Background: Our purpose was to evaluate clinically a new topical hydrogel that shows promise for chronic wound healing. The evaluation was focused on a patient cohort who had concordance issues with standard dressing and compression therapy, and had been difficult to engage with in standard care regimes. Compression therapy is considered the most important element of treating patients with venous leg ulceration (Fletcher et al, 1997). Pain, aesthetics, physical elements and patient understanding can affect concordance with traditional compression therapy. The highest achievements in health-related quality of life occur in patients who heal, but it is crucial for professionals to recognise that quality of life can also be improved in those who cannot adhere to standard regimes.

The product, branded Woulgan, is CE marked and approved for clinical use. Woulgan is an aqueous based hydrogel that contains 1,3/1,6 soluble beta glucan that is registered for a broad range of wound healing indications. The primary outcome was to evaluate effectiveness on the wound closing performance of the topical hydrogel when used on chronic wounds. Secondary outcomes included patient satisfaction and concordance with the treatment regime, and patient reported outcomes of product use and wound care experience.

Methods: 16 patients were included. Patient selection criteria defined was for patients with leg ulcers that were termed as chronic, i.e. present for longer than 6 weeks, where concordance with compression therapy was low. Exclusions included children, patients with pregnancy and patients with known sensitivities to soluble beta glucan. Wounds were prepared to the same protocol as the evaluation centre and application was under the directions of the product insert leaflet. The wound was dressed using the appropriate dressing protocol as determined by the evaluation centre’s policies, procedures and wound care formulary. The Woulgan Biogel was applied at each visit of the patient, up to 3 applications per week. Following initial wound assessment, follow up assessments included changes to wound bed, photography, clinician evaluation of ease of product use, pain and comfort assessments and an evaluation of the wound progress. Patient opinion was also evaluated, and concordance with the regime was assessed at evaluations. Evaluations were collected at week 4, week 8 and on conclusion at week 12.

Results:
- All patients demonstrated improvement or significant improvement at week 4 of evaluation of product use, in relation to appearance of the wound bed. Patients at week 12 had significant wound improvement, although improvement had slowed after the initial 4 weeks
- Patients reported improved outcomes in relation to pain and comfort from previous therapies, and levels of exudate were lowered.
- Patient concordance with the treatment regime was significantly high

Discussion: Results confirm the suitability of the topical hydrogel in patients with chronic wounds and concordance issues with standard therapy regimes. Topical hydrogel may offer cost benefits in the care of chronic wounds in patients who are unable to concord with standard therapy, by improving the wound healing and reducing the need for costly extended periods of care. The alternative treatment regime offers a solution which satisfies the patient’s goal of treatment therapy, without impacting significantly upon the negative aspects of quality of life. Patients who feel their personal needs have been addressed are more likely to engage in altered health behaviours and future prevention strategies, reducing the financial burden of chronic wound management in non-concordant patients.

Conclusion: The effectiveness of the topical hydrogel for chronic wounds make it an effective choice for patients with issues around compliance with standard therapy.