



Use of TECASORB dressing in a patient with chronic venous insufficiency (CVI) with subsequent formation of a leg ulcer on the anterior surface of the left lower extremity

*Each patient must be educated about his/her treatment and must be properly instructed in at least the following points:*

- ▶ *What material is used in TECASORB*
- ▶ *What is the purpose of using this material*
- ▶ *How is this material used to treat different types of wounds*
- ▶ *How often does TECASORB dressing need to be changed*
- ▶ *If any black fibers remain in the wound or adjacent area, they should be carefully removed, but they are not dangerous and do not cause adverse skin reactions*

*The treatment material is shown at the beginning of the video:*

- *Gloves, gauze pads*
- *Various types of solutions used to clean the wound when changing the dressing (including iodine, which is however not used with TECASORB dressing)*
- *Debrisoft – a special product used for wound debridement (removal of debris and exudate from the wound as well as scales and keratoses from the surrounding skin)*
- *Indifferent ointments, such as zinc or camphor ointment, used to treat the adjacent area*
- *Hydrophilic dressing*
- *Elastic bandage used in compression therapy*
- *Instruments used to treat the adjacent area (if hyperkeratosis is present, e.g. in diabetic defects – malum perforans pedis) – scissors, tweezers, scalpel, disposable curette (used to remove scales and crusts around the defect that prevent healing)*

In this video, a patient with chronic venous insufficiency (CVI) with the subsequent formation of a leg ulcer (ulcus cruris) on the anterior surface of the left lower extremity is treated.

The previously applied dressing material is removed and the defects are covered with a gauze pad and a cleaning solution is sprayed on top. The gauze pad is left on the wound for about 5 to 10 minutes.

If infection is suspected, a sterile swab is taken from the defect for microbiological examination.

A thin layer of indifferent ointment (in this case camphor ointment) is applied to the wound area. The TECASORB dressing is then applied and the wound is covered with a hydrophilic dressing.

In patients with varicose veins and chronic venous insufficiency, a compression bandage is always applied at the end of the treatment - starting from the toes, through the heel and ankle towards the calf. Two bandages are commonly used on the calf. The patient can also use compression stockings.