

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 right 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 right lower extremity is treated. Before starting the therapy, the patient used a different treatment material without significant effect.

The previously applied dressing material is removed and the defect is washed directly with a cleaning solution (for large defects, it is also possible to use a shower and only then treat with a cleaning solution).

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.