

 <p>CLINICAL PRACTICE GUIDELINE</p>	<p>USE OF SILVER DRESSINGS AND NEGATIVE PRESSURE WOUND THERAPY</p>	
	<p>Approved By: <i>WRHA Standards Committee and WRHA Professional Advisory Committee</i></p>	<p>Pages: <i>1 of 3</i></p>
	<p>Approval Date: <i>April 27, 2012</i></p>	<p>Supercedes: <i>New</i></p>

1. PURPOSE AND BACKGROUND

- This clinical practice guideline provides direction relative to the use of silver dressings and negative pressure wound therapy within the Winnipeg Regional Health Authority.
- The guideline was developed by a working group of local clinical experts which included Plastic Surgeons, Surgeons, Infectious Disease Specialists and Advanced Wound Care Clinicians. The guidelines are based on an extensive review of the available evidence including commissioned health technology assessments from the Canadian Agency for Drugs and Technologies in Health.

2. DEFINITIONS

Silver Dressings: Any wound dressing containing silver.

Negative Pressure Wound Therapy: A wound treatment modality designed to create a negative pressure environment at the wound site.

Advanced Wound Care Clinician: (a) A Nurse Practitioner with specific training in wound care; or b) Other Health Care Provider (RN, CNS, OT, PT, etc.) who has completed a recognized wound care program. Recognized programs are:

- Enterostomal Therapy (through the Canadian Association of Enterostomal Therapists or Wound Ostomy Continence Nurse)
- University-affiliated wound care education program.

3. GUIDELINES

Silver Dressings


There is limited evidence to support the use of silver based dressings.

1. **Indications for use**

In conjunction with a referral to a dermatologist, specialist in Infectious Diseases, or surgeon, silver may be indicated for the following types of wounds:

- Burns¹
- Necrotizing fasciitis
- Toxic epidermal necrolysis syndrome (TENS)

¹ To date, only nanocrystalline silver dressings have sufficient evidence from *in vitro* studies to support its use in burn care.

 <p>CLINICAL PRACTICE GUIDELINE</p>	<p>USE OF SILVER DRESSINGS AND NEGATIVE PRESSURE WOUND THERAPY</p>	
	<p>Approved By: <i>WRHA Standards Committee and WRHA Professional Advisory Committee</i></p>	<p>Pages: <i>2 of 3</i></p>
	<p>Approval Date: <i>April 27, 2012</i></p>	<p>Supercedes: <i>New</i></p>

- Wounds that have failed to improve with conventional therapy despite optimal care for a minimum of four weeks (debridement, pressure off loading, optimal peripheral perfusion)
- 2. Those authorized to order silver:** Should be limited to Advanced Wound Care Clinicians, Nurse Practitioners, Physicians, Dermatologists, Specialists in Infectious Diseases and Surgeons.
- 3. Reassessment:** Use of silver should be re-evaluated and stopped if there is no improvement after two weeks (except in cases of Burns, Necrotizing fasciitis, TENS).

Negative Pressure Wound Therapy

There is limited evidence supporting enhanced wound healing with negative pressure wound therapy. It is acknowledged that negative pressure wound therapy is a management enabler of large complex wounds.

1. Indications for use:

- Abdominal compartment syndrome
- Fasciotomy wounds
- Skin grafts (placed on in operating room to stabilize the new graft)
- Large open surgical wounds (once debrided and any infection is being treated)

It was noted that such patient factors as the ability to adhere to and tolerate treatments and lifestyle must be considered in the decision to use negative pressure wound therapy. Nutrition, pressure management, smoking cessation, glycemic control and other factors for optimal wound healing must be concurrently addressed.

- 2. Those authorized to order Negative Pressure Wound Therapy:** Should be limited to Advanced Wound Care Clinicians, Physician Specialists and Surgeons.
- 3. Frequency of dressing changes:** It is recommended that dressing changes be completed 2-3 times per week.
- 4. Reassessment:** Use of negative pressure wound therapy should be re-evaluated and stopped if there is no improvement after two weeks. Maximum length of therapy should be 4 weeks unless sole indication is for complex management issues. If a patient is being discharged to the community with negative pressure wound therapy, timely follow-up with the Surgeon and Advanced Wound Care Clinician should be arranged.

 <p>CLINICAL PRACTICE GUIDELINE</p>	<p>USE OF SILVER DRESSINGS AND NEGATIVE PRESSURE WOUND THERAPY</p>	
	<p>Approved By: <i>WRHA Standards Committee and WRHA Professional Advisory Committee</i></p>	<p>Pages: <i>3 of 3</i></p>
	<p>Approval Date: <i>April 27, 2012</i></p>	<p>Supercedes: <i>New</i></p>

4. REFERENCES

Canadian Agency for Drugs and Technologies in Health. (7 Jul 2010). *Silver dressings for the treatment of patients with infected wounds: A review of clinical and cost-effectiveness*. Retrieved from <http://cadth.ca/en/products?q=silver+and+wounds>

Canadian Agency for Drugs and Technologies in Health (14 Jul 2010). *Negative pressure therapy for patients infected wounds: A review of the clinical and cost-effectiveness evidence and recommendations for use*. Retrieved from <http://cadth.ca/en/products/rapid-response?q=negative+pressure>

Canadian Agency for Drugs and Technologies in Health (25Aug 2010). *Negative pressure therapy for patients with non-infected wounds: Indications for use and guidelines*. Retrieved from <http://cadth.ca/en/products/rapid-response?q=negative+pressure>

Winnipeg Regional Health Authority. (March 2011). Regional Policy 110.000.320 – *Wound Care*.

5. AUTHOR GROUP (in alphabetical order)

- John Embil, Consultant, Infectious Diseases and Director, Infection Prevention and Control Program, WRHA
- Denise Joubert, Advanced Wound Care Clinician, St. Boniface Hospital
- Lori Lamont, Vice President and Chief Nursing Officer, WRHA
- Poh Lin Lim, Clinical Nurse Specialist, Victoria General Hospital
- Sarvesh Logsetty, General Surgeon, Director of the Manitoba Firefighters Burn Unit at Health Sciences Centre
- Marcie Lyons, Coordinator, Enterostomal Therapy Program, St. Boniface Hospital
- Kathleen Klaasen, Manager of Nursing Initiatives, WRHA
- Dan Skwarchuk, Executive Director, Health Services Integration
- Brock Wright, Vice President, Chief Medical Officer, WRHA

Questions or inquiries should be directed to: Kathleen Klaasen, Manager of Nursing Initiatives, WRHA, Email: kklaasen@wrha.mb.ca, Phone: 926-8029