



# Clinical Evaluation

## Combining the Avon Heel mattress, Strathclyde Boot and comprehensive wound management to avoid a below knee amputation.

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### INTRODUCTION AND AIMS

The management of pressure ulcers continues to be an ongoing challenge for health professionals with nearly 30% of pressure ulcers occurring on the heels (Van Gilder, 2012). It is evident that anybody can develop a pressure ulcer but those patients who are seriously ill, have reduced mobility, a neurological condition, impaired nutrition, poor posture or a deformity have a higher risk for the development of pressure ulcers (National Institute for Care and Excellence (NICE, 2015).

### METHOD

Mr S is a 75 year old patient nursed in a local nursing home with multiple co-morbidities comprising of multiple sclerosis, diabetes, Stage 2 chronic kidney disease and depression. He was referred for a specialist assessment and was found to have a category 4 (EPUAP, 2014) to the left heel extending to the Achilles area, with a wound bed consisting of predominantly slough and necrotic tissue.

A full assessment was undertaken including a handheld Doppler ultrasound to assess the vascular status of the foot, the ankle brachial pressure index was 0.61 but the patient has already been seen by the vascular team who had recommended amputation in view of the extent of the pressure ulcer. Negotiation was had with the vascular team to delay the intervention and to try and manage the foot with appropriate wound care and pressure redistributing equipment; unfortunately the patient declined all dynamic equipment. The Herida Avon Heel mattress and Strathclyde boot was implemented along with a full nutritional assessment and addressing the underlying depression, along with comprehensive wound management.



## FIRST ASSESSMENT



### HERIDA AVON HEEL™

The clinically proven Herida Avon-Heel™ pressure reducing mattress, has been developed using the very latest combustion modified ether (CME) and visco elastic foam technology. This high quality product features a very specialist heel management area.



### HERIDA STRATHCLYDE™ HEEL BOOT

Our uniquely designed Herida Strathclyde® Heel boot is clinically proven to reduce pressure on the vulnerable heel area. Our variable adjustment straps allow use on various patient limb sizes, thus allowing ease of application.





## SECOND ASSESSMENT



The wound was slowly starting to autolytically debride with wound care products and sharp debridement was also completed by the Tissue Viability Lead Nurse. The GP had reviewed the patient and commenced him on antidepressants which had made a huge difference to his concordance to treatment as the literature identifies that mental health impacts on wound healing (Gouin and Kiecolt – Glaser, 2011). The vascular team had at this point decided to wait another 3 months before amputation. much quieter Herida Lothian™ dynamic mattress.

## THIRD ASSESSMENT



The wound progressed well and although still extensive the wound bed began to granulate and the vascular surgeons decided that possibly amputation was not going to have to be an option. The patient found the boot both comfortable and easy to wear, and his sleep improved on the Herida Avon Heel mattress.

## FOURTH ASSESSMENT



The patient was now feeling more optimistic about the future, his mood had greatly improved and he was starting to interact with fellow nursing home residents. He began eating well along with continuing with the Strathclyde Boot and Herida Avon Heel Mattress.

## FINAL ASSESSMENT *FOOT HEALED*





## DISCUSSION

The management of pressure ulcers continues to be an ongoing challenge for health professionals with nearly 30% of The combination of a holistic assessment, appropriate wound management and appropriate equipment averted a below knee amputation. The patient continues to improve and his skin is now fully healed, he continues to wear the boot in bed and continues to use the mattress reporting that it is extremely comfortable enabling a good night's sleep.

## REFERENCES

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*NB: No payment was exchanged to the involving parties, other than travelling and associated expenses to that of the author for her Clinical supervision of this document, whilst ensuring that no patient was harmed.*

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