



Clinician: Amy Dickinson, Specialist Tissue Viability Nurse. Patient (1096255 se): 69 year old female infected supapubic catheter site.



Day 0:

69 year old immobile female had a supapubic catheter site (to drain urine from the bladder) which had become heavily infected heavily infected with *Staphylococcus aureus*. The catheter line had been in for 6 weeks. On removal of the dressing a large amount of pus drained out of the wound. The wound was smelly and was dressed with 1 sachet of Surgihoney



Day 1:

The wound continued to ooze pus. However, the wound was much cleaner and less smelly.

'I am dressing it with Surgihoney, applied to Aquacel ribbon, then another piece of Aquacel and Aquacel foam. I will review again tomorrow'



Day 2



Day 14

Day 2:

Wound improved and much cleaner with the level of pus reducing. The patient reported to be experiencing less pain.

Day 5 to 14:

The wound continued to show improvement. By day 5 CRP (C Reactive Protein used as an indication of inflammation). The swab results showed commensals +++ (normally harmless bacteria) and yeast +++. The MRSA infection was eliminated. There was no odour.

Surgihoney continued to be applied on days 5, 6, 7, 9, 12, 14.

By day 7, the swab showed commensals and yeast infection eliminated. The ongoing improvement in the wound led to the wound being dressed every 48 hours although if necessary daily treatment would have been resumed.

By day 9, wound had reduced in size with new epithelial to the wound edge. There was slight bleeding but pain had been eliminated.

By day 12, the hole where the supapubic catheter entered had closed. The wound was clean and healthy. Dressing changes to be reduced to twice weekly.

By day 14, a complicated, heavily MRSA infected wound had healed significantly enough for the patient to be discharged home.