

Comparative evaluation of a monofilament fibre debridement pad and a pre-moistened debridement cloth

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Aim

- To compare the efficiency of two products in managing hyperkeratosis and chronic wounds
- Considering visual outcome, treatment time, patient and clinical feedback and treatment plans post evaluation

Method

- Patients with lower limb chronic wounds and hyperkeratosis were treated in a community wound clinic with either a monofilament fibre debridement pad* (MFDP) or a pre-moistened debridement cloth (PMDC)
- Outcomes were recorded over two to three weeks
- Continuing treatment plans were documented at week four



Monofilament fibre debridement pad during treatment.

Results - pre-moistened debridement cloth (PMDC)

Wound/skin number	Treatment	Visual outcome	Patient/clinician feedback	Treatment plan post evaluation	Mean treatment time
1	PMDC x 2wks	No change seen	Unable to get into the crevices of the wound	Change to MFDP	Mean treatment time PMDC per leg ulcer debridement = 2.5 minutes Mean treatment time PMDC per hyperkeratosis debridement = 2 minutes
4	PMDC x 3wks	No change seen	I feel like I'm just smearing the wound and not getting down to business	Change to MFDP	
5	PMDC x 3wks	No change seen	Not a consistent level of moisture	Not confirmed	
8	PMDC x 3wks	Effective	I will use to wash legs but MFDP to debride the wound	Not confirmed	

Results - pre-moistened debridement pad (MFDP)

Wound/skin number	Treatment	Visual outcome	Patient/clinician feedback	Treatment plan post evaluation	Mean treatment time
2	MFDP x 2wks	Effective	A more robust product	Continue use	Mean treatment time MFDP per leg ulcer debridement = 2 minutes
3	MFDP x 3wks	Effective	PMDC just 'tickles' the wound, MFDP deep cleans	Continue use	
6	MFDP x 3wks	Effective	Confident to use on delicate skin	Continue use	Mean treatment time MFDP per hyperkeratosis debridement = 2 minutes
7	MFDP x 3wks	Effective	Thorough clean and deep removal of hyperkeratosis. Creams go on better afterwards	All hyperkeratotic skin removed	

Discussion

- Using the MFDP clinicians noted an immediate removal of slough/hyperkeratosis along with a 'deep clean' effect in all cases. Clinicians felt a smaller option would be useful for some wounds.
- Clinicians remarked on a 'film' or 'froth' left in the wound/limb with the PMDC. A difficulty with getting into deeper areas of the wound was also noted. One patient did express a willingness to continue with the product and reported ease of use
- In response to the evaluation results, clinical evidence and NICE guidance¹, the decision was made to stop the evaluation and include MFDP on the woundcare formulary

Conclusion

- Whilst there was some improvement reported with the use of a debridement cloth, there was a visible improvement for all cases with the debridement pad. This has led to patient satisfaction, influenced clinical practice and formulary inclusion.

* Debrisoft® monofilament fibre debridement pad by Activa Healthcare

¹ National Institute for Health and Care Excellence (NICE) (2014) The Debrisoft monofilament debridement pad for use in acute or chronic wounds. London: NICE. Available at: guidance.nice.org.uk/mtg17.