

TREATING RADIOTHERAPY SKIN REACTIONS WITH POLYMERIC MEMBRANE DRESSINGS

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INTRODUCTION

TREATING FUNDAMENTALS

- Holistic approach to the patient is needed
- Infection control
- Good nutrition management
- Dressings for optimal local environment

We respect all the fundamentals and want to share our experience with treating radiodermatitis and infected wound.

METHODS

We used polymeric membrane in two severe cases of radiodermatitis and one case of prolonged healing because wound infection.

First case was 40 years old female with tumor on the pollex of her left foot. After one week of radiotherapy we saw bad reaction on skin with blisters. Radiotherapy was stopped. Surgeon has opened blisters up and we have used wet compresses for a day and then continue treatment with polymeric membrane dressing. We changed it daily at first and after second change patient reported of total pain relieve. All slough was removed only in a week time and inflammation had reduced. They continue with radiotherapy for another week and we make changes of polymeric membrane daily.

After that we scheduled dressing changes every three days in second week and sent her home after that. Result after a month time is completely cured skin.

First case



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Second case

62 years old male with tumor on left femur behind and he recieved agressive radiotherapy treatment. He suffered severe radiodermatitis on big ingvinal and femur region. Radiotherapy was concluded. We started with polymeric membrane dressing immediately. After second change of dressing in two days, patient reported pain relieve. Tissue wasnt swollen anymore and amount of exudate reduced, dressing didnt stick to the wound. After one week of treatment he went home and returns every three days on dressing change for 9 days. Than we gave him a moist cream and conclude treatment.



We strictly respect our radiodermatitis protocol and patients were under control of our nutritional team.

Third case

73 years old male firstly treated with radiotherapy than operated because of sarcoma on left thigh and had prolonged healing because of wound infection. We used polymeric membrane with silver and emplace negative pressure therapy, we changed system every three days. We sanitized infection, reduce odour, swelling, exudate and pain. After 2 weeks we changed strategy and place only polymeric membrane without silver. After one week we saw reduction in wound size, granulation and epitelisation. We continued dressing changes every three days.



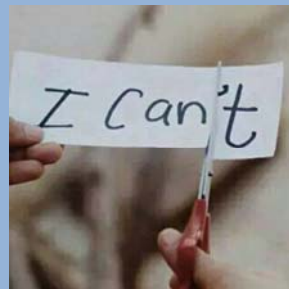
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RESULTS

We recognize:

- » polymeric membrane dressing is pain relieving
- » it cleanses wound, there was no secondary infections
- » it doesnt stick to the wound bed
- » wounds heals in shorter time, we introduce cost effective policy



CLINICAL RELEVANCE

- » Enterostomal therapist is consulted in such severe cases of radiodermatitis
- » multidisciplinary approach is necessary and cooperation of each stuff member on the ward is needed



Patients gave permission for getting pictures. ∞



REFERENCES

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[www. polymem.com](http://www.polymem.com)

