Flaminal®

Sharing the Care of Your Pressure Ulcer

Simpler wound management, without compromise

CE 0344

Correctly 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

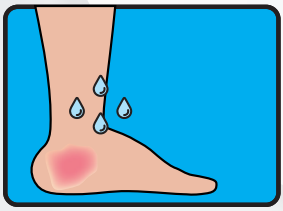
- Flaminal® Hydro / Forte is safe for the skin and wound tissue[1,6,7]
- Helps to keep your wound clean[2]
- Offers antimicrobial protection[1,3]
- Helps to support wound healing[4]
- Keeps your wound moist and in the right healing conditions[2]
- Reduces wound odour caused by bacteria[4,6,7]
- Protects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

*Exuding wounds are leaky/ oozing wounds

Contraindications

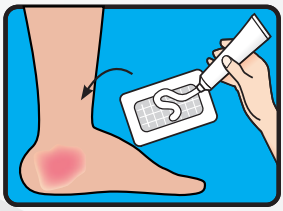
- Do not use if you have a known allergy to one of the components
- Do not apply to eyelids or in the eye. Should it come into contact with an eye, rinse the eye thoroughly with running water and consult a physician
- If you are treated for wounds which might reach the level of or exposed bones and joints, on the FIRST use, you should be under observation for at least 30 minutes after the administration of Flaminal® (Hydro or Forte)

How to apply Flaminal®



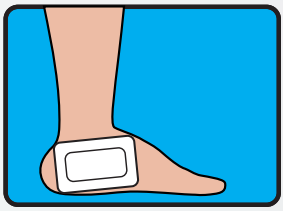
STEP 1
Cleanse

- 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
- 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

- Apply Flaminal® Hydro / Forte with a sufficiently thick layer of approx. 0.5cm (the thickness of a £1 coin)
- Flaminal® can be applied in the following ways, e.g. directly from the tube, directly on the dressing first, with a spatula, with a nozzle or with a syringe
- 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 will depend on the condition of your wound, is it wet or drier?

  For wet wounds use absorbent non-adherent dressing fixed by a non-adherent bandage or by a hypoallergenic, adhesive tape

  For drier wounds use transparent film or non-adherent dressing fixed by a non-adherent bandage. If your wound starts to become wet or your dressing starts to leak after 24 hours use a non-stick absorbent

- **Change your dressing every 1-4 days** or when excessively leaking as advised by your healthcare professional. See note

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[8]

Here are some things you or your care team can do to reduce the risk of getting a pressure ulcer. If you are unable to do any of these thing yourself, a carer or family member can help you[8]

These include:

- Regularly changing your position
- Regularly check the skin especially over a bone or under a medical device (see below), keeping dry skin hydrated and protected at all times (e.g. emollients or barrier products)
- Having a healthy, balanced diet that contains enough protein and a good variety of vitamins and minerals is key to maintaining a good level of skin health and hydration
- Stopping smoking – smoking makes you more likely to get pressure

Checking your skin for early signs of a pressure ulcer:

- Part of the skin could be discoloured – people with pale skin tend to get red patches, while people with dark skin tend to get purple or blue patches[8]
- Localised swelling or change in temperature- check if the skin feels cold or hot[11]
- In lighter skin tones- discoloured patches not turning white when pressed. In darker skin tones the colour may just differ from the surrounding area [12]
- A patch of skin that feels warm, spongy or hard[8]
- New pain, discomfort or itchiness in an area that may have been subjected to pressure, friction or shear[8,9,11]
- Patches of skin over bony areas which look bruised[9]

TIP: If you have a darker skin tone, check the skin in natural light as fluorescent light can cast a blue tone on the skin[10] and moisten the skin with tap water to rehydrate to improve inspection[10]

**** If you /your carer see any signs of pressure damage seek help from your health care professional asap**

Sharing your thoughts

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.

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

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My Wound Care Plan

Location of wound: _____
I am cleaning my wound with: _____
I am using: Flaminal® Hydro/Flaminal® Forte
I am covering with: _____
My dressing is changed every ___days
I need help with: _____
to reduce my risk of further pressure damage

Questions to ask my health care professional at next appointment

References

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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/
9. Shropshire community health Pressure Ulcer Prevention and management- Policies, Procedures, Guidelines and Protocols https://www.shropscommunityhealth.nhs.uk/content/doclib/12250.pdf (accessed June 2022)
10. Joyce Black & Abigail Simende (2020) Ten top tips: assessing darkly pigmented skin Wounds International 2020. Vol 11, issue 3 page 8-11
11. Wounds UK (2021) Best Practice Statement: Addressing skin tone bias in wound care: assessing signs ans symptoms in people with dark skin tones, Wounds UK, London. Available to download from: www.wounds-uk.com