Advanced Wound Care - DRESSING CLASSIFICATIONS

Cleansing

Solutions, gels and dressings to promote irrigation of wounds

- Consist predominantly of a polymer or copolymer and up to 95% water
- Provide a moist environment for wound healing, are non-particulate, non-toxic and non-adherent
 Particularly useful for rehydrating sloughy or necrotic tissue and enhancing autolytic debridement and due to limited absorbency they are recommended for low exudative or dehydrated wounds Preservatives are sometimes used to allow multiple usages, but may produce an allergic reaction

Foam

- Typically made from polyurethane, it may be heat treated on one side to create a semi permeable membrane
- rimary benefit is absorbency, but they also reduce dead space and conform to the wound
- By absorbing excess exudate these dressings reduce the risk of maceration of surrounding skin
 Some cushioning, insulating and protective benefits are also provided
- Can be combined with silver for malodourous wounds
- In some cases an additional adhesive layer is included or alternatively a secondary dressing applied

Silicone

Silicone dressings adhere to dry surfaces gently and minimise wound and surrounding skin trauma during dressing change

Hydroactive

- Highly absorbent polymer dressings similar to hydrocolloids
- Rather than forming a gel when combined with wound exudate, they trap the fluid within the structure of the matrix and swell
- The adhesive matrix is secured by a film dressing which controls the evaporation of fluid from the dressing
- Recommended for wounds with a moderate to high level of exudate and not indicated for wounds with low-level exudate or clinical infectior
 Care is needed when removing from very fragile skin

Antimicrobial

- Silver is a broad spectrum antimicrobial ideal for slow healing wounds
- Applied to various dressings such as foams to benefit malodourous wounds
- Antimicrobial
- Harmful bacteria can delay wound healing and antimicrobials assist in decreasing the umber of bacteria, which consequently reduces the risk of infection and inflammation thus accelerating

Alginate

- Alginates are fibre products consisting of calcium and sodium salts derived from seaweed
- Offer high absorption
- They form a soluble sodium alginate gel when exposed to a moist wound environment
- Provide a haemostatic benefit for bleeding wounds due to the release of calcium ions that assist clotting
 They should not be applied to a dry wound as they can form a plug and in pressure areas cause additional trauma
- They are available as non-woven sheets, ropes or ribbons, and gets, for packing cavities and are also produced in combination with hydrocolloids
- Recommended for moderate to highly exudating wounds
- A secondary dressing is required The dressing should be soaked with sterile saline before removal to prevent adherence and minimise skin trauma

Hydrocolloid

- Hydrocolloids are moisture retentive and contain gel forming agents
- Can be combined with elastomers and adhesives which are applied to a film or foam to create an absorbent, self adhesive, waterproof wafer When applied to exudative wounds, the hydrocolloids absorb liquid and form a gel and have an autolytic debriding effect
- In paste or powder forms, they can also reduce the amount of dead space
- Typically the hydrocolloids are not recommended for clinically infected wounds due to their semi occlusive nature

Semi Permeable Film

- Film dressings are made up of a thin (usually polyurethane) membrane coated on one side with a layer of adhesive They are permeable to atmospheric gases and moisture vapour and are waterproof and bacteria proof
- Allows easy inspection of a wound
- Often used as a secondary dressing
- Can be combined with an absorbent pad
- Care must be taken upon removal to ensure skin trauma does not occur Can assist in documentation, allowing the tracing of the wound for medical records

- Honey dressings registered with the Therapeutic Goods Administration can promote moist wound healing, autolytic and osmotic debridement
- Antimicrobia
- Care should be taken to monitor maceration of surrounding skin

Cellulose Gelling Fibres

- They are much less likely to dry out and will not leave fibres in the wound
- Not haemostatic
- Recommended for highly exudative wounds

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Duncan, G; Andrews S and McCulloch, W. Issues in clinical practice: Dressings 2. Primary Intention: The Australian Journal of Wound Management, Vol. 10 No.1 February 2002: 29-35 Duncan, G; Andrews S and McCulloch, W. Issues in clinical practice: Dressings 2. Primary Intention: The Australian Journal of Wound Management, Vol. 10 No.2 May 2002: 83-86