NO 2 SORBACT® CLINICAL CASE
Heel Pressure ulcer

THE PATIENT
An 80 year female with dementia developed bilateral heel pressure ulcers following a prolonged hospital admission. The pictures demonstrate the wound on the left heel.

THE TREATMENT
It was decided to photograph the pressure ulcers over a 5 week period while managing the wounds using the Sorbact® Gel dressing as a primary contact layer supported by a foam dressing.

The Sorbact® Gel dressing was chosen given its ability to debride necrotic tissue and bind to wound pathogens.

The Sorbact® Gel Dressing is placed on the entire pressure ulcer within the wound boundaries.

A foam dressing is used in support to both absorb secretions and provide additional pressure offloading.

Wound care is carried out twice weekly by the home health care nurse. The treatment is monitored throughout the entire period, and after the recordings are concluded the treatment has minimal exudation and is odourless.

4 September, 2009 On the left heel there is a pressure ulcer the size of 3 x 3 cm wide and about 1 cm deep. Necrotic tissue can be observed in half of the wound. The wound is slightly exuding but odorless.

18 September, 2009 The wound is dry, necrotic tissue greatly reduced and described as a clinically clean and healing wound.

9 October, 2009 The wound continues to heal, albeit slowly. Areas of necrosis continue to decrease.

26 October, 2009 Wound size is reducing, now measuring 1.5 x 1.5 cm. The wound is healing from the base up. The necrotic tissue is almost completely removed with an overall clean and well granulating wound remaining. The wound continues to be free of exudate and odour.