

NO 3 SORBACT[®] CLINICAL CASE

Defective scar on the elbow

WOUND TYPE

Defective scar on the elbow

PRODUCT

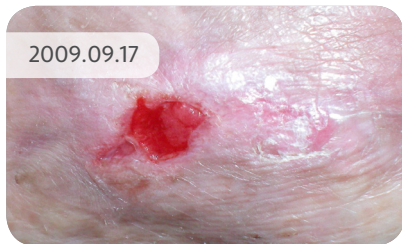
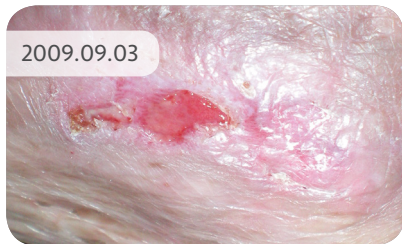
Sorbact[®] Absorption Dressing

CONTRY/LOCATION

DK - Herlev Municipality

TREATMENT PERIOD

20 August - 1 October, 2009



THE PATIENT

The patient sustained a traumatic injury to the elbow following a motor vehicle accident. Surgical repair involving full thickness skin grafting followed. A breakdown at the graft site resulted in difficult scar management for the patient.

THE TREATMENT

The wound, initially healed in September 2007, however by December the same year had broken down again resulting in the formation of new small superficial wounds within the scarred tissue.

January 2009 The patient was advised the problem may be chronic and from time to time may re-occur given the scar location over an extensor surface.

13 August, 2009 Clean wound with exudate noted on the dressing. The dressing is changed 2 to 3 times per week. The size of the wound is 3 x 0.5 cm in area.

During some time a foam dressing is used and tentatively a hydrocolloid dressing. When the clinical situation allows the management reverts back to dry dressings.

THE PLAN

To minimize the wound secretion.

20 August, 2009 Wound secretion + +, when started treatment with Sorbact[®] Absorption Dressing 7 x 9 cm. It is fixed with a ribbon gauze, since nothing should stick to the skin. Changed twice a week. (Photo 1).

3 September, 2009 Wound secretion is less +, and treatment with Sorbact[®] Absorption Dressing is continued. (Photo 2).

17 September, 2009 Wound secretion unchanged from the 3rd of September, 2009 - treatment continues. (Photo 3)

1 October, 2009 The wound is clean and red from granulation tissue. (Photo 4).