✚ Evidence in focus

Publication summary

Smith+Nephew

Effects of using an integrated care bundle (ICB), including ACTICOAT◊ FLEX 7 Antimicrobial Barrier Dressing, on reducing healing time in a retrospective community study of patients with open chronic wounds

Hurd T, Woodmansey EJ, Watkins HMA. A retrospective review of the use of a nanocrystalline silver dressing in the management of open chronic wounds in the community. *Int Wound J*. 2021 Mar 3. [Epub ahead of print].

Available at: International Wound Journal

Key points

Compared with standard dressings, use of an ICB including ACTICOAT FLEX Dressing:

Reduced mean healing time by more than half (10.5 vs 25.5 weeks)

Significantly increased **time between dressing changes** (4.0 vs 1.9 days; p<0.001)

81% relative reduction in mean labour cost per patient (CAN$1,251 vs 6,488; p=0.001)

Overview

- A retrospective review of chronic wound management at two Community Care Access Centres in Canada (March 2016 to March 2018)
- High-risk wounds were treated using an ICB including ACTICOAT FLEX Dressing (n=330) until healing was achieved
- All other wounds received standard dressings (eg, gauze; n=2,242)
- Patients receiving an ICB with ACTICOAT FLEX Dressing were significantly older and had higher comorbidity scores compared with those receiving standard dressings (p<0.001)
- Rate of wound healing and the cost of wound care delivery were compared for the two treatment approaches

Results

- Compared with standard dressings, use of an ICB including ACTICOAT FLEX Dressing resulted in:
  - A reduction of 15 weeks in mean healing time (10.5 vs 25.5 weeks; Figure)
  - A significant increase of 2.1 days between dressing changes (4.0 vs 1.9 days; p<0.001)
  - A significant reduction in mean labour costs per patient (CAN$1,251 vs 6,488; p=0.001)
  - A lower incidence of systemic infections (0.9 vs 3.1%)

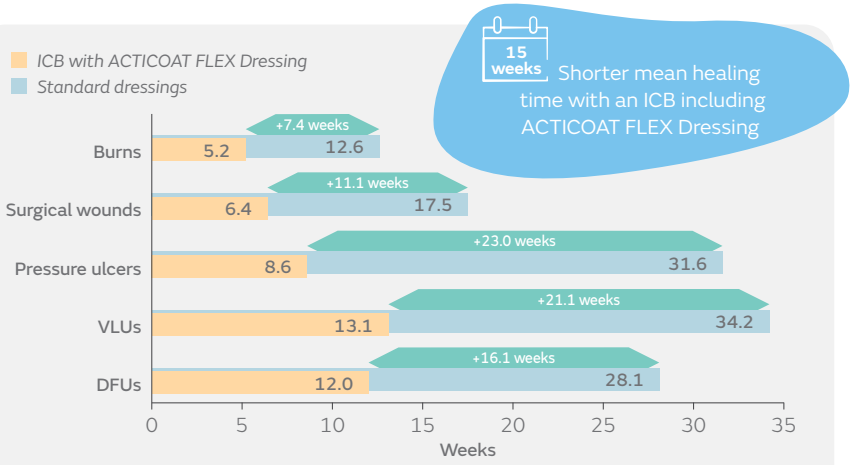

Figure. Mean healing times for each type of wound in patients treated with an ICB including ACTICOAT FLEX Dressing (n=330) and standard care (n=2,242)

DFUs = diabetic foot ulcers; VLUs = venous leg ulcers

Conclusions

Early intervention with ACTICOAT FLEX Dressings as part of an ICB to manage high-risk chronic wounds, helped to reduce mean healing time, as well as increase time between dressing changes, which reduced labour costs. The authors suggest that refinement of the ICB, with appropriate earlier cessation of antimicrobial interventions, may provide further efficiencies and improve antimicrobial stewardship.

For detailed product information, including indications for use, contraindications, precautions and warnings, please consult the product's applicable Instructions for Use (IFU) prior to use.

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