

Faster wound healing with topical negative pressure therapy in difficult to heal wounds

Submission date
31/05/2009

Recruitment status
No longer recruiting

☐ Prospectively registered

☐ Protocol

Registration date
24/07/2009

Overall study status
Completed

☐ Statistical analysis plan

☐ Results

Last Edited
24/07/2009

Condition category
Injury, Occupational Diseases, Poisoning

☐ Individual participant data

☐ Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

Contact name
Dr Erik de Laat

Contact details
Radboud University Nijmegen Medical Centre
926 Plastic Surgery
PO Box 9101
Nijmegen
Netherlands
6500 HB
+31 (0)6 533 55 278
e.delaat@plchir.umcn.nl

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
2003-263 CMO

Study information

Scientific Title

Faster wound healing with topical negative pressure therapy in difficult to heal wounds: a prospective randomised controlled trial

Study objectives

This study aimed to investigate the effectiveness and safety of topical negative pressure therapy, compared with conventional dressing therapy in patients with difficult to heal wounds of various aetiologies and particularly in spinal cord injury (SCI) patients with pressure ulcers.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Committee on Research Involving Human Subjects, Arnhem Nijmegen approved on the 24th January 2003 (ref: 2003-263 CMO)

Study design

Prospective stratified randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Difficult to heal wounds of various aetiologies

Interventions

Patients randomly assigned to topical negative pressure therapy received a treatment with the VAC-system™ (Vacuum-Assisted Closure; KCI USA, San Antonio, TX, USA). According to manufacturer's instructions for use, the foam dressings and the TRAC Pad® were changed three times a week (Monday morning, Wednesday and Friday in the afternoon). The fluid connection system was changed at least once a week. Patients randomly assigned to the control group received treatment with a sodium hypochlorite 0.25% solution. This wet-to-moist dressing was changed two to three times a day, depending on the wound debris.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Time to 50% wound volume reduction, with a maximum follow-up time of six weeks. This point was determined by measuring the difference between the weekly measured wound volume and the initial wound volume before treatment.

Secondary outcome measures

1. Wound healing failure rates, defined as any deterioration of the wound that necessitated changing the treatment protocol to which patient was assigned
2. Any adverse event, defined as any unfavourable and unintended diagnosis, symptom, sign, syndrome, or disease that either arose during the study, or seemed to deteriorate, if present at baseline

Wound healing failure and adverse events were only diagnosed as such after confirmation by an independent physician.

Overall study start date

01/03/2003

Completion date

01/03/2005

Eligibility

Key inclusion criteria

1. Aged greater than or equal to 18 years, either sex
2. Difficult to heal surgical wounds (i.e. dehiscent abdominal wounds, complex pilonidal sinus, infected wounds and pressure ulcers)
3. Paraplegic and tetraplegic patients with pressure ulcers grade IV according to the European Pressure Ulcer Advisory Panel grading system

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

24

Key exclusion criteria

1. Untreated osteomyelitis
2. A life expectation less than one year
3. Radiation or chemical exposure
4. Pregnant or lactating females
5. Not able to comply to one of the interventions
6. Treated with one of the study treatments in the past 30 days

Date of first enrolment

01/03/2003

Date of final enrolment

01/03/2005

Locations**Countries of recruitment**

Netherlands

Study participating centre

Radboud University Nijmegen Medical Centre

Nijmegen

Netherlands

6500 HB

Sponsor information**Organisation**

Radboud University Nijmegen Medical Centre (Netherlands)

Sponsor details

690 Department of Surgery

PO Box 9101

Nijmegen

Netherlands

6500 HB

+31 (0)2 436 16 421

H.vanGoor@CHIR.umcn.nl

Sponsor type

Hospital/treatment centre

Website

http://www.umcn.nl/scientist/afdelingen/heelkunde?actieve_tab=scientist

ROR

<https://ror.org/05wg1m734>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Radboud University Nijmegen Medical Centre (Netherlands)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration