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The use of **Actilite** dressing and four layer bandages in the management of venous leg ulceration.

Mrs.T is a 41 year old lady who was referred to the vascular clinic by her district nurse services due to non healing ulceration. She presented with a ulcer to her right medial which had been present for 10 weeks.



In community she was being dressed with non adherent dressing and four layer bandage, with little signs of improvement. Mrs.T gave a history of previous ulceration over the same area 2 years ago, which successfully healed within 12 weeks with four layer compression bandaging. Other past medical history to note included DVT for which she continued to take Warfarin. She complained of constant moderate pain from the peri-ulcer area. On examination all peripheral pulses were palpable and her ABPI = 1.1 with triphasic tones. The ulcer bed measured 5cm x 6 cm with

superficial slough at the base; there was also evidence of maceration. Her limb was slightly oedematous with no evidence of cellulitis. The aetiology of

the ulcer was confirmed as venous. Actilite (Advancis Medical) was applied to the ulcer bed to provide a moist environment with the added benefit of providing antimicrobial protection, four layer compression was continued. Mrs.T was given lifestyle advice, she was also commenced on regular paracetamol with codeine phosphate for breakthrough and a venous duplex scan was requested.



Six Weeks

Six weeks later Mrs T returned to clinic the ulcer bed had substantially reduced in size to 2cm x 1.5 cm with a healthy granulating wound bed, the maceration had reduced and also had her pain, now only needed the paracetamol occasionally. Her venous duplex showed deep venous insufficiency but no superficial insufficiency.

Actilite dressing in combination with four layer bandage promotes healing and provides significant improvement in patients live with venous ulceration.



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