

A CLINICAL EVALUATION OF KERRALITE COOL IN MIXED AETIOLOGY WOUNDS

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Introduction

This clinical evaluation assessed the safety and effectiveness of soothing, debriding and moisturising hydrogel dressings, KerraLite Cool or KerraLite Cool Border (Crawford Healthcare). KerraLite Cool contains a strong, transparent hydrogel that is impermeable to bacteria but permeable to moisture, enabling it to absorb or donate water according to the needs of the wound, resulting in longer wear-times and reducing the risk of maceration.

Method

Clinical evaluation was reported through the completion of an evaluation form consisting of 19 questions (n=34). Clinicians recorded the type of wounds being treated, the duration, origin, and size of the wounds, and products and regimens used to treat the wounds prior to using KerraLite Cool.

Clinicians were asked about their dressing experience after 7 days and 14 days. They were asked if they had noted any changes in the patient and wound size or condition, how often the dressing was changed, the condition of the dressing when changed, and whether any secondary dressings were used. The ease of dressing application was assessed (scale of 1 [very difficult] to 10 [very easy]), as well as the level of pain at dressing change (scale of 1 [low] to 10 [high]), and whether this had any impact on the levels of analgesia used. The clinicians were then asked for their overall experience of using the dressing, whether they would continue to use the dressing, what they liked about the dressing, and any additional comments they had.

Results

Two thirds of patients were female (66%) and most patients were aged 60 years of age or above (81%), almost half of whom were aged between 80 to 89 years of age (39%) with a variety of different medical histories. Wounds treated included leg ulcers (n=8), burns or scalds (n=8), chronic wounds (n=5), pressure ulcers (n=3), diabetic ulcers (n=3), trauma (n=3), radiation therapy (n=2), surgical (n=1), and moisture lesions (n=1). A number of different dressings and regimens had been used on the wounds, which ranged in duration from a few days up to 2½ years. The most common types of wounds treated were sloughy (n=19), inflamed (n=10), necrotic (n=4), and painful (n=17), with wound sizes ranging from 0.4 cm² to 304.5 cm².

Wound Aetiology	Response Count
Leg ulcer	8
Pressure Ulcer	3
Radiation Therapy	2
Chronic wound	5
Burns & Scalds	8
Trauma Wounds	3
Diabetic Foot Ulcer	3
Surgical	1
Moisture Lesion	1

Table 1: Wounds treated with KerraLite Cool during the evaluation (n=34)

KerraLite Cool (non-adhesive) was used on 53% of the patients whilst KerraLite Cool Border (adhesive) was used on 47%.

Results at day 7: dressings were being changed daily (11%), twice weekly (60%), every 2 days (18%), once a week (11%).

Results at day 14 showed a trend in dressings being changed weekly (17%) and a reduction in dressings changed daily (6%) from the results recorded at day 7.

At dressing change, 54% of the clinicians commented that the dressing had remained intact/in place at day 7, whilst 60% stated the dressing was intact/in place at day 14.

All of the clinicians thought the dressings were easy to apply (100% scored ≥9) with the majority finding that the level of pain was low whilst applying the dressing both at day 7 and day 14 (>70% scores of 1 to 3 indicating no or very low levels of pain).

Most clinicians stated reduced use of analgesia at day 7 (58%). At day 14 a further reduction in pain was noted by some clinicians (38%) with no patients reporting an increase in pain.

Overall, 63% (n=15) of clinicians stated that KerraLite Cool had exceeded their expectations, whilst 29% (n=7) stated the dressing had met their expectations. This level of satisfaction corresponded with the number of clinicians who stated that they would continue to use KerraLite Cool (76%, n=16) post the evaluation.

Amongst responses for what the clinicians liked about the dressing, ease of application was the most popular response, with other responses stating that it helped to reduce pain, keep the wound cool, and aided patient comfort and healing.

Discussion

KerraLite Cool is an innovative copolymer matrix dressing that provides the ideal environment for treating dry to lightly exuding sloughy wounds. The results in this study are consistent with a previous 14 day study assessing KerraLite Cool on venous or mixed aetiology leg ulcers (n=11). The results from that study also demonstrated ease of application and removal of KerraLite Cool with minimal pain, a reduction in analgesic use, and effective wound healing.¹

Conclusion

This 14 day evaluation demonstrated that KerraLite Cool and KerraLite Cool Border were valuable dressings for a variety of different wounds and they exceeded clinicians' expectations. Clinicians reported that the dressings were easy to apply and remove, helped to reduce pain, kept wounds cool, and aided patient comfort and healing.

References

Ivins N (2014) Evaluation of the mode of action of a new gel wound dressing, Wounds UK, Vol 10 : No 2



Image 2: Application of KerraLite Cool Border



Image 3: KerraLite Cool Range