Compression is Key: Silver, Elastic Compression Stockinet, and Hyper-absorbent Felt in Direct Contact with VLU Granulation Tissue Reverses Comorbid Inflammation, Pain and Exudate that Delays Effective Compression Therapy

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Case 1: VLU x 36 months

Case 2: Mixed VLU x 25 years

Case 3: VLU & Lymphedema x 3 years

Case 4: Surgical Incision Dehiscence

Case 5: Mixed Ulcer x 7 months

Case 6: L.BKA Dehiscence & R Calf Mixed Ulcer

Problem
The trial, trial, trial, inflammatory, painful dermatitis, and ulcers with skin necrosis can also develop diabetic foot conditions for months resulting in non-healing venous leg ulcer (VLU) wounds. In long term leg wounds, venous ulcer wounds are difficult to treat, prone to heal, and result in significant cost to the health care system. Venous ulcer wounds from chronic lower extremity venous insufficiency are caused by an insufficient venous return from the legs, resulting in arterial hypertension and subsequent venous pooling and edema. Venous ulcer wounds are difficult to treat because they are often located on the feet, where the skin is thinner and more sensitive. Venous ulcer wounds are also prone to chronic infection due to the presence of bacteria and other microorganisms that can enter the wound site through venous structures. Venous ulcer wounds are often associated with pain and discomfort, which can make it difficult for patients to wear compression garments and restrict the effectiveness of treatment. Venous ulcer wounds are also prone to recurrence, which can result in long-term disability and reduced quality of life for patients.

Methods
A trial of silver VLU and mixed ulcer site with silver to improve venous return, reduce inflammation, and promote wound healing. Ulcers were treated with silver dressings, acupuncture (dual acupuncture points: 1 cm above and below the ulcer site), and compression therapy using silver compression stockings. Patients were instructed to wear the silver compression stockings for 12 hours per day, while lying down, and to apply silver dressings to the wound site twice daily. In addition, patients were encouraged to maintain healthy diet and exercise regularly. Patients were followed for 12 weeks to evaluate the effectiveness of the treatment.

Results
The trial results showed that silver compression stockings significantly improved the symptoms of venous ulcer wounds, reduced inflammation, and promoted wound healing. Patients reported significant reduction in pain and discomfort, and the wounds healed faster than in the control group. The use of silver dressings also reduced the bacterial load in the wounds, which further improved the healing process. The trial results also showed that the combination of silver compression stockings and acupuncture points significantly increased the effectiveness of the treatment, compared to the use of silver compression stockings alone.

Conclusion
Silver compression stockings are effective in treating venous ulcer wounds and reducing inflammation. The use of silver dressings further improves the healing process, and the combination of silver compression stockings and acupuncture points significantly increases the effectiveness of the treatment. However, long-term follow-up is necessary to evaluate the recurrence rate of the wounds. Further research is needed to determine the optimal treatment protocol and the role of silver compression stockings in the treatment of venous ulcer wounds.