



Case Study 1

Patient Profile – Lower leg ulceration

60-year-old gentleman with a history of chronic arterial fibrillation and alcohol abuse admitted in a collapsed state. On examination identified as having two ulcerated areas to his right lower leg, one on the tibial shaft the other on the outer aspect of his calf, unknown cause but duration of two months.

Tibial Area



Image 1 – 19.02.03

Wound dimensions – 3cm x 1.8cm

Wound bed – 90% granulation, 10% centrally sloughy



Image 2 – 26.02.03

Wound dimensions – 3cm x 1.8cm

Wound bed – 100% granulation tissue



Image 3 – 5.3.03

Wound dimensions – 3cm x 1.7cm

Wound bed – 100% granulation tissue



Image 4 – 12.03.03

Wound dimensions – 2cm x 1.4cm

Wound bed – 90% granulation tissue, 10% epithelial tissue

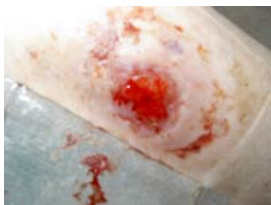


Image 5 – 19.03.03

Wound dimensions – 1cm x 1cm

Wound bed – 90% granulation tissue, 10% epithelial tissue



Image 6 – 26.03.03

Wound dimensions – 0.8cm x 0.8cm

Wound bed – 90% granulation tissue, 10% epithelial tissue

Outcome

The dressing was changed weekly. There was no leakage in-between dressing change. The individual did not experience any pain during or following dressing application. There was no adherence to the wound bed on removal. Over a 6 week period of weekly dressing changes the wound went from 3cm x 1.8cm to 0.8cm x 0.8cm, over 50% reduction in wound size.

Calf Ulceration



Image 1 – 19.02.03

Wound dimensions – 2cm x 2cm

Wound bed – 50% necrotic tissue, 50% sloughy



Image 2 – 26.02.03

Wound dimensions – 2.5cm x 2cm

Wound bed – 50% necrotic tissue, 40% sloughy, 10% granulation



Image 3 – 05.03.03

Wound dimensions – 2.2cm x 2cm

Wound bed – 50% necrotic tissue, 40% sloughy, 10% granulation



Image 4 – 12.03.03

Wound dimensions – 2.cm x 2cm

Wound bed – 100% eschar



Image 5 - 19.03.03

Wound dimensions – 1.4cm x 0.8cm

Wound bed – 90% granulation, 10% slough



Image 6 – 26.03.03

Wound dimensions – 1cm x 1cm

Wound bed – 30% granulation, 70% epithelium.

Over a 6 week period 50% reduction in wound size. As well as rehydration and debridement of necrotic tissue.

Case Study 2

Patient Profile – Pressure ulcer to heel

Eighty-two year old lady who was admitted with a fractured neck of femur to trauma orthopaedics. Developed a pressure ulcer to her left heel and was commenced on ApoCure Hydrogel.



Image 1 – 27.03.03

Wound dimensions – 2cm x 2cm

Wound bed – 70% slough, 30% granulation tissue.



Image 2 – 04.04.03

Wound dimensions – 1.2cm x 1.6cm

Wound bed – 100% granulation tissue.



Image 3 – 14.04.03

Wound dimensions – 0.4cm x 0.4cm

Wound bed – 60% granulation tissue, 40% epithelium



Image 4 – 22.4.03

Wound dimensions – 0.2cm x 0.2cm

Wound bed – 100% epithelium

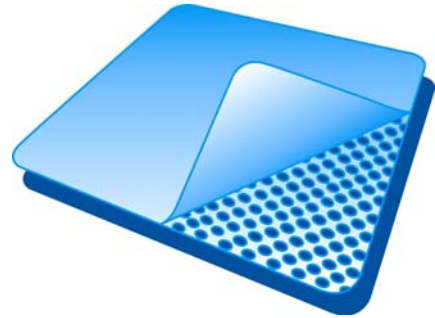
Outcome – 90% healing was achieved. The dressing was only changed weekly, as minimal exudate. Patient up mobilising no adverse effects of rucking.

Overall Findings

Both case studies showed significant reduction in wound size over the duration of their inclusion in the trial. In two examples adherent slough was softened and debrided, in the other a plug of necrotic tissue was rehydrated and debrided. ApoCure Hydrogel appeared to perform well as an autolytic debrider, as well as stimulating angiogenesis and granular activity.

Researchers findings

In both cases there was no problems with adhesion to the wound bed, no pain on application or removal. No trauma to surrounding skin on removal. Appeared to be effective at debriding necrotic tissue as well as stimulating granulation and epithelialisation.



Case Study 1

Patient Profile – Pretibial laceration

Eighty –eight year old lady who has a long standing history of skin trauma due to having very friable skin. She presented with a recently formed pretibial laceration to her right lower leg, cause unknown.

Was commenced on ApoCure Hydrogel Net and film to secure, which was changed weekly.

Outcome – complete healing in 15 days, with 2 dressing changes.



Image 1 – 07.04.03

Wound dimensions – 2.6cm x 2.2 cm

Wound bed –30% granulation, 70% skin flap.



Image 2 – 07.04.03

Skin flap pulled back to remove and rolled edges.



Image 3 – 07.04.03

Skin flap reapplied, rolled edges removed. 90% cover, 10% granulation tissue present.



Image 4 – 07.04.03

ApoCure Hydrogel Net secured with film..



Image 5 – 14.04.03

Wound dimensions – 2.6cm x 2.2 cm

Wound bed –100% epithelium



Image 6 - 22.04.03

Wound dimensions – completely healed

Wound bed –100% epithelium

Case Study 2

Patient Profile – Pretibial laceration lower leg.

Seventy-two year old lady who presented with a pre-tibial laceration. She was commenced on ApoCure Hydrogel Net secured with film, which was changed once – twice weekly according to exudate.



Image 1 – 20.06.03

Wound dimensions – 4.6cm x 0.5cm

Wound bed – 90% subcutaneous tissue, 10% granulation



Image 2 – 23.06.03

Wound dimensions – 4.6cm x 0.5cm

Wound bed – 85% subcutaneous tissue, 10% granulation, 5 % epithelium.



Image 3 – 27.06.03

Wound dimensions – 4.6cm x 0.6cm

Wound bed – 85% subcutaneous tissue, 10% granulation, 5 % epithelium.



Image 4 – 04.07.03

Wound dimensions – 4.5cm x 0.4cm

Wound bed – 90 %granulation, 10% epithelium.



Image 5 – 10.07.03

Wound dimensions – 4.5cm x 0.4cm

Wound bed – 50 %granulation, 50% epithelium.



Image 6 – 18.07.03

Wound dimensions – 4cm x 0.3cm

Wound bed – 50 %granulation, 50% epithelium.

Outcome

Reduction in size of wound. No trauma to surrounding skin.

Overall Findings

In both case studies degrees of healing occurred, case study 1 had 100% healing in case study 2 20% of healing. Both of these individuals have complex medical histories which predispose them to delayed healing. Therefore it was felt that success had been achieved with both individuals.

Researchers Findings

The ApoCure Hydrogel Net was easy to apply. No trauma to the wound bed or the surrounding skin occurred during dressing removal.

Overall Conclusion

The data provided by the case studies represents a small snapshot on the how the dressings performed while treating a very small number of wounds. It would be impossible to attach any significant finding to what is represented above, however it should give the reader an idea of how the products performed as well as examples of wound types they may be used upon.

The ApoCure Hydrogel appeared to work well at debriding both necrotic and sloughy tissue. It also stimulated granulation and epithelial tissue.

The ApoCure Hydrogel Net worked well and effectively managed small problematic wounds. No trauma to either the wound bed or the surrounding skin was experienced.