

New Silver Barrier Dressing Proves Effective

BY DOUG BRUNK
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SAN DIEGO — A new absorbent silver barrier dressing may help prevent and manage complications of percutaneous endoscopic gastrostomy sites, according to the results of a small study.

In a poster presented at the annual meeting of the Wound Healing Society, researchers led by Kathy Leak, R.N., described use of Allevyn Ag dressing (Smith & Nephew) on percutaneous endoscopic gastrostomy (PEG) sites in five patients.

Before May 2008, the protocol for patients who required PEG sites was to ap-

plied a silver binding dressing to help reduce the risks and complications associated with PEG site management. That product, however, "has limitations with regard to its absorption capability, cannot be cut to shape, and does not have the capability of foam dressings in helping to reduce overgranulation," wrote Ms. Leak and her associates at Doncaster and Bassetlaw Hospitals NHS Foundation Trust, Doncaster, England.



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MS. LEAK

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"Also, it requires daily dressing changes and a secondary foam dressing to absorb exudate, both of which are cost prohibitive," they noted.

The silver from the Allevyn Ag dressing is activated by fluid from the wound and then kills the bacteria. At the same time, excess fluid is managed by the dressing.

For the trial, Ms. Leak and her associates monitored five patients with PEG sites

treated with Allevyn Ag for complications including erythema, overgranulation, high levels of exudate, soreness, and odor from the insertion site.

In all five cases, the product effectively managed exudate and odor, prevented excoriation to the surrounding skin, and provided enhanced comfort, compared with the previous treatment protocol, she said at the meeting, held in conjunction with a symposium on advanced wound care.

One study participant had been treated

for cancer of the esophagus and presented with high levels of exudate that were starting to cause soreness and maceration of the peristomal area. He required a single application of Allevyn Ag, which he left in place for 4 days without incident.

Another study participant had a longstanding malabsorption problem and often developed abscesses around the stoma. After treatment with Allevyn Ag for 2 weeks with twice-daily dressing changes, the abscesses completely resolved.

"The dressing exceeded all our expectations on its speed of action to lower bacterial colonization and improve periskin conditions," Ms. Leak said in an interview, noting that, as of May 2008, patients at Doncaster and Bassetlaw Hospitals who have problematic PEG sites receive Allevyn Ag instead of the silver binding dressing.

Smith & Nephew supplied the Allevyn Ag used for the study. Ms. Leak has no financial interest in the company and reported no other relevant conflicts. ■



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The site is shown after a single 4-day application of the silver barrier dressing.

PHOTOS COURTESY KATHY LEAK, R.N.

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