Can patients who are enrolled into a multi-centred study demonstrate improved clinical outcomes and cost efficiency savings?

Introduction
The NHS is facing real challenges with demands for cost-efficiency savings of £15–20bn by 2014/15. The Quality, Innovation, Productivity and Prevention agenda (QIPP) is a large-scale transformational programme, aimed at improving quality and efficiency savings in the health service in the UK. Caterham First Community Health Care agreed to be part of a multi-centred cohort study examining the role of calcium alginate silver dressings (Sorbsan® Silver) between March and August 2012. This study incorporated 11 centres across the United Kingdom with a total of 48 patients.

Method
6 patients were enrolled as part of a multi-centred study; 4 women and 2 men with a mean age of 81.5. 4 dressing changes were monitored over a period of 5 months. All patients were reviewed by the district nurse team and tissue viability nurse. All patients had a history of leg ulcers, 3 with mixed aetiology, 1 with arterial disease and 2 with venous disease, that had been treated for more than 12 weeks. All patients presented with haemoserous, haemopurulent or colonised were deemed suitable for the calcium alginate silver dressing by the authors. Baseline observations included tissue type, surrounding skin condition, exudate, odour and pain. Dressing performance was evaluated as very good, fair or poor, for ease of use, adhesion to skin, durability (linked to wear time), fluid handling, conformity, patient comfort, skin stripping, leakage.

Results
5 patients demonstrated a marked improvement, particularly leg ulcer size and peri-wound skin condition. One patient was lost to follow up. Clinicians and patients rated the dressings as very good to good in both patient comfort and wear time.

Costs breakdown
When patients were referred to the specialist team, healing rates improved and cost efficiency savings were made. An in-depth analysis of patient ‘OH’ in this study revealed the cost of district nurse (DN) visits and dressings to cost £733.60 in one week. Evaluating the effectiveness of the proposed dressing regime reduced costs to £203 per week giving an overall saving of £530.36. The use of dressings listed (ref table), prior to the use of Sorbsan® Silver are approximated, as all were used, but length of time used was variable.

Conclusion
It is not uncommon for nurses to keep changing the dressing type frequently in the hope that the right combination will heal the wound. The challenge is that dressings do not heal wounds; they manage the environment they are capable of. Dressing selection is based on the ability of the nurse to assess the presenting tissue in the wound bed. Therefore in order for them to select an appropriate dressing, they need to have the knowledge and skills to make the appropriate choice. The constant demands on the tissue viability service at Caterham Dene makes it very difficult to devote time and effort into a major study. Being part of a larger evaluation made this exercise both practical for the staff and patients concerned. This study demonstrates that calcium alginate silver dressings have a role in the management of chronic conditions such a leg ulcers. The additional bonus was demonstrating to our senior management that cost efficiencies can be made when patients are referred to the specialist team.

References
3). Dowsett C 2012 Modernising leg ulcer services through preventing recurrence Wounds UK 2012, Vol 8, No 1