

Use of ALLEVYN[®] Gentle Border Lite increased dressing wear time in paediatric patients with epidermolysis bullosa (EB) compared with previous dressings

Cost savings were also demonstrated in this UK case series



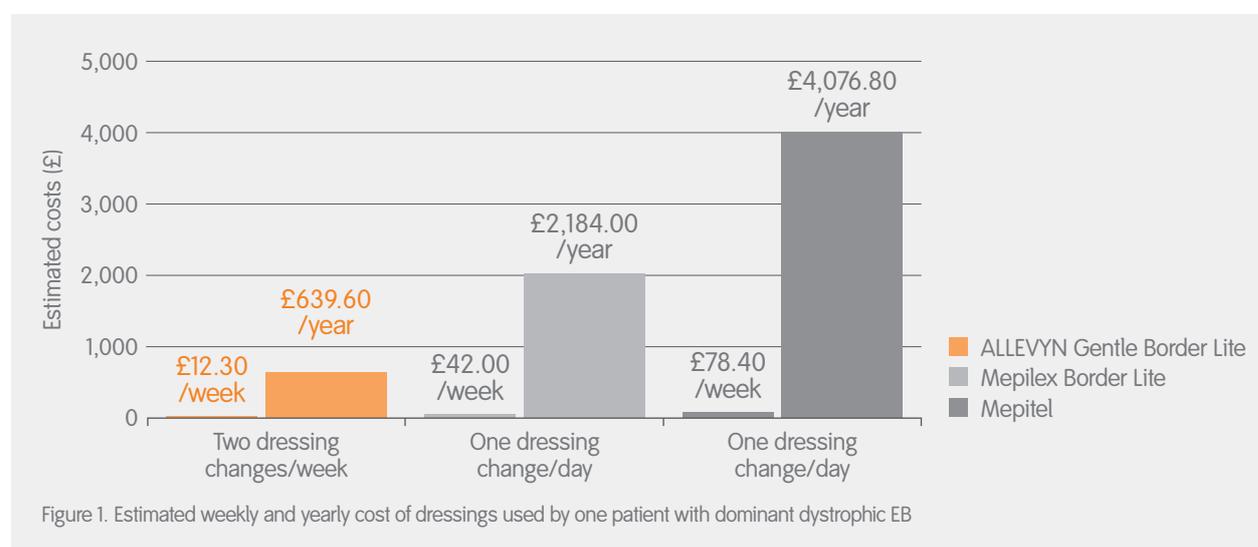
Design

- A case series of four paediatric patients (aged 3–13 years; all females), who were willing to try an alternative wound management dressing, each with a different type of EB – recessive dystrophic (generalised severe), dominant dystrophic, simplex (generalized severe), and junctional (localised)
- ALLEVYN Gentle Border Lite dressings were applied to wounds in challenging anatomical locations and changed as needed (when saturated and/or when they lost adherence to the skin)



Key results

- The patient wound management experience improved with ALLEVYN Gentle Border Lite in all four cases
- In one patient with dominant dystrophic EB:
 - Use of ALLEVYN Gentle Border Lite reduced the dressing change frequency to every 1–3 days from at least every day with Mepilex[™] Border Lite (Mölnlycke, Sweden) and Mepitel[™] (Mölnlycke, Sweden)
 - Use of ALLEVYN Gentle Border Lite also reduced the number of dressings used per week by 78.6%
 - Yearly cost savings of 70.7% and 84.3% were estimated with use of ALLEVYN Gentle Border Lite compared with Mepilex Border Lite and Mepitel, respectively (Figure)
 - ALLEVYN Gentle Border Lite did not cause trauma to the skin when removed and conformed well to the wound area, especially in areas of bony prominence
 - ALLEVYN Gentle Border Lite also stayed in place all day when the patient was at school, even on the knee when under knee-high socks, which had not been achieved with previous dressings



Evidence in focus (continued)



Conclusion

In this case series, use of ALLEVYN® Gentle Border Lite in paediatric patients with EB reduced dressing change frequency and provided cost savings compared with previous dressings.



Considerations

- Nursing resource costs were not included in the economic analysis as dressing applications and changes were conducted by parents and carers after training by the senior EB nurse specialists
- Presented cost savings are based on one patient and may not generalise to the wider EB population



Study citation

*Lynne V, Burns L, Handsaker J, Murdoch JM. Epidermolysis bullosa: management complexities for paediatric patients. *Br J Nurs*. 2018;27:S20-25
Available at: [British Journal of Nursing](#)