

MANAGEMENT OF A LARGE HAEMATOMA WITH A NEW SILVER IMPREGNATED FOAM DRESSING.

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Aim: To reduce bleeding, exudate levels and pain from a large medicine induced haematoma.

Method: A 20cm by 15cm haematoma on a lady's calf was caused by enoxaparin, a drug used to treat Deep venous thrombosis. Haematoma was initially evacuated using topical negative pressure. A clean wound bed was evident after 3 days of this treatment. The wound had large amounts of exudates, which was thick and purulent. Wound swabs confirmed pseudomonas and MRSA. A primary dressing of a silver impregnated alginate was applied to reduce the bacteria levels with secondary foam. Due to excess exudates the dressing was requiring changed twice a day. When the dressing was being removed there was a lot of bleeding and pain, the primary dressing was not adhering but the skin was very friable. Dressing regime changed to a new foam impregnated with silver and a "safetac" technology.

Result: Within twenty-four hours the bleeding had stopped and the exudates levels had decreased greatly. The dressing now only required renewal every third day.

Conclusion: The wound may have had very friable tissue due to infection and oedema. The initial silver dressing had no effect on exudates levels or excessive bleeding. The silver foam dressing had relieved the problems within twenty- four hours. The foam dressing was very cost effective as no secondary dressing was required and less nursing time was required as it was now only being dressed every third day

Discussion: There are a large variety of silver dressings available for clinicians and choosing one can be difficult. It is important to choose one that meets the patient's needs. The foam dressing met the problems, it caused no pain on removal, and it reduced exudates, and reduced bleeding. Cannot say why the initial silver dressing did not work but the foam dressing did work, both dressings make silver available to the tissues.