

# Assessment and treatment of a pressure ulcer of the heel

## Case history

Following total hip replacement, this patient had developed a "black heel" It subsequently broke down and the patient was left with large amounts of non-viable tissue, impeding healing. He was taken to theatre for a radical debridement and his care was eventually passed on to the District Nurses.

## The wound

The wound was 3cm x 4cm and fairly round. A percentage of slough was present along with granulation and some epithelialisation (see figure 1). It was painful and gave the patient a lot of discomfort. The wound was exuding quite heavily (see figure 2).

## The first intervention

The first intervention was a Hydrocolloid dressing and Hydrocolloid gel. The issues were frequent (daily) dressing changes which were uncomfortable and there was odour upon dressing change.

## So, what next?

Primary aims were to reduce the number of dressing changes, reduce pain and increase quality of life, promote healing and reduce the odour.

## The second intervention

ALLEVYN® Heel and INTRASITE® Gel were applied. INTRASITE Gel was applied to deslough and provide a moist environment. ALLEVYN Heel was applied and secured with a retention bandage. Dressing changes gradually reduced from daily to every 3 - 4 days.

## So, what happened next?

It took over 6 months but the wound did heal (see figure 3). INTRASITE Gel was continued throughout the healing process. The patient found the dressing both comfortable and cushioning. The patient was able to mobilise with a stick.



Figure 1



Figure 2



Figure 3

**Wound Management**  
Smith & Nephew  
Medical Ltd  
101 Hessle Road  
Hull  
HU3 2BN  
England

[www.smith-nephew.com](http://www.smith-nephew.com)  
[www.allevyn.com](http://www.allevyn.com)

T 44 (0)1482 225181  
F 44 (0)1482 328326

500/4/Allevyn Case studies  
\*Trademarks of Smith & Nephew  
©Smith & Nephew 2005