effective wound preparation to remove the barriers to healing and prescribing a simplified treatment plan to optimise wound healing.

Method

This is a case study of Mr. P, an 81-year-old gentleman who presented in clinic with a longstanding category 2 pressure ulcer to his right and left buttocks (Figure 1). The category 2 pressure ulcers had been present for 2 years and had been misdiagnosed from the outset; therefore, the incorrect treatment of antifungal and steroid creams had not been successful.

Mr P is normally independently mobile and in good health. However, prior to the wounds developing, he was admitted to hospital with severe pneumonia, where he was bed-bound for a few days. He noticed the wounds upon discharge and tried to self-manage for a few weeks before consulting with his GP. Mr. P described the wounds as painful and felt they had significantly impacted his quality of life as he was not able to sit, lie down, or rest properly. Mr P was also unable to undertake his usual activities such as gardening and attending his weekly ballroom dance class. His wife offered great help with the application of various creams and dressings, but over time they felt frustrated managing these wounds without seeing real progression or achieving wound closure.

He was referred and seen by a Tissue Viability Nurse Specialist for further input while waiting for a dermatology appointment. The 3 Step Approach framework was implemented: Assess, Prepare and Treat.

Assessment

A full holistic assessment was completed, and the wounds were diagnosed as category 2 pressure ulcers based on history and wound presentation. On initial assessment, the wounds were measured as follows: left buttock wound = 1.5 cm x 1.5 cm in diameter, and right buttock wound = 0.5 cm x 0.5 cm in diameter. Both wounds had 100% dark granulation tissue, non-advancing margins, a moderate amount of exudate, and were suspected to have a biofilm-related wound infection. The peri-wound skin was fragile due to extensive scarring from an old burn injury he sustained as a child (Figure 1).

Preparation

Due to the hard to heal nature of the wounds, Alprep® Pad was used to cleanse and mechanically debride the wound bed to actively remove unhealthy tissue, debris, and biofilm.

Treatment

Biatain® Silicone with 3DFit Technology was used to dress the wounds allowing for management of wound exudate and to promote a moist wound healing environment. The wounds were prepared and treated (dressed) three times a week, as per the patient's request to meet his personal hygiene needs.

Discussion

Healing and preventing pressure ulcers must involve a holistic approach; therefore, other pressure ulcer management strategies were discussed and implemented: regular repositioning 2-4 hours daily, the use of a pressure-relieving cushion, and eating a well-balanced diet. In addition, to encourage engagement with the treatment plan, supported self-management was explored and agreed upon with support from his wife, who performed both wound preparation and dressing application due to the awkward location of his wounds.

Result

Mr. P healed in 4.5 weeks with no complications (Figure 3). He got back to attending his ballroom dance class every week without anxiety about wound leakage, pain, or deterioration. He later became more physically active, participating in gardening activities with his wife – a significant improvement to his quality of life. The dermatology referral and further review with his GP were cancelled, releasing extra clinical capacity for other patients. Prior to discharge, skin care and spotting the early signs of pressure damage were discussed to prevent recurrence.



Figure 1: Date 15/02/2024 , initial assessment



Figure 2: Date 07/03/2024, 3 weeks post 3 Step Approach initiation



Figure 3: Date 19/03/2024, final assessment

Conclusion

This case study demonstrates how using a structured framework, such as The 3 Step Approach by Coloplast, can help with accurate diagnosis and treatment of pressure ulcers. The three simple steps of Assess, Prepare, and Treat can support better outcomes and improve quality of life for patients like Mr. P through holistic assessment, effective wound preparation, and a simplified treatment plan to support self-management. All of which can support to empower clinicians, patients and their caregivers to optimise wound healing and achieve the best possible outcomes.

References

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3. Atkinson, K., Orig, R. and Vernon, T., 2024. The Coloplast 3-Step Approach: simplifying wound healing. *Wounds*, 20(2), p.50.