

Malignant wound Management

Nongluk Sansom MNS, APN, ET, Untika Wutidilokprapan BNS, RN., ET Siriraj Hospital, Mahidol University, Thailand



Malignant wounds are often difficult to management. The most common symptoms associated with malignant wounds are malodor, excessive exudates, infection, bleeding, maceration and excoriation of periwound skin, pruritis, pain, poor aesthetics and cosmetic effects of dressings. The principle treatment of cancer is chemotherapy surgery and radiotherapy. The problems caused by cancer lesions as a direct role of enterostomal therapy nurses. In treating patients with malignant wounds, the overall goals of nursing care are to promote patient comfort, confidence and a sense of well-being, to prevent isolation and maintain or improve a patient's quality of life.¹³⁴

Case report

Female patient Diagnosed CA Lt. External auditory canal. The malignant wound was presented at anterior and posterior external auditory canal. It has excessive exudates and offensive odor. Periwound shown erythema. Location is difficult to apply dressing. Appropriate wound management that attends to the patient's outward appearance can have a very positive effect on self-esteem and emotional distress.



Nursing Intervention

The goals of management were to effectively exudate, treat infection, protect periwound and reduce odor. Intervention procedures are mentioned below.

- ① Irrigated malignant wound with normal saline solution until used dressing out of wound.³
- 2 Cleaned with normal saline solution around malignant wound
- ② Crushed metronidazole tablets in sterile water or normal saline solution and creating either a 0.5% solution (5 mg/cc) or a 1% solution (10 mg/cc). This can be used as a wound irrigate, or gauze can be saturated with the solution and packed into wound 10-15 minute for reducing malodor³
- Protected periwound skin from exudates by skin barrier film?
- SUsed Primary dressing with hydrofiber Ag plus then Secondary dressing with hydrofiber foam for manage exudate.²
- Sealed edges of hydrofiber foam with soft adhesive tape.











Result

About 4 week after start chemotherapy and wound care intervention Malignant wound was improved and patients have a better quality of life.





Conclusion

Management of malignant wound by advanced wound dressing and metronidazole can establish exudate balance, protect infection and periwound skin can substantially decrease the frequency of dressing change, reduced odor, reduce patient discomfort and caregiver can easily and conveniently wound care.

Reference

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