WOUND ODOUR MANAGEMENT STUDY

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INTRODUCTION

This was a non-comparative evaluation of a deodorant spray called Approach Odor Eliminator. This spray is already available on Section Nine of the Drug Tariff as NatureCare - an Ostomy Deodorant Spray. It was felt that the spray may be used to control odours arising from wounds.

OBJECTIVE OF THE STUDY

The primary objective of the study was to gauge the performance of the spray when it was applied to the surface of the last dressing applied to a wound. In all of the cases in this study this was the secondary dressing.

A total of 8 patients took part in the study. The number of wound dressing changes totaled 35. The original aim was to recruit 30 patients with malodorous wounds for the study. This, however, did not become feasible as the length of the study time became too great. Therefore, it was agreed between the company and Sister Stansfield to produce a report on the findings so far.

All patients had mixed open wounds with a perceived malodour emitting from the wounds, which was considered to be unpleasant by the patients themselves. The study population consisted of 3 (37.5%) females and 5 (62.5%) males with a mean age of 58 . The study participants were all inpatients at the Ipswich Hospital NHS Trust and from a variety of specialties.

There were three end points to the study:

1. It was not perceived there was a malodour still emitting from the wound.
2. 14 days of using the spray had been completed.
3. Discharge or death of the patient from the hospital.

Of the eight patients treated in the study 75% ended as a result of point 1, 0% as a result of point 2 and 25% as a result of point 3. None of the patients withdrew from the study due to non-acceptability or product adverse reaction.

RESULTS

All patients had a self perceived notion of malodour emitting from the wound.

The variable between the strength of the odour was for patients perception 0.2 cm and 9.8 cm, and for nurses perception 0.2 cm and 9.8 cm, the mean demonstrating an odour strength of 4.77 cm for nurses and 4.96 cm for patients. The scale measurement = 0 cm - Weak Odour to 10 cm - Strong Odour.

The variable between the effectiveness in reducing odour for patients perception was O.I cm and 5.7 cm, and 0.2 cm and 5.8 cm for nurses perception the mean demonstrating an effectiveness of 1.85 cm for nurses and 1.93 cm for patients. The scale measurement = 0 cm Very Effective to 10 cm Ineffective.

The variable between the speed in reducing odour was 0.2 cm and 5.6 cm for patients perception and 0.2 cm and 5.4 cm for nurses perception, the mean demonstrating a speed of 1.54 cm for nurses and 1.54 cm for patients. The scale measurement = 0 cm Very Quickly to 10 cm Very Slowly.

Of the completed questionnaires, 2 of the participants or 6 out of 8 applications, felt that the spray had a smell of its own to mask the odour rather than neutralising.

All of the participants indicated re-application other than at dressing change. This, however was not for every day. 27 out of the 35 (77%) completed forms indicated re-application following wound dressing change. Average time of re-application is impossible to indicate due to the variable method of answering question number 9.

None of the participants at any time experienced discomfort when the spray was applied. Neither did the dressing show any signs of discoloration at each application.

HANDLEABILITYAND EFFICACY SUMMARY

There were a total of 35 applications to the secondary dressings of malodorous wounds during the study period.

Dispensing by both nurse and patients was reported as easy in 61/64 (95 31 %) and difficult in 3/64 (4.69%).

In all of the applications the spray was onto the secondary dressing which consisted of, in the majority of cases, a large direct wound dressing and retaining bandage.

DISCUSSION

Approach is a deodorising ostomy spray that has been shown to be effective in the reduction of odour in that situation. The purpose of this study was to evaluate the spray's use in the event of a malodorous wound.

In general, although the study was only small, there was a demonstration of a good level of efficacy in aiding and controlling and deodorising wound malodour from those participating in the study. This could suggest that Approach may well have a role to play in aiding the controlling of malodour emitting from a wound.

Further studies would help to confirm this.

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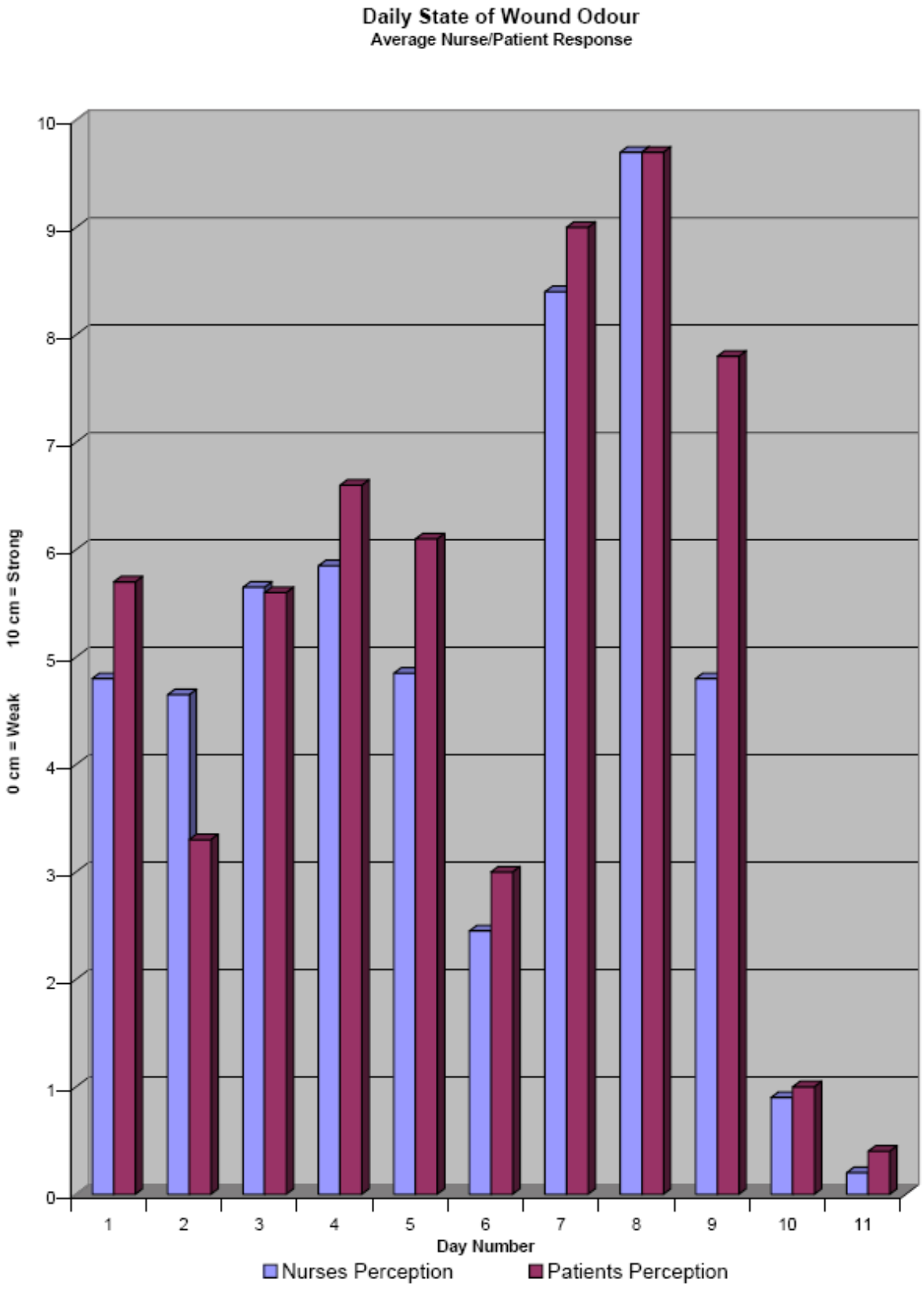
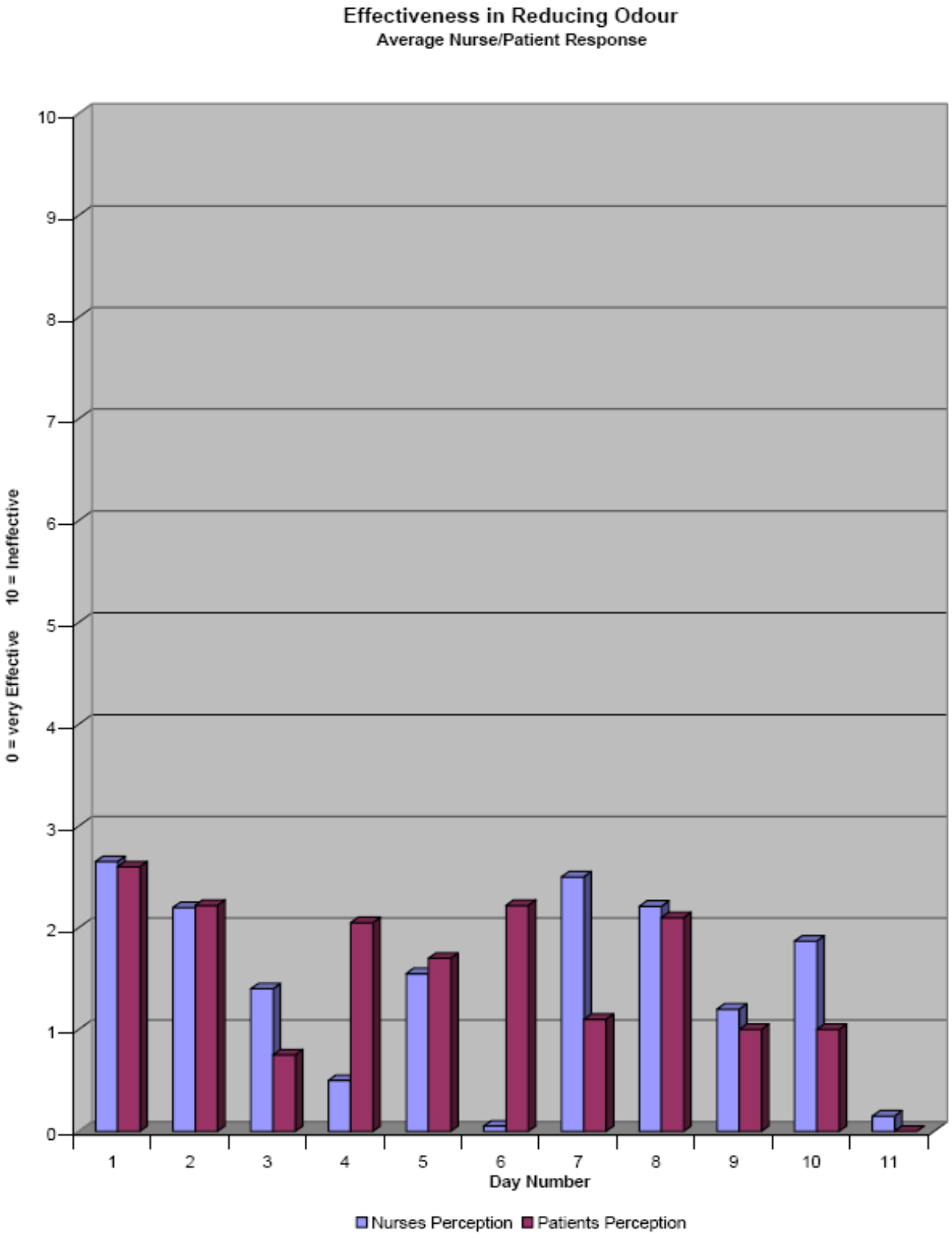
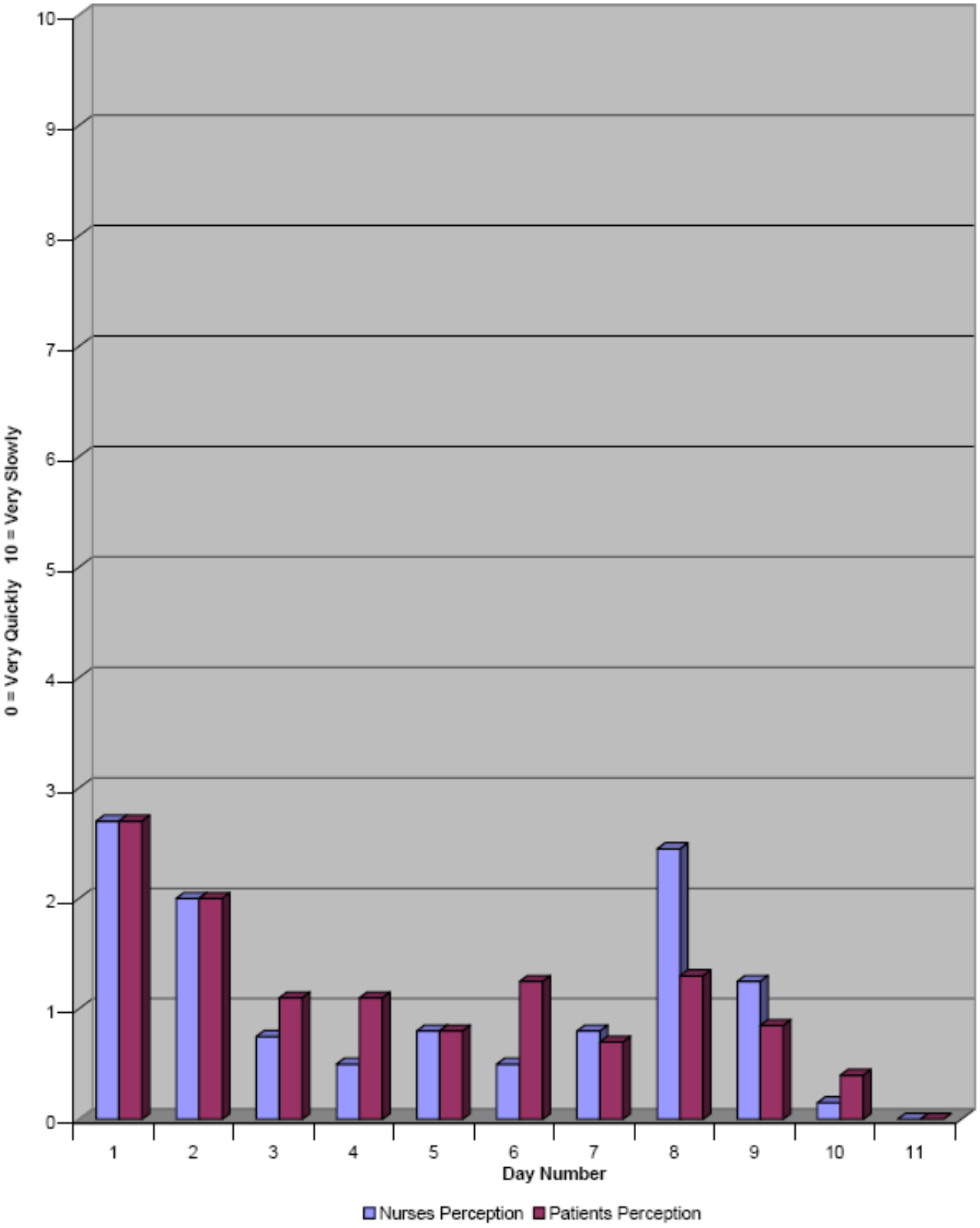
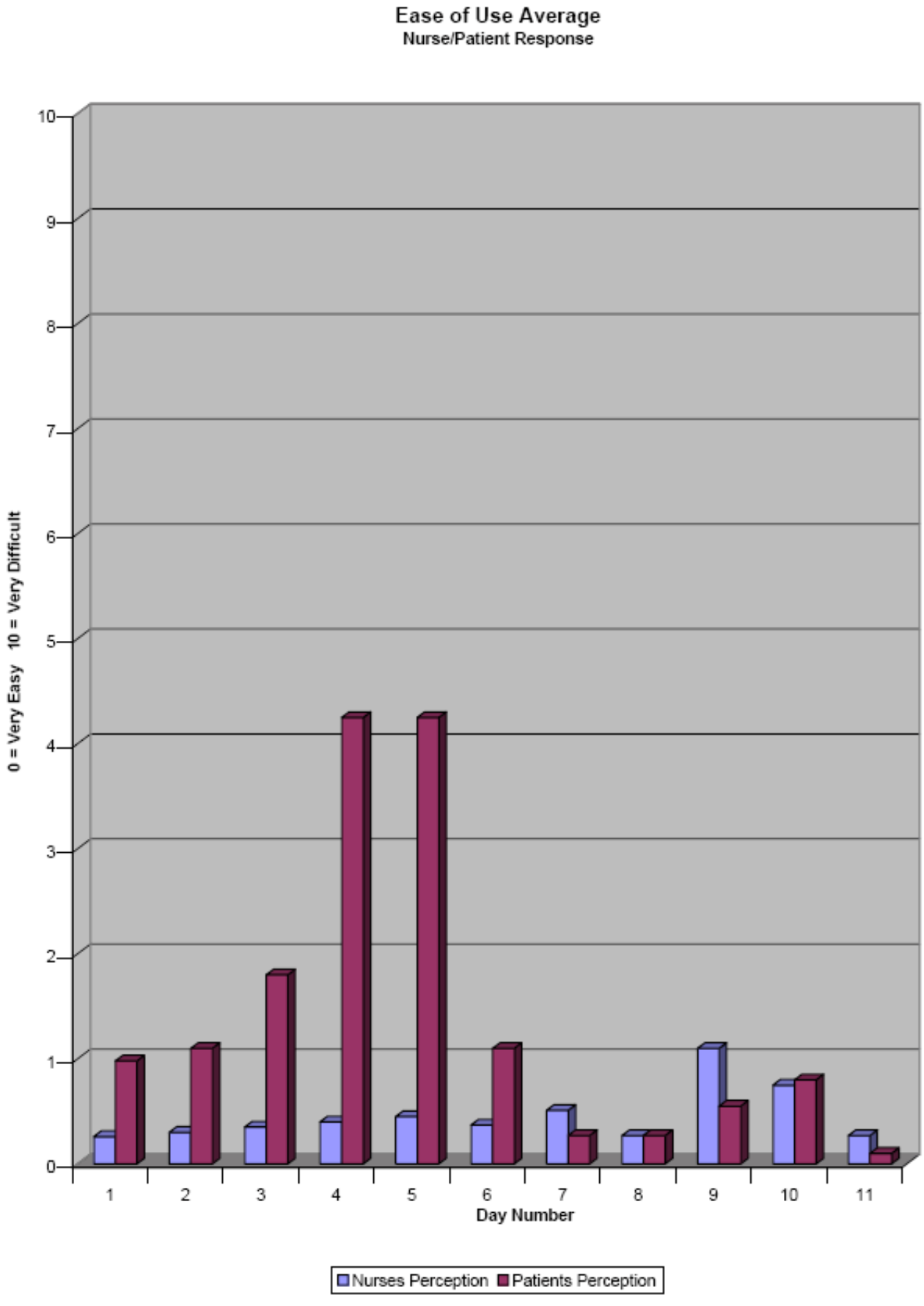

Daily State of Wound Odour
Average Nurse/Patient Response
0 cm = Weak
10 cm = Strong
0
1
2
3
4
5
6
7
8
9
10
1
2
3
4
5
6
7
8
9
10
11
Day Number
Nurses Perception
Patients Perception


Effectiveness in Reducing Odour
Average Nurse/Patient Response
0 = very Effective 10 = Ineffective
10
9
8
7
6
5
4
3
2
1
0
1
2
3
4
5
6
7
8
9
10
11
Day Number
Nurses Perception
Patients Perception

Speed in Reducing Odour

Average Nurse/Patient Response




Ease of Use Average
Nurse/Patient Response
0 = Very Easy 10 = Very Difficult
10
9
8
7
6
5
4
3
2
1
0
1
2
3
4
5
6
7
8
9
10
11
Day Number
Nurses Perception
Patients Perception