

A Nitric Oxide-Generating Multimodal Wound Dressing could be Beneficial in a wider range of Diabetic Foot Ulceration: Results from a product evaluation

*C Manu, M Bates, W Tang, P Lee, B Chow, C Martin, E Vainieri, M Edmonds
Mike Edmonds Foot Unit, King's College Hospital, London, UK



Background: Results from a randomised control trial have reassuringly demonstrated the safety and efficacy of a nitric oxide (NO)-generating multimodal wound dressing for a selected group of diabetic foot ulcers (DFUs).

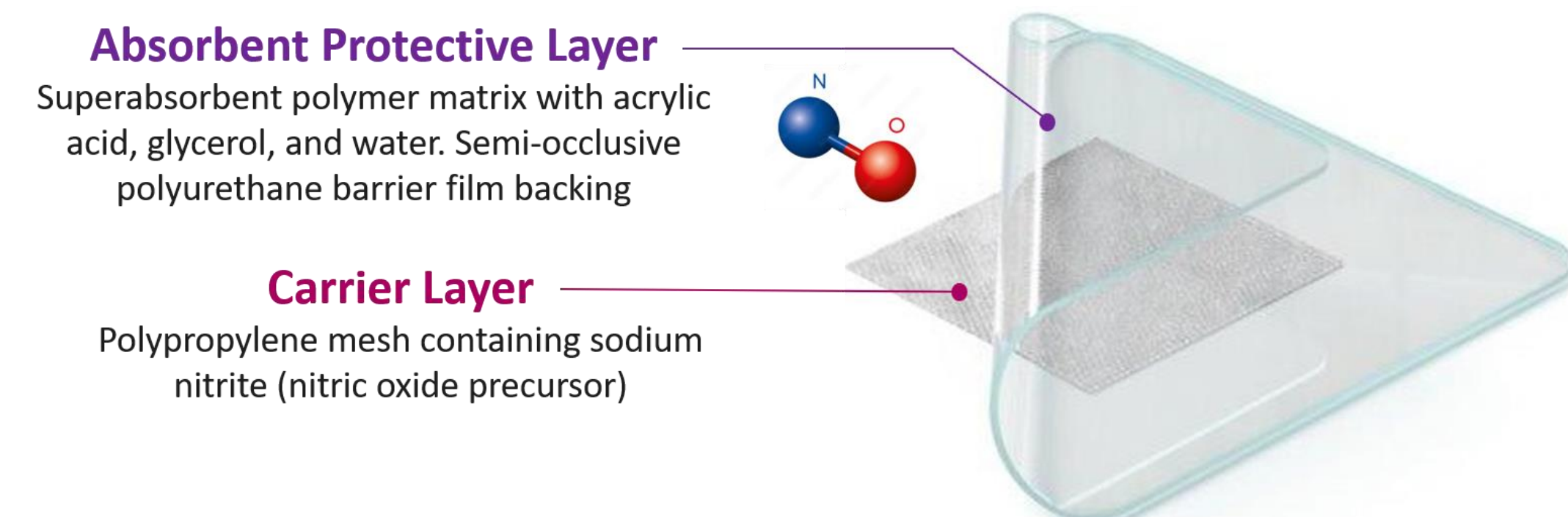
Aim: To evaluate the possible benefit of the treatment on a wider spectrum of complex DFUs

Method: This was a retrospective review of a cohort of consecutive patients attending a single centre with a range of DFUs that were non-healing despite having a good standard of care (SoC). Patients were initiated on the NO-generating wound dressing in addition to their SoC as part of a product evaluation.

Clinical notes were reviewed retrospectively for patient baseline demographics and wound progress, categorised as healed, improved, static or deteriorated.

Results: There were 12 wounds assessed in 10 patients, mean age 64±16 [range 31–81 years], 70% males, 80% with type 2 diabetes. Ulcer duration ranged from 2 weeks to 2 years. With the exception of one ulcer, all ulcers were severe as per SINBAD classification with a score ≥3.

ConvaNiox™: a multimodal nitric oxide-generating dressing



Results: Two-thirds were infected, 5 with IWGDF infection classification score of 2 (mild), and 3 with a score of 3 (moderate) which antibiotic treatment. Mild infection were successfully managed without antibiotics.

All ulcers improved upon initiating NO dressings, and 50% progressed to healing within 12weeks.

Conclusion: There is the possibility to broaden the scope of use for the NO-generating multimodal wound dressing to be helpful in the management of a wider range of diabetic foot ulcerations, be they infected or non-infected.

Ulcers Categorised into 4 Main Groups

(a) Superficial non-infected n=2



(c) Superficial Infected, n=3



(b) Deep non-infected, n=4



(d) Deep Infected DFUs, n=3

