Donor site wounds

Compared to paraffin gauze

- Patients managed with AQUACEL® dressing experienced significantly less pain (P=0.0001) and scarring (P=0.003)
- Patients managed with AQUACEL® dressing experienced significantly faster complete re-epithelialization (P=0.0156)
- Nurses found AQUACEL® dressing significantly easier to use

Study details

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Number of patients</td>
<td>23</td>
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<tr>
<td>Inclusion criteria</td>
<td>Compliant adult patients requiring split-thickness skin grafting. Patients excluded if the donor site was located outside the thigh area, if the total area was less than 20x8cm, or if they did not comply with the study protocol or if a skin graft had previously been harvested from the same donor area</td>
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<td>Wound type</td>
<td>Split-skin donor site wounds</td>
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Design

Prospective comparative trial of patients with donor site wounds comparing AQUACEL® dressing with standard mesh paraffin gauze dressing over a one year period

Results

- Patients managed with a protocol of care incorporating AQUACEL® dressing experienced significantly less pain than patients managed with paraffin gauze (P = 0.0001)
- Scarring of the donor site area was significantly better with AQUACEL® dressing compared with paraffin gauze (P = 0.003)
- Patients managed with a protocol of care incorporating AQUACEL® dressing experienced complete re-epithelialization within a mean time of 7 to 10 days, compared with 10 to 14 days for patients treated with paraffin gauze (P = 0.0156)
- AQUACEL® dressing was considered to be significantly more convenient and easy to use by the nursing staff than paraffin gauze (P = 0.0027)

Conclusion

“Dressing sites with AQUACEL® dressing were less painful than paraffin gauze, especially during the first postoperative week. As mentioned earlier, AQUACEL® forms a highly absorbent gel which facilitates dressing removal, reducing trauma during dressing changes.”