

P 179

USE OF A SILVER NANOCRYSTAL WOUND DRESSING* IN THE TREATMENT OF A SERIES OF 17 SURGICAL WOUNDS INFECTED OR COLONISED BY MULTIRESISTANT GERMS

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Aim: Multiresistant germs today constitute a significant threat to institutionalised patients and for carrier patients of any type. Silver wound dressings today constitute an excellent option for the treatment of wounds with clinical signs of critical colonisation or infection. A silver nanocrystal wound dressing*, is a dressing that releases silver nanocrystal which, given its structure and peculiar manufacture, enables releasing the amount of silver necessary for it to be effective in the event of a large amount of germs including multiresistant germs. There is both "in vitro" and "in vivo" evidence for this.

Method: We present a series of 17 surgical wounds of different aetiology colonised or infected by multiresistant germs and treated in hospitals and in which a silver nanocrystal was used as a local treatment strategy for control and elimination of this type of germ. Our series includes 8 surgical wounds, 4 insertion points of external fixators, 2 traumatic wounds, 2 prosthesis or nail infections and 1 case of a suture coming apart

Results: Before being treated with the silver nanocrystal, lesions presented an evolution (median value) of 18.5 days and an area (median value) of 18 cm². MRSA was isolated in 11 lesions, *Acinetobacter baumannii* in 5, *Pseudomonas aeruginosa* was isolated in 3 and 1 case of broad spectrum beta lactamases. More than one multiresistant germ was isolated in 2 lesions.

The time necessary for a negative effect on cultures was 16 days (median value). For this a median of 5 wound dressings was required.

Discussion-conclusions: Due to results in real conditions "in vivo" of our series of cases we can highlight that a silver nanocrystal wound dressing* is a dressing with major clinical efficacy for the control and eradication of situations of critical colonisation or local infection due to multiresistant germs in surgical wounds and is easily applicable to this type of lesion, which usually presents difficult topography.

*Acticoat® (Smith&Nephew S.A.)

P 180

APPLICATION OF ROY'S ADAPTATION MODEL WHEN CARING FOR PATIENT WITH PRESSURE ULCER

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This article describes the application of Roy's adaptation model when caring for a patient experiencing physical and psychological changes associated with pressure ulcer. The nursing goal is to make patients comfortable, maintain their physiological function reduce wound pain and prevent them from, other complications. The Roy's model guided the assessment of the patient's levels of adaptation and facilitated the management of stimuli to promote their adaptation. The nurse helped the patient make adaptive responses to these stimuli through nursing interventions. This caring experience may help nurses provide comprehensive nursing care when caring for patients with similar disease or problems.

