

# USE OF MONOFILAMENT FIBRE DEBRIDEMENT PAD FOR HYPERKERATOSIS IN THE COMMUNITY

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## Aim

82-year-old man with diabetes, congestive cardiac failure and mixed arterial vascular insufficiency. The patient had been treated in the home for diabetic health management and a chronic history of leg ulcers. On presentation, patient complained of itchy legs and odour from feet. Previous treatment was an elastic tubular bandage which was left on for 24 hours a day, 7 days a week. Patient was suffering from hyperkeratosis and there was lack of skin integrity care (Figure 1 - 4).

## Method

The patient changed community nursing care groups for better management and care.

A solution was required which would manage the hyperkeratosis, prevent further skin breakdown and prevent bacterial or fungal build up in the feet and legs. The solution had to be cost effective, gentle on skin and ensure quick, easy removal of excessive skin and debris.

A monofilament fibre debridement pad\* was chosen and used to clean, remove and descale the hyperkeratosis without damaging healthy skin.

One pad per leg was used with water to remove dead skin and hyperkeratosis (Figure 5 - 7).

## Results / Discussion:

Once dead skin and hyperkeratosis was removed patient was put on skin care regime to reduce the build up of excess skin and prevent further development of wounds.

A structured skin care regime is required for ongoing care and maintenance which includes cleansing, exfoliation and replenishing the skin barrier using emollients.

The management of Hyperkeratosis of the Lower Limb consensus document recommends the monofilament fibre debridement pad should be used as soon as there is evidence of plaque formation<sup>1</sup>.

Patient was satisfied with the care provided. After treatment with monofilament fibre debridement pad, there was visible improvement and reduction in hyperkeratosis, no itch and reduction in odour.

## Conclusion:

Hyperkeratosis of the lower limb is a common skin condition that typically affects patients with chronic venous insufficiency.

Patients are often embarrassed by the appearance of their skin, the hyperkeratotic scales and the unpleasant odour.

The monofilament fibre debridement pad can be used by all healthcare professionals working in the community, and by patients. It's effectiveness and ease of use may encourage patients or carers to take an active role in their care.



**Figure 1, 2 & 3:** Feet on presentation

**Figure 4:** Leg on presentation (note the dry epithelial dead layer mimicking the tubular bandage weave and elastic banding)



**Figure 5 & 6:** Use of monofilament debridement pad



**Figure 7:** Use of monofilament debridement pad

## References

1. Management of hyperkeratosis of the lower limb: Consensus recommendations. London: Wounds UK, 2015 11(4).



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