

Using a novel contact layer* for the management of epidermolysis bullosa skin lesions

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INTRODUCTION

Epidermolysis bullosa (EB) is a heterogeneous group of rare, inherited skin diseases characterized by recurrent painful skin lesions, often induced by minor trauma resulting in dermal-epidermal separation or split. To limit any additional risk trauma wounds should be covered with a non-adherent dressing, recovered with a non-adherent pad and secured with soft, roller gauze bandage. The characteristics of a new contact layer*, specifically pain-free removal, appear to be congruent with the treatment of skin lesions in patients with EB.

So, a clinical study was undertaken to evaluate the acceptability, tolerance and efficacy of this novel lipido-colloid contact layer dressing* in the management of EB skin lesions.

MATERIALS AND METHODS

This was an open single-centre non-randomized clinical trial conducted on 20 patients (11 adults and 9 children) suffering from simplex or dystrophic EB. Skin lesions were treated with the study dressing for a maximum of four weeks. At all dressing changes, the wound parameters, pain and effect on quality of life were recorded.

METHOD

- All the 20 patients completed the trial and a total of 152 dressing changes were documented.
- Nineteen out of 20 wounds healed within 8.7 ± 8.5 days.
- Dressing application was considered by patients as “easy” or “very easy” in 94,5% of dressing changes
- Dressing removal was considered as “easy” or “very easy” in 98% of changes. Dry dressing removal was performed in 87,2% of recorded changes; 12,7% were soaked with saline.
- 91% of dressing changes were reported to be pain free; of the remainder, 9% were rated as mild to moderate
- Overall, 11 patients (55%) considered that their quality of life was improved after using the tested dressing, reported to ‘very easy’ or ‘easy’ to remove at most dressing changes. Most adults and all children felt less apprehensive about the procedure than they had with their usual dressing. Nineteen out of 20 patients (95%) stated that they would use this dressing to manage their lesions in the future.

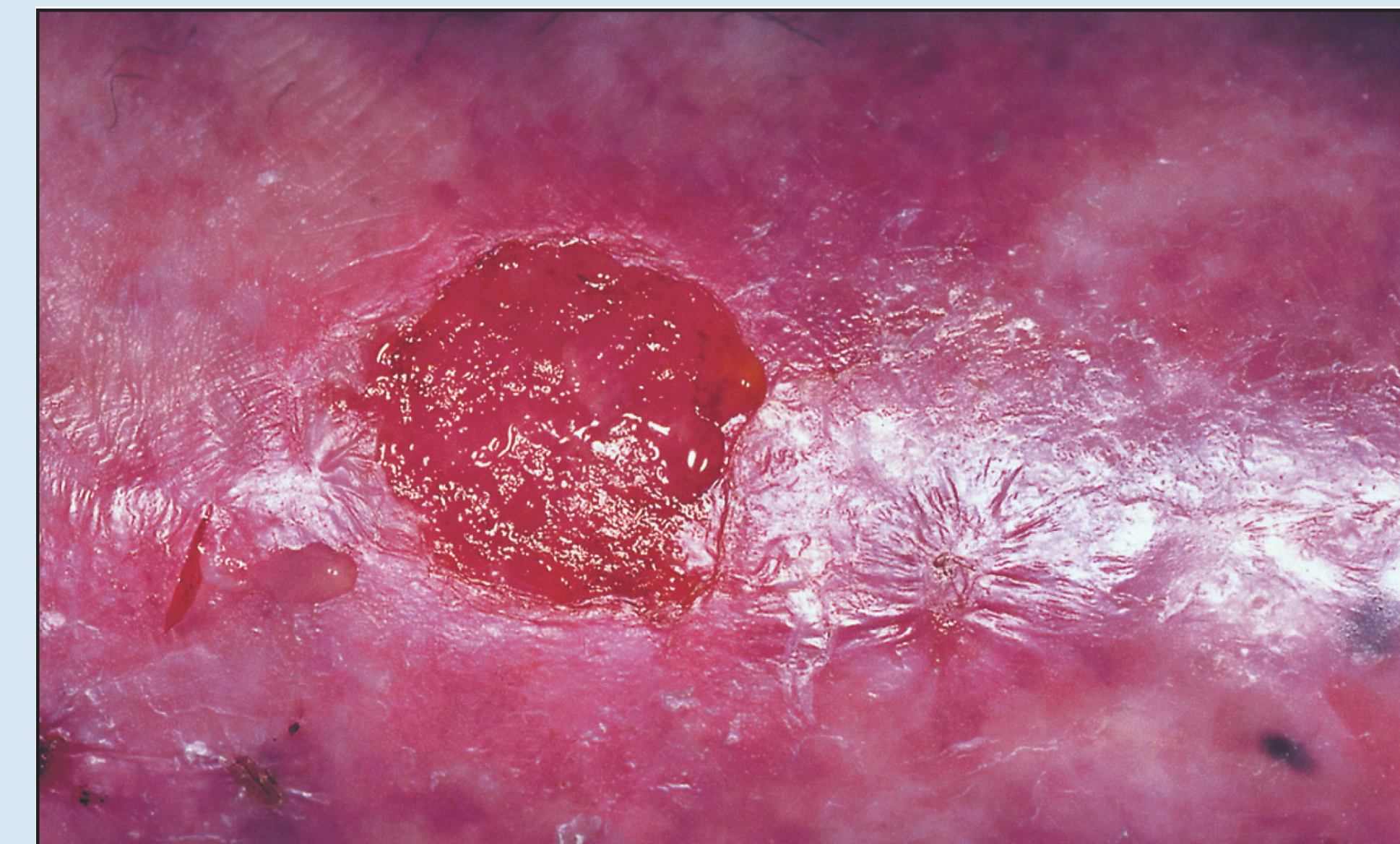
RESULTS



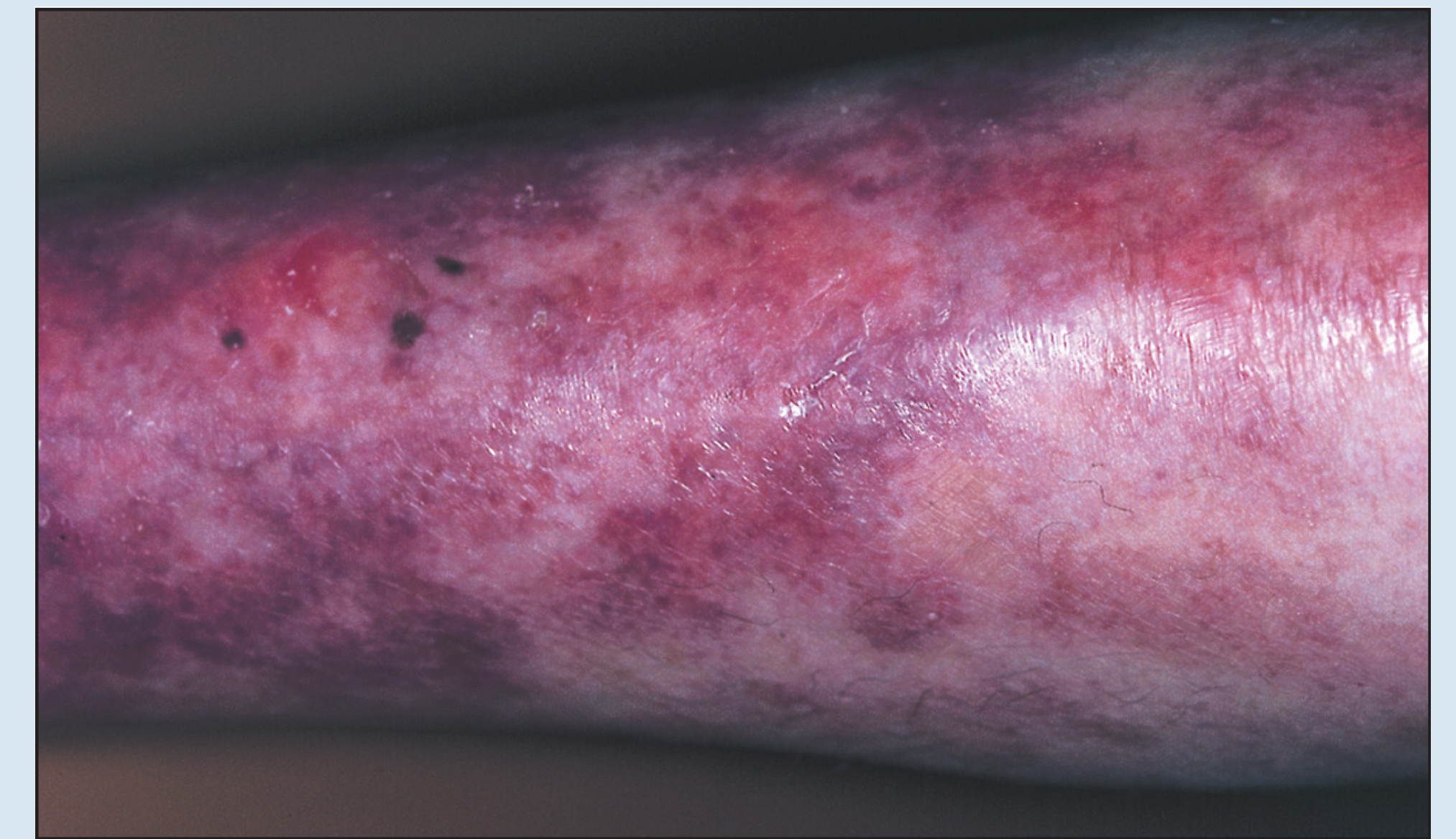
Initial Aspect



Complete wound healing



Initial Aspect



Complete wound healing

CONCLUSION

This study confirmed the very good acceptability and efficacy of a new lipido-colloid contact layer dressing* in the treatment of EB skin lesions, notably in young patients, suffering from this skin lesions.

REFERENCES

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