Patient Information Leaflet

Understanding your Chronic Wound
Dressings, management and wound infection

In this leaflet Health Care Professional (HCP) refers to any member of the team involved in your wound care. This can include treatment room or practice nurse, community, ward or clinic nurse, GP or hospital doctor, podiatrist etc.

Chronic Wounds and Dressings

What is a Chronic wound?

A wound with slow progress towards healing or shows delayed healing. This may be due to underlying issues such as:
- Poor blood flow and less oxygen getting to the wound
- Other health conditions
- Poor diet, smoking, pressure on the wound e.g. footwear/seating.

Can my wound be left open to the air?

No, the evidence shows that wounds heal better when the surface is kept moist (not too wet or dry). The moisture provides the correct environment to aid your wound to heal.

Does my dressing need changed daily?

Not usually, your HCP will explain how often it needs changed. This will depend on the level of fluid leaking from your wound. Some dressings can be left in place up to a week.
Most wounds have a slight odour, but if a wound smells bad it could be a sign that something is wrong. See section on wound infection.

Your dressing may indicate that it needs changed when the dark area in the centre gets close to the edge of the dressing pad. The dark area is fluid from your wound, this is normal. It will be dry to touch. Let your HCP know if your dressing needs changed before your next visit or appointment is due.

Does my wound need cleaned when the dressing is changed?

Only wounds with dead tissue and excess fluid need to be cleaned at each dressing change. Occasionally, if dressings stick they may be soaked off. Wounds that have healthy tissue or new skin do not need cleaned as this removes the nutrients and growth factors needed for healing. Surrounding skin may need cleaned.

AWD PIL Version 1; Date authorised: Sept 2017; Date of review Sept. 2020
Adapted from Ruth Ropper Lothian Ladder Version 2 by SLWG for Antimicrobial Wound Dressings consisting of Health board and speciality representatives.
1st Edition: September 2017; Review: September 2020
Can I shower or have a bath with the dressing in place?

You can shower if your dressing is shower proof. Do not put your dressing under water as this will cause it to fall off. Check with your HCP first who may advise on a cover to keep your dressing dry.

What do I do if my dressing falls off?

Your HCP will explain what to do if this happens. They may give you spare dressings which you or a family member/carer can apply.

Always wash your hands before and after doing anything with your wound to reduce the risk of infection.

Wound Infection and Antimicrobial Dressings

How can I tell if my wound is infected?

If you have one or more of the following signs this may indicate infection:

- Increased swelling
- More redness around the wound than normal
- Pain worse than normal
- Skin around the wound feels hot to touch
- Increased fluid leaking from the wound
- Changes to wound fluid e.g. green, thicker, cloudy, foul smelling
- Feeling feverish/generally unwell/high temperature.

Some conditions will make you more likely to develop a wound infection, e.g. diabetes, poor circulation etc.

If you are concerned or symptoms develop quickly contact your HCP, or out of hours service, as soon as possible (refer to last page of leaflet).

Will I need antibiotics?

Not all wound infections will need antibiotics, your doctor or other HCP will make this decision. They may decide to use a specialist wound cleansing product or an antimicrobial wound dressing to reduce the level of bacteria instead of, or as well as, antibiotics.

What is an antimicrobial wound dressing?

Antimicrobials are agents that kill bacteria or stop their spread. Some have the active ingredient within the dressing and some come as creams, gels, ointments or powders. Your HCP will decide on the most appropriate form of dressing for your wound.

How long will I need the antimicrobial dressing for?

The HCP will monitor the wound at each dressing change to check for signs it is improving with treatment. The effect of the antimicrobial dressing will be reviewed after two weeks and future treatment will depend on:

1. If there are no signs of infection, your HCP will stop using the antimicrobial dressings and change to a standard dressing.
2. If the wound is improving, treatment will continue and be checked at least weekly.
3. If the wound is not improving, your HCP may change to another antimicrobial dressing, will continue to monitor closely and review health conditions, and/or refer to a specialist service.

Is there anything else I can do to help my wound heal?

1) Rest and Exercise
To encourage healing you need a balance of rest and exercise. Walking encourages the blood flow to your wound. Resting with your leg/arm up will reduce the risk of swelling to the area.

2) Pain relief
Remember to take painkillers as prescribed or directed by your HCP. This will allow you to move more easily.

3) Nutrition
A healthy and varied diet helps wound healing. This should include vegetables and fruit and proteins such as nuts, fish, meat, pulses, cheese or eggs.

4) Stop smoking
Even one cigarette reduces the blood flow and oxygen to the wound and stops nutrients being absorbed. It can also increase your risk of infection. You are four times more likely to be successful giving up smoking with professional help. Ask your HCP about ‘stop smoking’ services or you can contact Smokeline free by phoning an advisor on 0800 84 84 84.

Who do I contact if I have questions or concerns?

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If you have urgent concerns and are unable to contact your HCP
Phone NHS 24 on 111

Keeping your Appointment

If you cannot keep your appointment, or have been given one that is unsuitable, please change it by phoning the number on your appointment letter. Your call will give someone else the chance to be seen and will help us keep waiting times to a minimum.

Interpretation and Translation

This leaflet may be made available in a larger print, Braille or your community language.