

New compression device for treatment of venous ulcers and skin diseases with edema

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Compression therapy

1. Acute therapy

1.1 Reduction of edema fig. 1

Compression therapy with:

- multilayer-systems (e.g. Rosidal® sys, L&R; 4layer, S&N)
- after edema reduction the new device, the ready made tubular bandage Rosidal® mobil can be used.

1.2 Compression therapy in patients with venous ulcers

by means of the ready made tubular bandage Rosidal® mobil or multilayer short stretch bandages (fig. 2)

Indications for the ready made tubular bandage Rosidal® mobil:

- especially effective for wounds <10 cm (fig. 2)
 - Healing rate short stretching system 56,7 %
 - Healing rate Rosidal® mobil 58 %
- Interface pressure 40 mmHg
- pleasant wearing characteristics

Advantages of Rosidal® mobil :

- very high skin-friendliness
- low recurrence rate (fig. 3)
- wearable at night
- No displacement of wound dressings

Rosidal mobil has shown to be appropriate particularly for elderly patients.

Compression in non-venous skin diseases

- leukocytoclastic inflammatory ulcers
- pyoderma gangrenosum (fig. 4):
 - Fast pain relief and ulcer reduction
- leukocytoclastic vasculitis (fig. 5):
 - healing of trophic skin changes
 - Decline of the edema

Accelerated wound healing by the combination of effective compression device and modern wound dressing

- bio-cellulose dressing (Suprasorb x)
- ready made tubular bandage Rosidal® mobil
- Advantages:
 - This hydro-balance wound dressing supports the autolytical debridement
 - Reduction of pain scores within the first 3 weeks of treatment (fig. 7)
 - In a study all ulcers healed 74,2 ± 35,3 days (fig. 6)

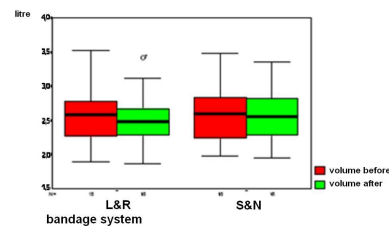


Fig.1 Edema reduction in healthy volunteers during 7 days of treatment with multilayer bandages (Rosidal sys, L&R; 4 layer, S&N)

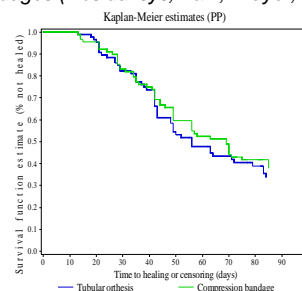


Fig. 2:Ulcer healing: comparison between the ready made tubular bandage and a multilayer short stretch bandage

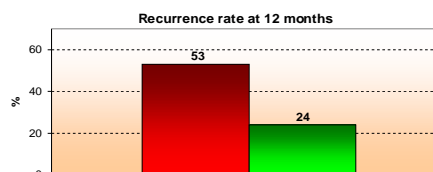


Fig. 3 Frequency of recurrent ulcers: ready made tubular bandage compared to compression stockings (20-30 mmHg)



Fig. 4: Pyoderma gangraenosum



Fig. 5: leukocytoclastic vasculitis

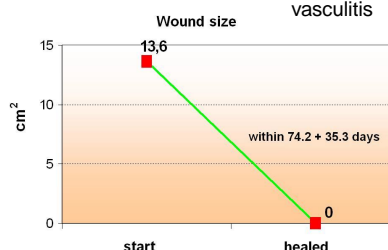


Fig. 6: Combination of bio-cellulose dressing (Suprasorb x) and the ready made tubular bandage Rosidal® mobil: healing after 74,2 days (n=13)

Reduction of pain scores (Visual Analogue Scale, VAS)

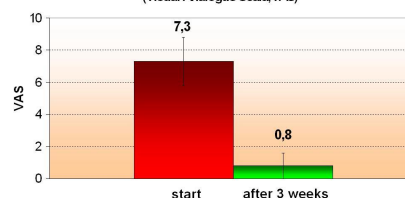


Fig. 7: Significant painreduction after 3 weeks (n=13)