

The use of Actilite® and Algivon® in the treatment of dorsal and plantar superficial ulcers

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Introduction

The patient is an 85 year old gentleman with type 2 diabetes and a history of myocardial infarction and stroke. Pulses not palpable and neuropathy present. History of ulceration over right 5th metatarsal phalangeal joint which healed without complications.

The gentleman lives alone and is very independent and loves to work outdoors restoring tractors. Following a particularly cold spell, he felt his fingers get cold so applied an extra layer of gloves for warmth. Due to neuropathy he did not feel the cold in his feet. He presented at the clinic with blisters on the dorsal and planter aspect and apexes of several toes.



7.12.2010

Methods

Gauze was applied to simply soak up the fluid draining from the blisters. The following week he was seen in the ulcer clinic where dry necrotic lesions had formed on the apexes of his toes. The ulcerated areas on the planter aspect remained healthy with no sign or symptom of infection. The patient complained about the smell from the ulcer due to the heavy exudate.

The necrotic tissue was debrided; the right distal phalanx of his 4th toe was visible. Dressing regime was switched to Algivon® to help with the heavy exudate and also the smell

which concerned the patient. Actilite® was applied to the dorsal and plantar superficial ulcers.

Results

Over the next few weeks the ulcers healed well and the superficial dressing regime was switched to Actilite®. Over the weeks despite the heavy exudate there was no maceration of the tissue and the wound base remained healthy.



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