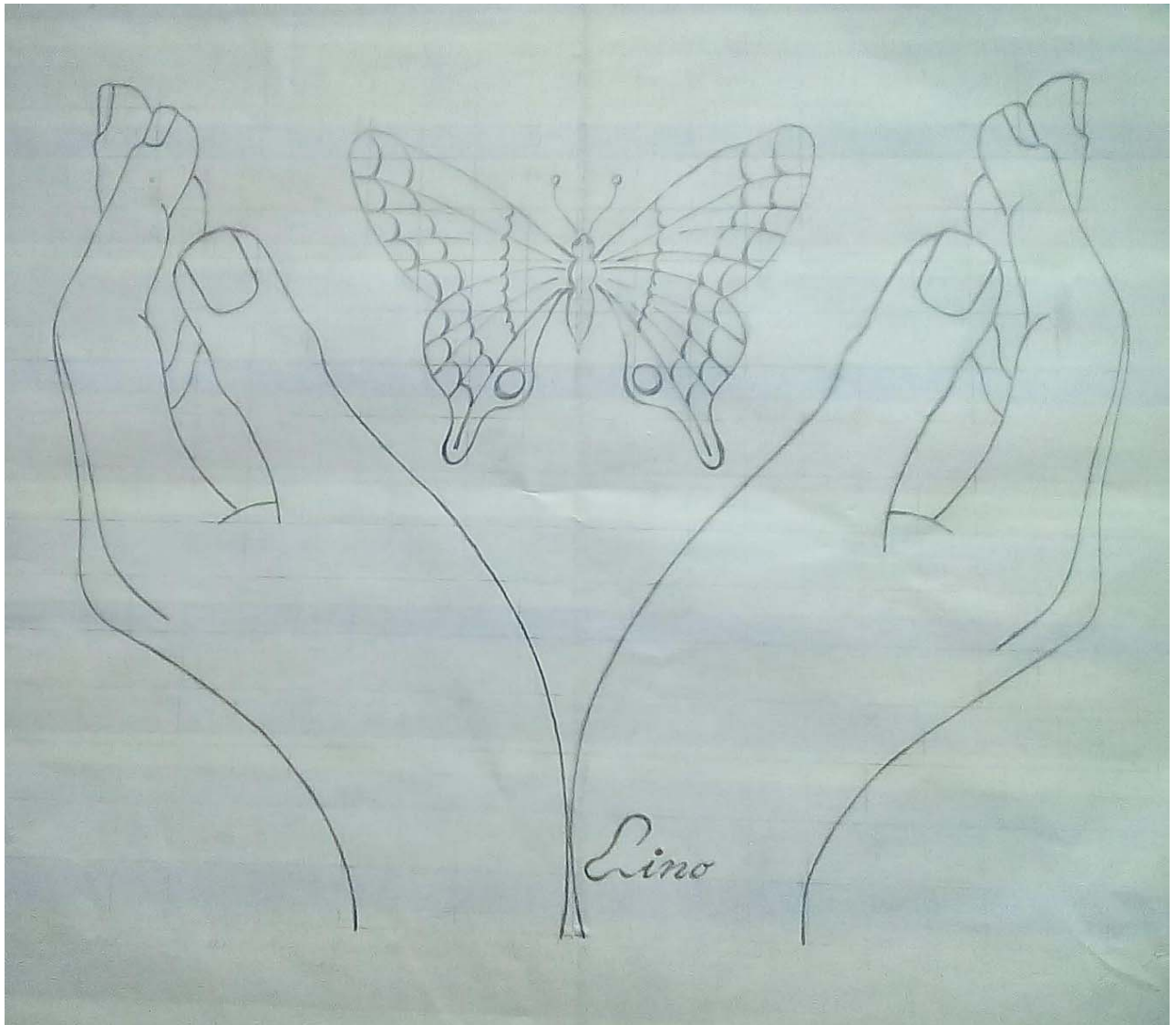


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Effectiveness of the treatment of injuries from decubitus with povidone-iodine

diluted at 0.5% in saline solution + cicasilver spray: medical aspects and nursing.

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KEY-WORDS: decubitus; cicasilver spray; povidone iodine

ABSTRACT A bedsore is a localized damage to the skin and the underlying soft tissues that usually develops over an area of the skin covering a prominent bone. The lesion may present as intact skin or an open ulcer and it's often painful. The lesion occurs following an intense and/or prolonged pressure on the skin in combination with cutting. **BACKGROUND:** At the moment, 6 men and 4 women of average age are enrolled 57 and 91 year olds respectively suffering from pressure ulcers in multiple locations (sacral, lower limbs and calcaneal). **AIM:** .At the moment, 6 men and 4 women of average age are enrolled 57 and 91 year olds respectively suffering from pressure ulcers in multiple locations (sacral, lower limbs and calcaneal). **MATERIALS and METHODS:** The data collection was carried out by integrating the paper material with a digital database, specifically created for entering laboratory data and storing instrumental tests results connected to the procedure. The creation of the digital database is linked to the prospect of carrying out preliminary data analyses using simple "filter" functions, so as to check the homogeneity of the data entered and to export the data in a format compatible with the analysis software statistics carried out with SIGMASTAT version 3.5 for Windows XP. The data collection and the request for informed consent were processed simultaneously. As regards the use of scale, this was aligned with the international reference system for laboratory tests and for instrumental exams. **RESULTS:** Data analysis confirms the effectiveness of tissue stimulation granulation by povidone-iodine diluted to 5%. This effect is linked—based on data present in existing literature—to the modulation of TGF beta on growth of granulation tissue in the pressure sore. Treatment with Cicasilver spray was introduced in the pilot study to ensure the maximum protection of the treated lesions and minimize the risk of bacterial superinfection. **DISCUSSION:** The data table shows a statistically significant variation in the healing time of pressure sores treated with povidone-iodine at 0.5% and Cicasilver after 14 days of treatment. The analysis of overall group of data enrolled highlighted a variation statistically significant changes in pressure sores are using ANOVA analysis for comparison between groups (T0 vs T1 vs T2) both using the T test for the comparison of paired data (T0 vs T2). To analyze in we have divided the different patients enrolled in the pilot study into detail subgroups the data by distributing them based on the location of the lesions. The statistical analysis allowed us to highlight a statistical variation significant changes in pressure sores when compared over time initial T0 and the end follow up time T2 both in the group of sacral lesions (P< 0.001*) than in the group with lower limb and calcaneal lesions (P=0.005*). Variations bordering on

statistical significance were found by ANOVA analysis for the comparison between groups with sacral decubitus (T0 vs T1 vs T2) with $P= 0.053$ while no significant variations were highlighted by ANOVA analysis for comparison between groups (T0 vs T1 vs T2) in group with lower limb and calcaneal lesions ($P= 0.142$). For completeness, only 1 case of superinfection involving a lesion is reported ulceration of the left foot after hospital discharge in a poorly compliant geriatric patient followed in home care. The patient was excluded from the study protocol due to possible interference of super-infection on the healing times of the ulcerative lesion. The exam culture highlighted the presence of *Escherichia Coli* and *Pseudomonas Aeruginosa* MDR. Therapy was carried out to treat the infection targeted after performing a wound swab with antibiogram administering AMIKAN 500 mg intramuscular vials morning and evening given the lack of availability of the tablet formulation (MILAN 500 mg) e RIFADIN 450 mg 1 tablet morning and evening for a total of 7 days. There antibiotic therapy was successful in resolving the infectious condition of the lesion with healing of the same in the third continuous week of topical treatment with 5% povidone iodine and Cicasilver spray. **CONCLUSION:** The pilot study we carried out allowed us to highlight the effectiveness of the topical treatment with 0.5% povidone iodine and Cicasilver spray for dressings for sacral bedsores and for ulcerative lesions of the lower limbs or calcaneals. **Limitation of the study:** Currently the sample size in examination is not sufficient to carry out a reliable evaluation that can be extended to the whole population.

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