

The Use of a Silver Oxynitrate Wound Dressing in the Treatment of Chronic Wounds: A Feasibility Study

Jimena Rodriguez-Arguello BHSc¹, Karin Lienhard PhD¹, Rose Geransar PhD¹, Ranjani Somayaji MD², Laurie Parsons MD², John Conly MD^{1,2,3,4,5}, Chester Ho MD^{1,6}

- ¹W21C Research and Innovation Centre, Cumming School of Medicine, University of Calgary, Calgary, Alberta, Canada.
- ²Department of Medicine, Cumming School of Medicine, University of Calgary and Alberta Health Services, Calgary, Alberta, Canada.
- ³O'Brien Institute for Public Health, Cumming School of Medicine, University of Calgary, Calgary, Alberta, Canada.
- ⁴Infection Prevention and Control, Alberta Health Services, Calgary, Alberta, Canada.
- ⁵Snyder Institute for Chronic Diseases, University of Calgary, Calgary, Alberta, Canada.
- ⁶Division of Physical Medicine & Rehabilitation, Department of Medicine, University of Alberta, Edmonton, Alberta, Canada.

BACKGROUND INFORMATION

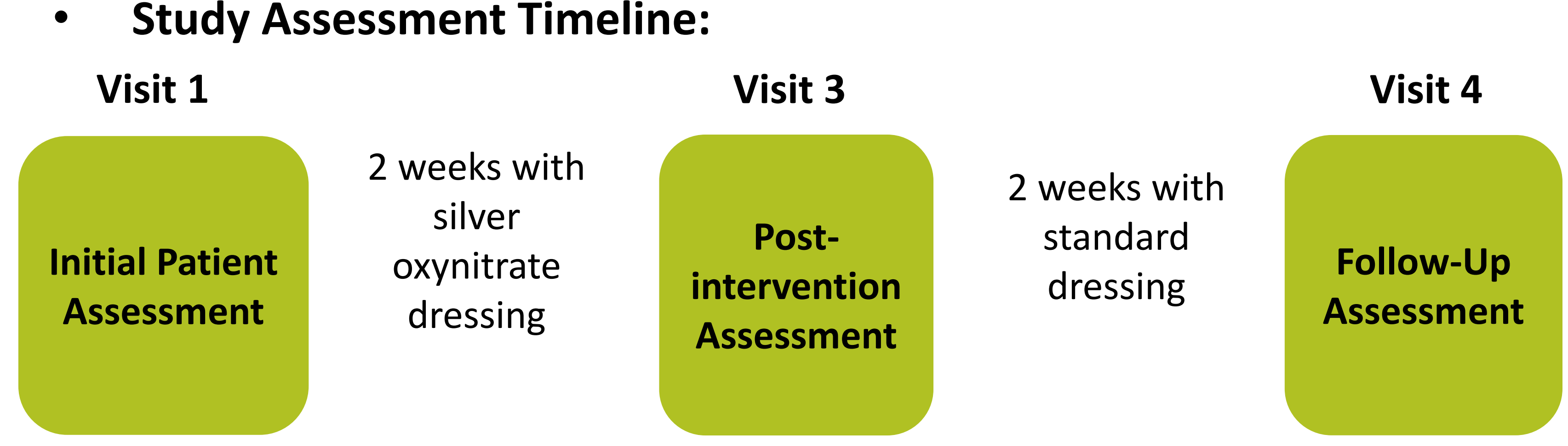
- Infection Control and Wound Healing Promotion:** Silver-impregnated dressings are frequently used for the management of chronic wounds¹.
- Enhanced *in vitro* antimicrobial and anti-biofilm capacities:** Silver-oxynitrate is a novel silver compound with higher oxidation states, showing stronger antimicrobial capacities over conventional silver compounds².
- Silver oxynitrate dressings could be of further benefit as they **eradicate biofilms at lower silver concentrations** than other silver compounds³.

OBJECTIVES

- A feasibility pilot study was developed to evaluate the effectiveness of a silver oxynitrate wound dressings in chronic wounds of various etiologies within the Calgary Zone pertaining to Alberta Health Services, Canada.

METHODS

- Study Population:** Total of 23 patients presenting chronic wounds. Females: 12; Males: 11, Average Age: 66.1 ± 13.8 years (mean±SD)
- Definition of Chronic Wound:** Wound that has been present for >6 weeks and has shown no progression in 2 weeks (length and width change ≤20%)
- Intervention:** Application of silver oxynitrate wound dressing for two weeks
- Outcome Measures of Interest:**
 - Wound Area Reduction:** Wound area assessment using 3D Imaging (Silhouette® Star 3D Imaging Camera, Aranz Medical Ltd).
 - BWAT Scores**
 - Pain:** Using a Visual Analogue Scale (VAS)
- Study Assessment Timeline:**



RESULTS

WOUND PAIN

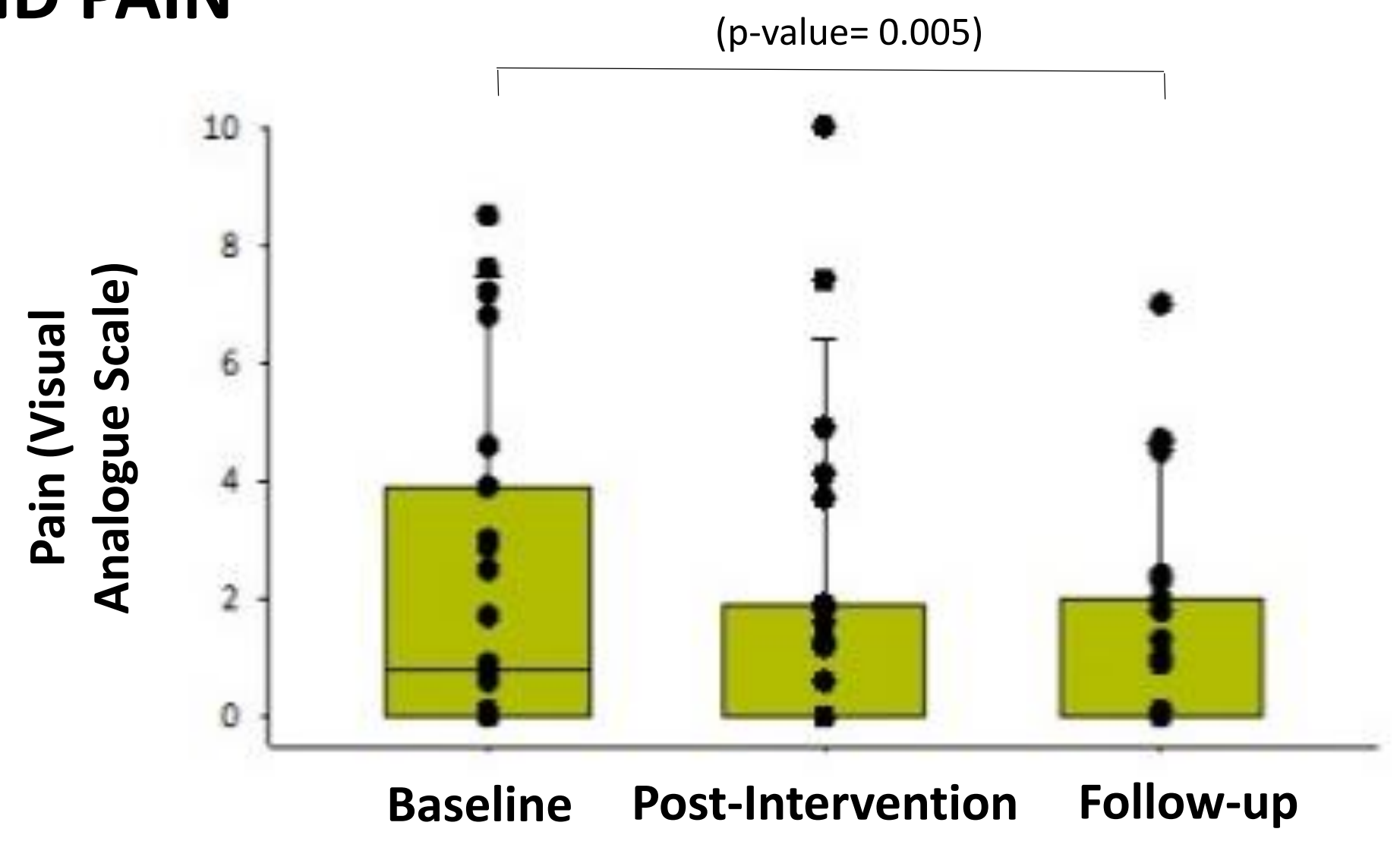


Figure 1. Box plot diagram for wound pain at baseline, post-intervention (Visit 3) and follow-up (Visit 4)

BWAT SCORES

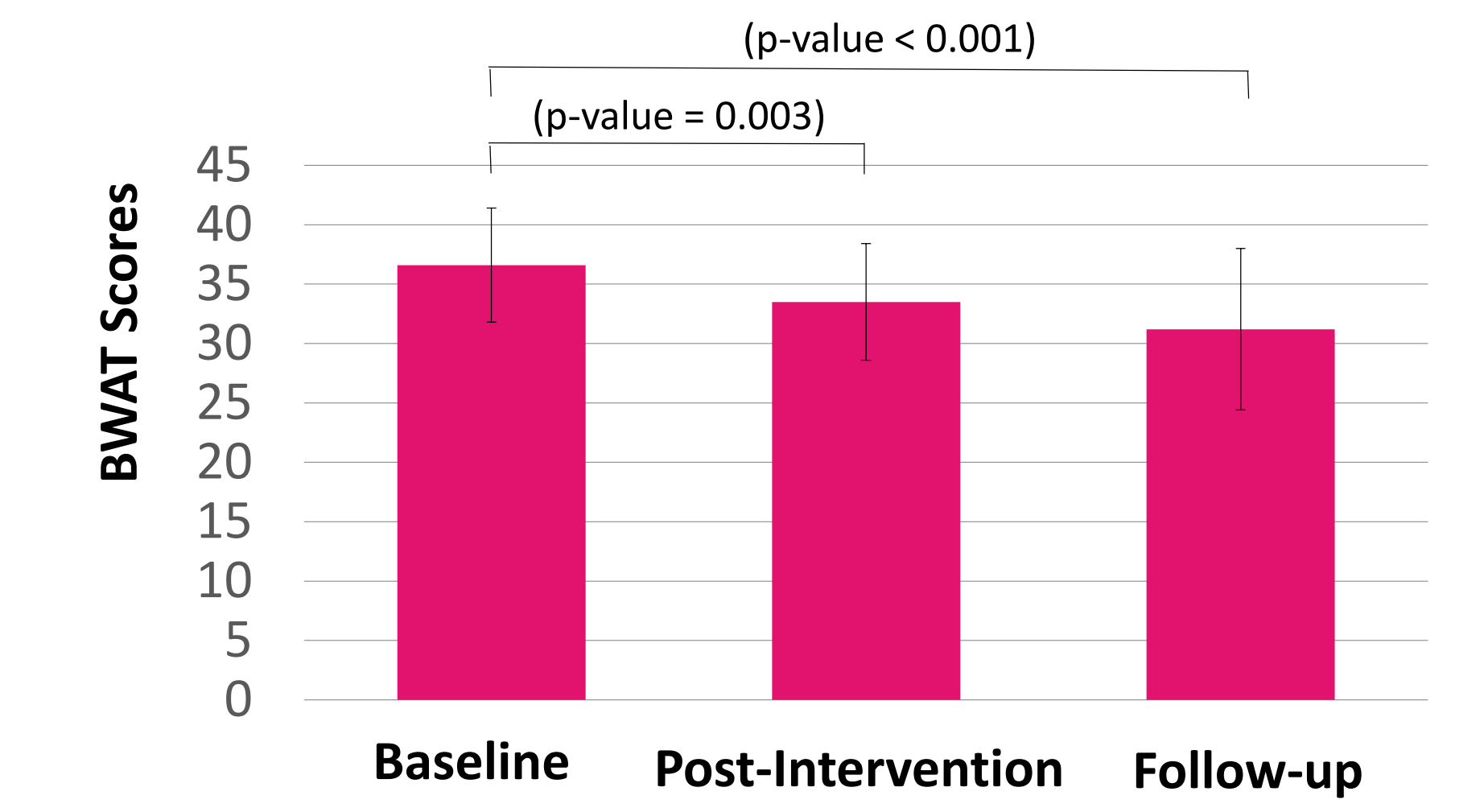


Figure 2. BWAT scores (mean and SD) at baseline, post-intervention (Visit 3) and follow-up (Visit 4)

WOUND AREA

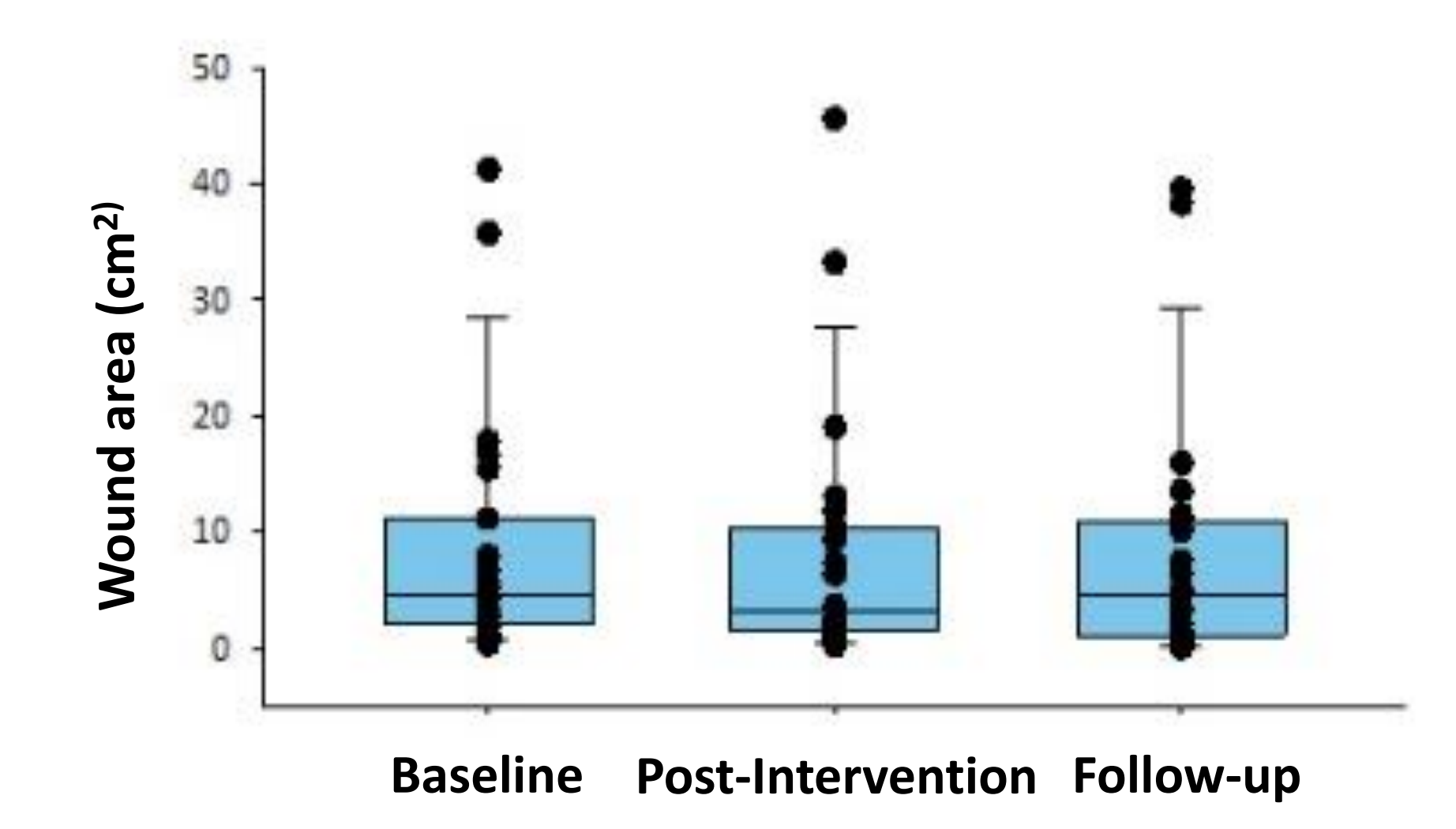


Figure 3. Box plot diagram for wound area at baseline, post-intervention (Visit 3) and follow-up (Visit 4).

WOUND AREA REDUCTION

Baseline to Post-Intervention (Visit 3): Decreased area by 11.9 ± 28.7%
Baseline to Follow-up (Visit 4): Decreased area by 16.9 ± 42.2%

- There were no significant differences in mean wound area at visit 3 (post-intervention) or at visit 4 (follow-up assessment) compared to baseline.
- 15 patients evidenced a non-significant decrease in wound area at visit 3, whereas 16 showed a non-significant decrease in wound area at visit 4.
- Significantly decreased BWAT scores were observed two-weeks post-intervention (p-value= 0.003) and at 4 weeks follow-up (p-value < 0.001) compared to baseline.
- The BWAT parameter for size was not responsible for changes in BWAT scores.
- Improved epithelialization, granulation tissue, necrotic tissue type and wound edges were observed at post-intervention visit in comparison to baseline.
- Reduced depth, wound edges, necrotic tissue amount and peripheral tissue edema was observed at follow-up visit in comparison to baseline. Improved necrotic tissue type, granulation and epithelization tissue was also observed.
- 17 patients evidenced improved BWAT scores at visit 3, whereas 18 showed improved BWAT scores at visit 4.
- Pain was significantly reduced at 4 weeks follow-up (p-value= 0.005) compared to baseline.
- 10 patients reported less wound pain at visit 3 (non-significant), whereas 14 reported significantly less wound pain at visit 4.

CONCLUSION

- The use of Silver oxynitrate dressings on patients with chronic wounds may improve healing progression as measured by BWAT and significantly reduce wound-related pain.
- Given that this was a feasibility pilot study, a larger scale study is warranted to obtain additional results.

REFERENCES

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