

# **CLINICAL CASE STUDY UTILIZING A NEW "COLLAGEN GLYCERINE GEL SHEET" TO HEAL CHRONIC NON-HEALING PARTIAL THICKNESS WOUNDS**

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## **ABSTRACT**

**Two case studies of wounds failing to close utilizing conventional treatment are presented.**

**Patient #1** is an eighty-three year old woman, post-op hemi colectomy, with a wound failing to close. She had been treated by Home Health Care for two months. There had been no progression of the wound healing over the last five weeks. A new collagen glycerine gel sheet was excellent for enhancement of wound closure. The wound achieved closure without complication and had minimal scarring in four weeks, while utilizing the new collagen glycerine gel sheet.

**Patient #2** is a seventy-five year old patient with two stasis ulcers of the lower leg. The patient had been treated with a topical antibiotic and compression therapy for ten weeks with failure to reach closure. The wound achieved closure without complication utilizing the collagen glycerine gel sheet and compression in four weeks.

The goal for these two patients was to attain wound closure for these wounds which had failed to attain closure using conventional care for an extended period of time.

- The collagen glycerine sheet was selected for treatment of these wounds for its cushioning effect, conformability, ease of use, and ability to absorb excess fluids.
- This poster demonstrates enhanced closure for wounds stalled in the healing process and therefore warrants further studies and data collection.

The composition of this dressing and the physical form created an ideal healing environment for achieving wound closure with excellent cosmetic appearance for these two wounds. This collagen glycerine based dressing absorbs aqueous fluids and offers cool, soothing properties when applied to an open wound. We found this dressing to absorb moderate amounts of wound fluid and did not dry out or become stuck to the wound. Our previous experiences with glycerine based gels have shown that they reduce the inflammation reaction, inhibit bacteria proliferation, do not dry out, and support autolytic debridement. In addition, the plasticizing effect of glycerine along with the other dressing properties resulted in total epithelialization with no scarring. The "no stick" properties made dressing changes simple and quick, which reduced nursing time to a minimum.

We found this dressing easy to apply and very effective to stimulate these recalcitrant wounds, achieving wound closure. We are presenting this poster to encourage other clinicians to further evaluate the use of collagen glycerine dressing for optimal healing in the most cost-effective manner.

Although wound dressings of many types have been grouped by category type, i.e. hydrogels, hydrocolloids, alginates, enzymatic debriders, etc., each product within each category varies greatly in its composition, performance, and efficacy. Because every product functions in a different manner and has its own unique characteristics, it is imperative that we expand the knowledge of the "true" benefits that each dressing has to offer.

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# CLINICAL CASE STUDY UTILIZING A NEW "COLLAGEN GLYCERINE GEL

## Case Study #1: Non-Healing Post-Operative Wound

Patient is eighty-three years old with post operative abdominal wound.  
Home Health Care reported no progression of healing for the last five weeks.



### Initial visit to the wound care clinic 03/06/03 ~ photo #1:

The total size of the wound measured 0.6 cm width x 3.0 cm length and was non-tender with no signs or symptoms of infection or odor. Wound edges were non-rolled and scarring.

**Protocol:** Because the goal was wound closure, it was decided to cover the wound with a new collagen glycerine gel sheet. It was covered with dry gauze and changed every 3-4 days to enhance closure.



Photo 1: 03/06/03

### One week later 03/13/03 ~ photo #2:

The size of the wound measured 0.3 cm width x 0.4 cm length. The wound base was granulating, the epithelium was migrating from the wound edges and the open wound had a covering of granulation tissue. No signs or symptoms of infection.

**Protocol:** Same protocol continued.



Photo 2: 03/13/03

### Second follow-up visit 03/20/03 ~ photo #3

The size of the wound measured 0.3 cm width x 0.3 cm length. The remaining wound bed was granulating and epithelium continues to migrate from the wound edges toward closure with increased granulation and collagen. No signs or symptoms of infection.

**Protocol:** Same protocol continued.



Photo 3: 03/20/03

### Last follow-up visit 04/03/03 ~ photo #4

Wound is essentially healed.

The wound measured 0.2 cm width x 0.3 cm length.

**Protocol:** Covered with dry bandage.

**Conclusion:** Wound healed in four weeks. Dressing was comfortable and the wound showed no signs or symptoms of infection. The end result was total healing with minimal scarring.



Photo 4: 04/03/03



# "SHEET" TO HEAL CHRONIC NON-HEALING PARTIAL THICKNESS WOUNDS

## Case Study #2: Stasis Ulcers of the lower leg

Patient is a seventy-five year old with two stasis ulcers of the lower leg with no progression of healing for ten weeks, utilizing compression therapy and topical antibiotic.



### Initial visit to the Wound Care Clinic

#### 05/15/03 ~ Photos #1 and #2:

The proximal wound measured 0.9 cm width x 1.1 cm length. The distal wound measured 0.6 cm width x 0.9 cm length. Wound bed is beefy red with some granulation noted.

**Protocol:** Because the goal was wound closure, it was decided to cover the wound with a new collagen gel sheet to enhance wound closure and compression therapy.



Photo 1: 05/15/03 (proximal)



Photo 2: 05/15/03 (distal)

#### One week later 05/22/03 ~ Photo #3 and #4

The proximal wound measured 0.8 cm width x 1.0 cm length. The distal wound measured 0.6 cm width x 0.6 cm length. Wound bed is beefy red with some granulation noted. No signs or symptoms of infection.

**Protocol:** Same protocol continued.



Photo 3: 05/22/03 (proximal)



Photo 4: 05/22/03 (distal)

#### Second follow-up visit 06/05/03 ~ Photo #5

The proximal wound measured 0.4 cm width x 0.3 cm length. The distal wound measured 0.2 cm width x 0.1 cm length. Wound bed is flattened and beefy red. No signs or symptoms of infection.

**Protocol:** Same protocol continued.



Photo 5: 06/05/03

#### Last follow-up visit 06/12/03 ~ Photo #6

The wound is healed in four weeks.

**Conclusion:** An essentially chronic wound was healed in four weeks.



Photo 6: 06/12/03

product used:  Stimulen collagen glycerine gel sheet

