CASE STUDY

Pain Relief and Healing Using PolyMem and PolyMem Silver® Dressings Under Compression for Venous Hypertension Ulcers

TREATMENT INITIATION
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TREATMENT INITIATION
CLOSED IN 6 1/2 WEEKS
CLOSED IN 6 WEEKS
PAIN FREE IN 9 DAYS

CONSTANT PAIN

PAIN FREE IN 9 DAYS
**Pain Relief and Healing Using PolyMem and PolyMem Silver Under Compression for Venous Hypertension Ulcers**

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**PROBLEM**
Venous hypertension ulcers greatly decrease the productivity of those who suffer from them. They are often painful, especially during dressing changes, which may be as often as two-to-three times per day. Treatments that decrease overall pain as well as pain during dressing changes can greatly enhance the quality of life for the sufferers of these ulcers. Less frequent dressing changes and, ultimately, wound closure, can result in significant savings of both financial and emotional resources. This study explores the progression of three patients with painful chronic venous ulcers whose treatment was changed to include PolyMem dressings. When the study began, two of the patients had a single painful ulcer and the third patient had three ulcers.

**RATIONALE**
PolyMem dressings have a demonstrated ability to reduce wound pain while donating or absorbing moisture as needed. PolyMem dressings also contain ingredients which draw and concentrate the body’s natural healing substances into the wound bed, promoting rapid healing. The dressings’ built-in gentle cleanser facilitates autolytic debridement directly by loosening the bonds between the slough and the wound bed. The liquefied slough is absorbed by the dressing, so usually no manual wound cleansing is needed, allowing for less disruption of the new growth at the wound bed and very quick and easy dressing changes. In fact, often patients are able to do some of their dressing changes themselves. Therefore, PolyMem dressings were initiated.

PolyMem dressings help inhibit infection. PolyMem Silver dressings have additional anti-infective properties. Therefore, either PolyMem or PolyMem Silver dressings were initiated.

**METHODOLOGY**
The wound beds were thoroughly cleansed with normal saline and a PolyMem or PolyMem Silver dressing was applied. The dressing was covered with a compression stocking or an Unna’s Boot. Per product instructions, no routine wound cleansing was done on any of the patients during dressing changes, which took place two to four times per week. On some patients, crusts or exudate around the wound area were removed regularly with normal saline. Since manual wound cleansing was not usually indicated, the complex decisions about disturbing new growth versus removing dead tissue were eliminated and two of the patients were routinely able to perform some of their own dressing changes.

**RESULTS**
All three patients quickly became pain-free, even during dressing changes. One wound completely closed at 5 weeks, two others closed at 6½ weeks, and the final two were small and superficial at that point but suffered setbacks from lack of adequate compression. Despite this and the patients’ serious comorbidities, all of the ulcers were closed by 5 months.

**CONCLUSION**
After only one week of PolyMem dressing use, new granulation tissue was forming in all five of the previously stalled venous hypertension wounds. All three patients quickly became pain-free, even during dressing changes. Three wounds closed by 6½ weeks, and the others closed by 5 months, despite setbacks from failure to wear compression and all of the patients’ serious comorbidities. The dressing changes were gentle and very time efficient — just remove the old non-adherent PolyMem dressing and apply a new one.
**OBJECTIVES**

1. Identify PolyMem as a unique dressing type that promotes appropriate wound moisture conditions and cell proliferation while inhibiting infection.

2. Consider the advantages of using PolyMem dressings in terms of passive continuous cleansing of the wound bed (which usually eliminates painful and time-consuming wound cleansing during dressing changes).


4. Consider the advantages of using PolyMem dressings in terms of pain reduction.

**PATIENT 1:** An 80-yr-old diabetic woman with a 2.5 cm x 1.6 cm x 0.1 cm deep ulcer for one month. Pain 5 (on 0 –10 scale) during 3x/day treatment with moist saline dressings and long-stretch bandages. No improvement.

**SEPTEMBER 11**
2.5 cm x 1.6 cm x 0.1 cm
70% granulation, 30% fibrin/slough. Pain 5 during dressing changes. Initiated use of PolyMem dressings.

**SEPTEMBER 27**
1.8 cm x 1.0 cm x 0.1 cm
100% granulation tissue. No pain during dressing changes! Wound size decreasing rapidly.

**OCTOBER 25**
Dismissed. Completely closed in only 6½ weeks, despite the patients’ advanced age, diabetes and habitual use of caffeine and nicotine.

**PATIENT 2:** A 58-yr-old male bariatric (BMI 55) department store worker frequently missed work due to three large venous ulcers. Pain was a constant 3 and rose to 5 during 7 months of unsuccessful twice-daily treatment prior to use of PolyMem.

**SEPTEMBER 13**
2.5 cm x 2.5 cm x 0.1 cm
Lateral wound: 3 cm x 2.5 cm x 0.1 cm
Posterior wound: 4 cm x 3 cm x 0.5 cm Initiated use of PolyMem dressings.

**OCTOBER 11**
1.5 cm x 1.3 cm x 0.1 cm
Lateral wound: 3 cm x 2.5 cm
Posterior wound: 3 cm x 3 cm x 0.2 cm
Cleansed the periwound area only.

**OCTOBER 25**
Fully closed at 6 weeks.
Lateral wound closed October 18.
Posterior wound: 2 cm x 1.5 cm x 0.1 cm
Refused compression but still closed November 29.

**PATIENT 3:** An 87-yr-old female with hypertension, hyponatremia, hypothyroidism, osteoporosis, SIADH, GERD and seizures had a painful venous ulcer treated unsuccessfully with wet-to-dry dressings for 2 months.

**SEPTEMBER 6**
3.5 cm x 5.5 cm x 0.3 cm

**SEPTEMBER 15**
3 cm x 4 cm x 0.1 cm
Less edema, 20% fibrin, 80% granulation. No pain, even at dressing changes! Dressing changes only, no wound cleansing.

**NOVEMBER 1**
1.5 cm x 0.8 cm x 0.1 cm
100% granulation. No pain, but refused Boot. Switched to only compression stockings. Even so, fully closed by February 9 (5 months).

This case study was unsponsored. Ferris Mfg. Corp. contributed to the poster presentation.
BIBLIOGRAPHY:


ORIGINAL POSTER PRESENTED AT:


* This version has been modified from the original; it reflects PolyMem branding.

PolyMem, PolyMem Silver, PolyMem Wiz, Wiz, PolyMem Wiz Silver, PolyMem Wiz Silver Rope, PolyMem Max, Max, PolyMem Max Silver, Shapes, Shapes by PolyMem, The Shape of Healing, The Pink Dressing, SportsWrap, SportsWrap TÉ More Healing – Less Pain, Interlocking circles design, PolyMem For Sports, Not too Loose... Not too Tight... Just Right!, Ferris and FMCFerris and design are marks owned by or licensed to Ferris. The marks may be registered or pending in the US Patent and Trademark Office and in other countries. Other marks are the property of their respective owners.

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