

PMS/Clinical Review Portal case studies

The cases outlined in this document have been described by nursing staff and doctors using Principelle IF and/or MelMax as recorded in the Principelle Clinical Review Portal (CRP).

Case study #1 (JvS pat. 4, 82103.12.01PPIF)

(Feb, 2012) Patient with post traumatic ulcer on lower leg after fall on outside floor. General practitioner started treatment (17 days after trauma) with hirodoid ointment to treat suspected flebitis, but switched to MelMax 3 weeks after trauma. Dressing changed 1x per day. Wound bed: Yellow debris 80%, granulation tissue 20%. Level of wound exudate: 9/10

(March 2nd, 2012) The wound is completely healed using MelMax. The area of the wound is itching and therefore being treated with regular skincare product (Nivea) and (specifically) left uncovered. Wound bed: Yellow debris 10%, granulation tissue 100%. Level of wound exudate: 0/10.



Case study #2 (NvK, 82103.12.03MM)

(Oct 2012) Patient with diabetic ulcer for approximately 2 years before treatment with MelMax. Reporting woundcare nurse reported an 'incredible' result.

Case study #3 (JvS, 82103.12.05MM, CRP Ref. No. 031011000007)

(Oct 2011) Patient with decubitus category III, infected wound, started treatment with the following wound characteristics: Wound bed: Yellow debris 10%, granulation tissue 50%. Wound exudate 3/10. Pain 4/10. After 21 days: Yellow debris 0%, granulation tissue 100%. Wound exudate 0/10. Pain 2/10. Reported noted a much better patient acceptability and overall better scores than previous treatment. Wound healed completely despite peripheral vascular disease.

Case #6 (CRP Ref. No. 031011000004)

(Jan 2012) Patient with colonized decubitus category III wound reported after 6 days a cleaner wound with light inflammation reaction. Inflammation reaction was absent 9 days later and showed a healing trend through treatment (described and measured on granulated tissue-scale). Wound odour-, exudate- and pain level decreased all during treatment.