Negative pressure wound therapy with instillation

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Record Status
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Citation

Authors' objectives
Chronic wounds account for an estimated $25 billion dollars in healthcare expenditures per year. Treatment of wounds depends upon the wound type and severity; however, it typically includes debridement (surgical, mechanical, enzymatic, or biological), cleansing, and frequent changes of moist dressings. Description of Technology: Negative pressure wound therapy (NPWT) involves the application of subatmospheric pressure to the surface of a chronic or acute wound. NPWT is thought to promote wound healing by providing a moist wound bed while removing wound fluid. NPWT with instillation (NPWTi) combines standard NPWT with timed, intermittent, delivery of a topical solution. The instillation of fluid helps to remove wound exudate, slough, and bacteria, which promotes a more rapid healing of the wound. NPWTi comprises the application of a foam dressing sealed with an adhesive film and connections for instillation and vacuum tubes. A solution is delivered to the foam dressing at preset intervals and may be allowed to dwell for a set amount of time. Subsequently, negative pressure is applied across the wound. The instillation and vacuum cycle is repeated every 2 to 4 hours. Treatment is discontinued once the wound is ready for primary closure or coverage with a graft or flap. Patient Population: NPWTi is indicated for patients with chronic, acute, traumatic, subacute, and dehisced wounds; partial-thickness burns; ulcers (such as diabetic, pressure, and venous insufficiency); flaps; and grafts. Clinical Alternatives: Alternatives to NPWTi include moist dressings, hyperbaric oxygen, topical adjuvants, bioengineered skin substitutes, biologic dressings, and skin grafting or flaps.

Final publication URL
The report may be purchased from: http://www.hayesinc.com/hayes/crd/?crd=55066

Indexing Status
Subject indexing assigned by CRD

MeSH
Humans; Debridement; Negative-Pressure Wound Therapy; Wound Infection

Language Published
English

Country of organisation
United States

English summary
An English language summary is available.

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AccessionNumber
32017000076
Date abstract record published
06/01/2017