

Improved Exudate Management Leads to Less Wound Odor and Better Quality of Life: Case Series

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BACKGROUND

It has been demonstrated that the quality of life (QOL) for patients with chronic wounds can be negatively impacted by wound odor when exudate is not optimally managed.¹ Chronic wounds are becoming more prevalent with the rise in chronic diseases such as obesity, diabetes, and congestive heart failure. Ineffective exudate management can lead to odor, maceration, and further wound breakdown.^{2,3}

Because of wound odor and exudate, patients have reported:

- Social isolation
- Depression
- Anxiety
- Low self-esteem
- Lack of well being
- Sadness
- Frustration
- Repulsion
- Decreased quality of life

Several patients in our clinic have reported that they were too embarrassed to participate in social events, have compromised personal relationships, and felt isolated because of challenges managing the odor and exudate of their chronic wounds.

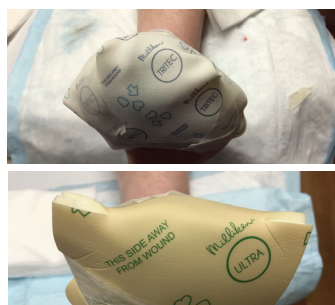
PURPOSE

The purpose of this case series is to report patients' feedback on the improvement in quality of life when their wound exudate was well managed, and resulted in improved odor control.

Patient 2



Week 1



Dressing Application



Week 3



Week 18

METHODS/PROCESSES

During the patient assessment, four patients with draining lower extremity wounds self-reported their dissatisfaction with malodor, wound drainage, and resulting social isolation.

These four patients (two males, two females; average age 64 years) with highly exuding lower extremity wounds self-reported a negative impact on their QOL due to malodorous wound exudate.

PT	Age	Gender	DX
1	60	M	Venous stasis ulcer
2	67	M	Diabetic foot ulcer
3	58	F	Vasculitis
4	72	F	Diabetic foot ulcers, venous stasis ulcers

A variety of standard wound care dressings were initially used under UNNA boots, total contact casts (TCC), and secondary dressings. All four patients reported high dissatisfaction with wound odor and drainage initially, which often resulted in them traveling at least two times per week for dressing changes to decrease odor and avoid complications with periwound maceration.

UPMC LIFE CHANGING MEDICINE

Patient 1



Patient 4



OUTCOMES/RESULTS

Each patient reported that when they had communicated the malodor issues to their nurse, the nurse changed wound drainage strategies to better manage the exudate, and included a dressing with highly wicking/absorbent dressing[†] technology. The revised treatment program resulted in a significant improvement in the amount of odor, drainage (onto clothing, casts, bed linens), and made these patients more confident to be around others. These patients self-reported an improved quality of life and gave specific examples of how their lives were improved.

Examples included:

- Able to attend church and other social functions
- Spouses resumed intimate relations
- Overall increased confidence and self-esteem
- Outlook on life was improved

With improved management of the exudate:

- Wounds progressed towards healing
- Fewer wound care visits
- Patients noted considerably less wound odor
- Patients and clinicians reported improved quality of life

CONCLUSIONS

Optimal management of exudate through the use of highly wicking/absorbent dressings[†] decreased wound odor and improved QOL for people with chronic wounds. Prospective studies comparing the use of a higher cost product used once weekly vs a low cost product used more often, in addition to impact on QOL, healing times, and patient-adherence may help guide future care.

References

- ¹ International consensus. Optimizing wellbeing in people living with a wound. An expert working group review. London: Wounds International, 2012.
- ² Okan D, Woo K, Ayello EA, Sibbald G. The Role of Moisture Balance in Wound Healing. *Adv Skin Wound Care*. Jan 2007;20(1):39-53.
- ³ Hollinworth, H. Challenges in protecting periwound skins. *Nurs Stand*. Oct 21-27 2009;24(7):53-62.