



# Sharing the care of your Leg Wound



## Simpler Wound Management, Without Compromise

# Effectively using Flaminal® Hydro and Forte

You have been prescribed Flaminal® Hydro or Forte by your healthcare professional for use at home. As part of your shared care pathway and wound management plan follow these guidelines for use.



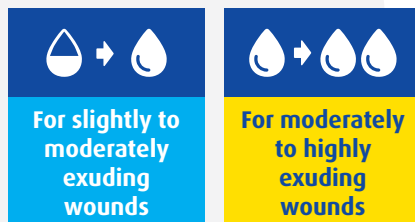
## BENEFITS

- Flaminal® Hydro / Forte is safe for the skin and wound tissue<sup>1,6,7</sup>
- Helps to keep your wound clean<sup>2</sup>
- Offers antimicrobial protection<sup>1,3</sup>
- Helps to support wound healing<sup>4</sup>
- Keeps your wound moist and in the right healing conditions<sup>2</sup>
- Reduces wound odour caused by bacteria<sup>4,6,7</sup>
- Protects the edges of your wound<sup>5</sup>



## CONTRAINDICATIONS

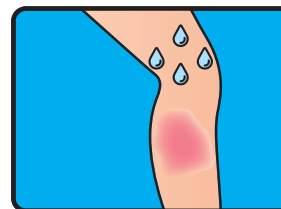
- Do not use if you have a known allergy to one of the components
- Do not apply to eyelids or in the eye. Should it come into contact with an eye, rinse the eye thoroughly with running water and consult a physician.



\*Exuding wounds are leaky/oozing wounds

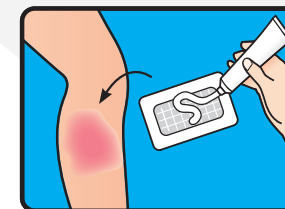


# How to apply Flaminal® Hydro and Forte to your wound



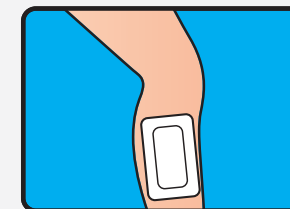
## STEP 1 Cleanse

- Please ensure you **wash your hands** thoroughly before and after application of Flaminal® Hydro / Forte.
- **Cleanse your wound with clean water** or a specific wound cleansing product if advised by your healthcare professional.
- If you find you have **Flaminal® Hydro / Forte** from previous applications remaining on or in the wound that does not rinse off easily then this can be safely left in place.



## STEP 2 Apply

- After cleaning your wound, **apply Flaminal® Hydro / Forte with a sufficiently thick layer of approx. 0.5cm** (the thickness of a £1 coin).
- Flaminal® can be applied directly on to the dressing and then placed on to the wound. (Alternatively use the application techniques recommended by your healthcare professional.)
- Try to avoid the opening of the tube or tube applicator coming in to direct contact with the wound.



## STEP 3 Cover

- **Cover your wound with an appropriate dressing** as advised by your healthcare professional.
  - The dressing type you use will depend on the condition of your wound, is it wet or dry?
    - For wet wounds use a non-stick absorbent dressing.
    - For drier wounds use a non stick dressing. If your wound starts to become wet or your dressing starts to leak after 24 hours use a non-stick absorbent dressing.
- **Change your dressing every 1-4 days** or when excessively leaking as advised by your healthcare professional. See note and instructions for use.

## Please note:

In the first few days of treatment you may need to change your dressing more often, every 1 - 2 days (the dressing can remain in place as long as the gel structure is intact). As your wound improves you can reduce dressing changes to every 3 - 4 days as recommended by your healthcare professional.

## Looking after yourself during treatment<sup>8</sup>



Try to keep active by walking or moving your legs and feet regularly to activate the foot and calf muscles and improve the circulation. Chair based exercise is suitable if you cannot stand.



Whenever you're sitting or lying down, keep your affected leg elevated. Ensure heels are protected from pressure forces.



Follow the NHS guidance of maintaining a healthy weight through a well balanced diet and exercise.



Smoking is proven to affect the circulation and delay wound healing. Contact your local NHS professionals for advice on smoking cessation services.



Protect your legs and feet for further injury. A good daily skin care regime will help keep your skin in good condition. Wear comfortable, well-fitting footwear.



### THINGS TO LOOK OUT FOR

**If you see any of these changes contact your healthcare professional for advice and support:**

- Skin around the wound is red, painful, swollen, warm to touch
- Increase in leakage from the wound
- Bleeding from the wound
- Unpleasant smell
- Wound increasing in size
- Increased pain
- Feeling unwell
- New wounds to the lower leg, Wounds to the foot

## Thoughts about your leg ulcer

Has there been any changes to your lifestyle, health or well-being this week? Or any issues relating to your wound specifically that has affected the care and management of it?

In your opinion do you feel your wound is improving, getting worse or staying the same? Describe your thoughts and discuss with your healthcare professional.

Additional thoughts and reflections.



**References;**

1. De Smet, K. et al. Pre-clinical evaluation of a new antimicrobial enzyme for the control of wound bioburden. *Wounds*. 2009;21:65-73
2. White, R. Flaminal® a novel approach to wound bioburden. *Wounds UK*. 2006;2: 64-69
3. Cooper, RA. Inhibition of biofilms by glucose oxidase, lactoperoxidase and guaiacol: the active antibacterial component in an enzyme algino-gel. *Int Wound J*. 2013;10:630-637
4. Jones & Oates (2018) TIME to assess wounds – a clinical evaluation of Flaminal. *Wounds UK Vol 14 No 3* pages 6-69
5. Durante CM. An open label non-comparative case series on the efficacy of an enzyme alginogel. *Journal of wound care*. 2012;21(1):22, 4-8
6. Flaminal® Hydro, Instructions For Use
7. Flaminal® Forte, Instructions For Use
8. NHS Leg Ulcer Treatment <https://www.nhs.uk/conditions/leg-ulcer/treatment/>