Cancer Wound: Principles and Innovation

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Cancer Wound

- Types of cancer wounds in outpatient setting
- Principles in managing cancer wound
- Use of wound modalities (innovation) in management of cancer wounds through case study
Cancer Wound

- **Cancer Wound Sites – summary of data from two surveys (Naylor, 2000)**

<table>
<thead>
<tr>
<th>SITE</th>
<th>Thomas 1992</th>
<th>Wilkes el al 2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>62</td>
<td>39</td>
</tr>
<tr>
<td>Head/Neck</td>
<td>24</td>
<td>33.8</td>
</tr>
<tr>
<td>Back/trunk/abdomen</td>
<td>3</td>
<td>1.0</td>
</tr>
<tr>
<td>Groin/axilla</td>
<td>3</td>
<td>7.4</td>
</tr>
<tr>
<td>Genital</td>
<td>3</td>
<td>5.1</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>3.7</td>
</tr>
</tbody>
</table>
Cancer Wound

- Surgical
- Palliative
- Malignant
Cancer Wound

Principles
Cancer Wound

ASSESSMENT /DIAGNOSIS
- Complete History
- Physical Status
- Nutritional Assessment
- Investigations/Diagnostic Tests
- Wound Assessment

TREAT THE CAUSE
- Surgery
- Chemotherapy
- Radiotherapy
- Hormonal Blocking Agents

TREAT THE PATIENT/FAMILY CONCERNS
- Pain Management
- Address Psychological Issues and coping strategies

TREAT THE WOUND
- Prevent/Treat Infection
- Control Bleeding
- Manage Exudates
- Control Odour
- Preserve Surrounding Wound Skin Integrity
- Dressing Stabilization
## Cancer Wound

### Nutrition in wound healing

<table>
<thead>
<tr>
<th>Nutrient</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carbohydrates</td>
<td>Energy for leucocyte, macrophage and fibroblast function</td>
</tr>
<tr>
<td>Protein</td>
<td>Immune response, phagocytosis, angiogenesis, fibroblast proliferation,</td>
</tr>
<tr>
<td></td>
<td>collagen synthesis, wound remodeling</td>
</tr>
<tr>
<td>Fats</td>
<td>Provision of energy, formation of cells</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>Collagen synthesis and cross-linking, tensile strength of the wound</td>
</tr>
<tr>
<td>Vitamin B complex</td>
<td>Collagen synthesis, wound tensile strength, neutrophil function,</td>
</tr>
<tr>
<td></td>
<td>macrophage migration, immune response</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>Appears to reduce tissue damage from free radical formation</td>
</tr>
<tr>
<td>Vitamin E</td>
<td>Collagen synthesis, leucocyte formation</td>
</tr>
<tr>
<td>Copper</td>
<td>Collagen synthesis, oxygen delivery</td>
</tr>
<tr>
<td>Iron</td>
<td>Increase collagen strength, enhance cell proliferation, increase epithelisation</td>
</tr>
<tr>
<td>Zinc</td>
<td></td>
</tr>
</tbody>
</table>
Cancer Wound

- Sinus/undermining
- Anatomical location
- Bleeding
- Frequency of dressing change
- Condition of the wound bed
- Comfort of The dressing
- Condition of the surrounding skin
- Exudate (Fluid) management
- Malodour
- Pain (dressing or Wound)
- Rashes
- Infection
- Necrotic tissue

Wound Assessment
Cancer Wound

**ASSESSMENT /DIAGNOSIS**
- Complete History
- Physical Status
- Nutritional Assessment
- Investigations/Diagnostic Tests
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**TREAT THE CAUSE**
- Surgery
- Chemotherapy
- Radiotherapy

**TREAT THE WOUND**
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**TREAT PATIENT/FAMILY CONCERNS**
- Pain Management
- Address Psychological Issues and Coping Strategies
Cancer Wound

- Surgery
  - Resection of the tumour

- Chemotherapy
  - Neoadjuvant or adjuvant

- Radiotherapy
  - Shrink the tumour
  - symptom management
Cancer Wound

ASSESSMENT /DIAGNOSIS
- Complete History
- Physical Status
- Psychosocial and Quality of Life Concerns
  - Nutritional Assessment
  - Investigations/Diagnostic Tests
  - Wound Assessment

TREAT THE CAUSE
- Surgery
- Chemotherapy
- Radiotherapy

TREAT THE WOUND
- Prevent/Treat Infection
  - Control Bleeding
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TREAT PATIENT/FAMILY CONCERNS
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Cancer Wound

Pain Management

Disease or Dressing???

(WHO, 2012)
Pain when changing dressing

Does the patient experience pain during or after dressing-related procedures?

Quality:
Describe the pain the last time your dressing was removed

Location:
Where was the pain? Was it limited to the immediate area of the wound or did you feel it in the surrounding area?

Triggers:
What part of the procedure was most painful, eg dressing removal, cleansing, dressing application, having the wound exposed?

Reducers:
What helped to reduce the pain, eg time out, slow removal of dressing, removing the dressing yourself etc?

Timing:
How long did it take for pain to resolve after the procedure?

(WUWHS, 2004)
Cancer Wound

Psychosocial impact

- Communication difficulties
- Denial
- Depression
- Embarrassment
- Fear
- Self respect/self-esteem
- Shame
- Social isolation
- Disgust
- Guilt

Alexander, S (2009)
Cancer Wound

Innovation!!!!!
Cancer Wound

ASSESSMENT /DIAGNOSIS
- Complete History
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TREAT THE CAUSE
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Case study
Cancer Wound

- Prevent/Treat Infection
- Preserve Surrounding skin integrity
- Manage exudates

- 7cm tunneling at 2 o’clock
- 5cm undermining from 5 o’clock to 7 o’clock
Cancer Wound

Preserve Surrounding skin integrity
Cancer Wound

- Dressing stabilization
- Manage exudates
- Preserve surrounding skin integrity
- Prevent/Treat Infection
- Control Bleeding
- Control Odour
Cancer Wound

- Prevent/Treat Infection
- Manage Exudates
- Dressing stabilization
- Preserve Surrounding skin integrity
Cancer Wound

Prevent/Treat Infection

Control bleed
Cancer Wound

Management of exudate

Control odour

Tea bags for odour article in singapore.pdf
Cancer Wound

Preserve surrounding skin integrity

Aesthetic Dressing Stabilization

Tubifast.ppt

Cutting and application guide
Cancer Wound

References:


World Health Organization,(2012). WHO’s Pain Relief Ladder
Outpatient Stoma and Wound Care Team
Thank you for your attention