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### A NEW VERSION OF HYDROCELLULAR FOAM DRESSING USED UNDER COMPRESSION BANDAGES IN THE TREATMENT OF VENOUS LEG ULCER

Francesco Petrella, Vincenzo Mattalino, Giovanni Mosti, Giuseppe Nebbioso

<sup>1</sup>ASL Napoli 5, *Napoli, Campania, Italy*, <sup>2</sup>Clinica Barbantini, *Lucca, Toscana, Italy*,

<sup>3</sup>Clinica Barbantini, *Lucca, Toscana, Italy*, <sup>4</sup>ASL Napoli 1, *Napoli, Campania, Italy*

**Aim:** Compression bandaging (CB) is the Gold Standard in Venous Leg Ulcers (VLU) treatment, having shown to improve ulcer healing rate and reduce recurrences. In VLU treatment the exudate management represents one of the most important issues, increasing infection rate and consequently exudate production. These events determine the needs for more frequent dressing changes, therefore worsening the patient's quality of life.

The polyurethane foam dressings (PFD), due to their optimal exudate management ability, have been widely investigated also in combination with CB.

The PFD have shown to shorten wound healing time, but under CB they frequently cause perilesional skin damage and the so-called *stamp effect*, often evolving in skin cutting due the right angled dressing edges.

The present study evaluated a new version of a Hydrocellular PFD\* under CB.

**Methods:** 60 VLU (< 150 cm<sup>2</sup>) were evaluated for a 4 weeks period. All the VLU were treated with the new PFD - adhesive and non adhesive version - under different types of CB. The new PFD has innovative sealed and rounded edges and improved fluid management. At dressing changes the effects of PFD on the lesion and perilesional skin, as well as on CB performance were registered.

**Results:** The new PFD confirmed the very good exudate management under CB and greatly reduced the expected *stamp effect*, without causing any perilesional skin damage or cutting. It further protected the wound from iatrogenic damages thanks to its ability to *offload* in its own structure the pressure applied by the CB without transferring it on the wound bed.

**Conclusion:** The new dressing performance was satisfactory under all types of CB used. To be highlighted its significant contribution to the dressing changes intervals extension.

\*New Allewyn (Smith & Nephew)

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### THE USE OF AMELOGENIN IN PYODERMA GANGRENOSUM

Valentina Dini, MariaStefania Bertone, Sabrina Barbanera, Cinzia Brilli, Marco Romanelli

*University of Pisa, Pisa, Italy*

**Aims:** The concept of using extra cellular matrix (ECM) analogues as potential healing enhancers and carriers for growth factors has been described previously in several papers. Amelogenins are one of such ECM substitutes that have the advantage of an extensive existing clinical effectiveness and safety profile data base when used in periodontal wound healing.

**Methods:** We present the use of amelogenin in two female patients (age 45 and 63 yrs) with a recalcitrant pyoderma gangrenosum of the lower leg lasting an average of 11 months. The treatment was applied weekly under occlusion for a maximum of 4 weeks. The patients received a systemic treatment with immunosuppressors before and during topical treatment.

**Results:** The topical application of amelogenin was able to improve the lesions in terms of pain control, wound bed granulation and wound size reduction after a short term pulsed therapy.

**Discussion:** Amelogenin showed, in selected patients, to be a valid concomitant treatment in the management of pyoderma gangrenosum. The therapy was well-tolerated and had no adverse effects. However, controlled studies are necessary, in order to determine whether amelogenin is safe and effective in the treatment of this type of inflammatory chronic wounds.

