

# NO 37 SORBACT<sup>®</sup> CLINICAL CASE

Rectum amputation

## WOUND TYPE

Rectum amputation

## PRODUCT

Sorbact<sup>®</sup> Gel, Sorbact<sup>®</sup>  
Ribbon Gauze 10x200cm

## CONTRY/LOCATION

Sweden, Stockholm

## TREATMENT PERIOD

2 ½ month

## THE PATIENT

The patient is a 44-year old man with ulcerative colitis. He is otherwise healthy and working as a teacher. He had surgery two years ago and had an ileostomy, which worked well. Decisions on rectum amputation was taken in consultation with the patient and he was operated in the end of January 2015.

## THE TREATMENT

Patient was seeking emergency ten days after surgery as the majority of sutures rupture, and a 9.5 cm long rupture with undermined edges arise in the perineum. Wound cavity then measures 13 cm deep and 12 cm at its widest point. The patient is prescribed a daily shower and only one sanitary napkin are fixated with special underpants and changed when needed.

Three days later, the wound is messy with increased exudate, treatment with Sorbact<sup>®</sup> Gel begins. The patient changes the dressing himself at home after a daily shower and Sorbact<sup>®</sup> Gel are used in the wound cavity. He was bothered by the sanitary napkin giving him a painful pressure against the wound and a variety of cover dressings was tested. It was proved to be difficult to find something to fixate with and it was hurting when removing as the patient has excessive hair growth. Tested was to put Sorbact<sup>®</sup> Ribbon Gauze 10 x 200 cm, cut in layers and there after attached by itself between the buttocks. The patient was comfortable with this solution.

The wound healed rapidly. The size of the wound was 10/4 (after about 2 ½ months) 1.5 cm deep and 2.5 cm wide. Clean with fine granulation tissue.

