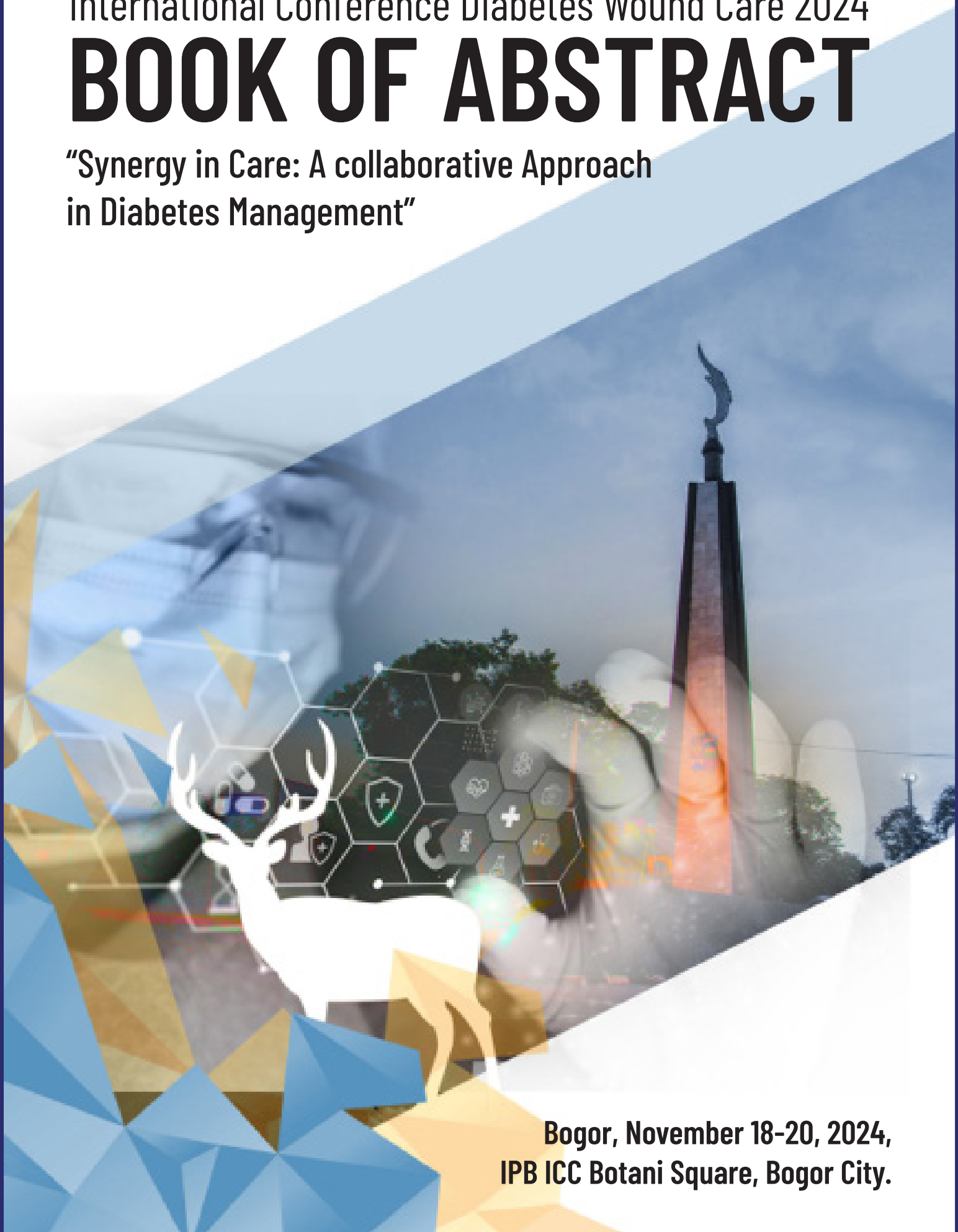
International Conference Diabetes Wound Care 2024

BOOK OF ABSTRACT

"Synergy in Care: A collaborative Approach in Diabetes Management"



Bogor, November 18-20, 2024,
IPB ICC Botani Square, Bogor City.

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Preference

On behalf of the organising committee, we are honoured to welcome you to this premier global event dedicated to advancing the understanding, innovation, and collaboration necessary to combat diabetes. The Diabetes Expo 2024 brings together healthcare professionals, researchers, policymakers, industry leaders, and patients from around the world to share insights, explore cutting-edge developments, and foster impactful partnerships in the prevention, management, and
care of diabetes.

A central theme of this year's event is the crucial role of diabetes education in preventing complications, particularly diabetic foot ulcers. Evidence shows that effective patient education and timely interventions are essential in reducing severe outcomes and enhancing the quality of life for individuals living with diabetes. This mission requires a collaborative effort involving healthcare providers, academic researchers, policymakers, and community stakeholders to ensure comprehensive and sustainable solutions.

We also emphasise the essential role of government support in shaping strong public health initiatives. By raising awareness, ensuring equitable access to resources, and promoting healthier
lifestyles, governments play a critical role in reducing the global burden of diabetes. Our diverse programme has been meticulously curated to deliver the latest advancements in diabetes research, clinical practice, and technological innovation. Attendees will be able to engage in high-impact presentations, participate in interactive workshops, and explore state-of-the-art products and solutions at the exhibitor booths. Beyond gaining knowledge, we encourage you to network with peers, exchange ideas, and establish enduring partnerships that will drive meaningful change well beyond the Expo.

We are deeply grateful for your participation in the Diabetes Expo 2024. Together, through interdisciplinary collaboration, evidence-based education, and unwavering commitment, we can create a healthier future and significantly advance the global fight against diabetes and its complications.

We wish you a stimulating and fruitful experience at this year's event.

Sincerely,

Widasari Sri Gitarja, S.Kp, MARS, MBA, RN, WOC(ET)N

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Founder, Owner, CEO & Nurse Consultant M&T Network Consultancy Services Sdn. Bhd.

Contributed to the publication of Stoma Sitingt and International Ostomy Guidelines by WCET Program Director for Malaysian Enterostomal Therapy Nursing Education Program recognised by the World Council of Enterostomal Therapist (WCET)

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RN Specialized Trainer (ICW/EWMA)
Enterastomal Therapist (WCET)
International Delegate (WCET)
Lecturer Centro Escolar University College of Nursing Mendiola, Manila

Department Head
The Stoma & Complex
Wound Center
The Medical City Hospital

Lecturer/Professor
Centro Escolar University
School of Nursing

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Dr. Jazly Bin Johari CCWC

Wound Educator, Wound Doctor, Wound Clinician, Malaysian Society Wound Care Professionals, Occupational Health Doctor, Medical Review Officer

Certified Clinical Wound Care Specialist
Wound Educator & Doctor, Hospital Shah Alam
Malaysia Society of Wound Care Professionals

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Widasari Sri Gitarja, S.Kep., MARS., M.M

Lecturer; Researcher; Author and Founder; Owner and CEO of WOCARE Center Indonesia Corporate University of WOCARE Indonesia; and Director Program of Indonesian ETNEP–WCET.

Certified on Wound Ostomy and Continent Clinical Nurse Sp. (WCETN – HongKong), Bachelor of Nursing (FIK-UI, Indonesia), Magister Business Administrationand Magister Health of Administration (FK-UPH, Indonesia). Student Program Doctoral in Research Management at University of Pelita Harapan UPH, Jakarta Indonesia, (2020 - now). Student Program Doctoral in Nursing Lincoln University and college,Kuala Lumpur 2021 – now).

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Prof. Dato'. Harikhrishna Nair, S.I.S KMN MD, FRCPI FCWCS

Head and Consultant, Wound Care Unit, Department of Medicine, Kuala Lumpur Hospital,
Professor Institute of Health Management, Vienna, Austria National Advisor Primary Health, Ministry of Health, Mala sia Chairman, Pressure Injury Prevention Committee, Kuala Lumpur Hospital, Malaysia

DMIJ S.I.S KMN
MD (UKM) FRCPI FRCPEDIN FCWCS FMSWCP PHD
OSH (NIOSH) OHD (DOSH) CMIA (MALL) Post Grad
Dip in Wound Healing & Tissue Repair (Cardiff, UK)
CHM (USA) ESWT (AUSTRIA, GERMANY), ICW (GER- MANY) Wound Care Unit, Kuala Lumpur Hospital

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Dosen Pendidik Klinis di Program Studi ilmu PenyakitDalam FKUI
Pakar dalam bidang Endokrin, Metabolik, dan Diabetes dan tercatat sebagai staf di Divisi Metabolik Endokrin Departemen Ilmu Penyakit Dalam FKUI-RSCMPakar

Division of Endocrinology and Metabolism,
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Jakarta- Indoesia

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CEO EDWCare Langa-Aceh

Member of WCET (World Council of Enterostomal Therapy) Member of Indonesian Nursing Association
National & International Speaker

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Pengurus Besar Ikatan Dokter Indonesia
Perkumpulan Obstetri dan Ginekologi Indonesia
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Wound Care Unit
Sarawak General Hospital
Kuching, Sarawak
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Guru Besar Ilmu Bedah Plastik Universitas Airlangga

Ketua Majelis Kolegium Kedokteran Indonesia (MKKI)
Ketua Kolegium Ilmu Bedah Plastik Rekonstruksi dan
Estetik Indonesia Ketua Skill Lab RSUD Dr. Soetomo Surabaya

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APADLP SILVER JUBILEE
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Prof. dr. Aziz Nather, PhD, MBBS, FRCS, FRCS, MD, FAMS

Director of the IAE/NUS Regional
Training Center fo Tissue Banking

Director of the NUS/NUH Bone Bank Fellow, Academy of Medicine (Singapore)
Jurong Medical Centre National university Health Services (Jurong Campus)
Singapore

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Dosen Fakultas Ilmu Keperawatan Universitas Indonesia
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Senior Lecturer, Faculty of NursingU Universitas Indonesia

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Wound Care Committee Member

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C.E.O Lotus Jaya Sejahtera - Wound, Homecare and Palliative Care Center, Yogyakarta

Clinical Nurse consultant -"UGM Hospital Editor-in Chief Journal of Indonesia Palliative and End of Life Care (JIPEC) Member of Asia Pacific Hospice and Palliative Network (APHN)

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Honorary Senior Lecturer, Cardiff Masters Programme MScWHTR, School of Medicine, Cardiff University
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Senior Research Associate, St John of God Health, Midland

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International Delegate AASTN of WCET

Stomal Therapy & Wound Clinical Nurse Consultant for more than 33 years CHU Siante-Justine, a mother- and-child University health centre in Montreal, Canada as an Enterostomal Therapy Nurse since 1985

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Hana Rizmadewi Agustina, BSN, MN, PhD

Assistant Professor of Nursing, Faculty of Nursing
Univeritas Padjadjaran Indonesia

Vice Chair of Continuing Education and Training Indonesia Oncology Nurses Association Head of Division of Education and Training Indonesia National Nurses Association (INNA) of West Java Province

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Ns. Jajang Rahmat Solihin, M.Kep., Sp.Kep.Kom

Ketua DPW PPNI DKI Jakarta

Ketua DPW PPNI DKI Jakarta 2015 – 2020 dan 2022 – 2027
Kepala Sub Bagian Tata Usaha Pusat Pelatihan Kesehatan Daerah (Puslatkesda) Provinsi DKI Jakarta (2019 – sekarang)

3 MINUTE EXAMINATION DIABETIC FOOT ULCER

Wiwin Rusdiyanti
[1]Salak Hospital Bogor, West Java
[1]Student Magister Nursing Muhammadiyah University Jakarta - Indonesia
Email rusdiyantiw@gmail.com

ABSTRACT

Diabetes is one of the complex chronic diseases and the cause of major lower extremity problems and foot ulcers, which have a major long-term impact on mortality and morbidity of patients reduce quality of life. Diabetic foot ulcers (DFUs) are complication and chronic complex wound and hard to heal category. DFUs an Infection, ulceration or destruction of tissues of the foot associated with neuropathy and/or peripheral artery disease of a person with (a history of) diabetes mellitus. Yearly incidence is estimated to be around 2% recurrence rates of 40% in the first year after healing and 65% in the first 3 years. Diabetes caused 6.7 million deaths in 2021 (IDF, 2021), now associated with an $825 billion in direct costs of care worldwide. DFUs is a serious threat that must be evaluated and treated immediately, the severity and prevention of DFUs are considered to interfere with activities, interventions that can be done for early detection through 3 minute Examination DFUs, the aim is to prevent early complications from DFUs so that can be avoided or delayed if treated appropriately at an early stage. Methode: reviewing from konsensus document World Union of Wound Healing Societies the 3-minute foot examination on DFUs : first minute "What to ask" , second minute "what to look for" and third minute "what to teach". Results: the review taken from the World Union of Wound Healing Societies consensus document certainly facilitates the examination process in cases of DFUs. Involvement in diabetic foot screening can help to reduce the number of times patients present emergency. Conclusion: by performing a 3-minute examination on DFUs, it can facilitate and speed up the screening process so as to improve the quality of life of patients who experience complications from diabetes.

Keywords: DFU, 3 minute examination, Quality of life

A NURSING EXPERIENCE IN CARING FOR DIABETIC FOOT ULCER USING MODERN DRESSING : SILVER ION AND CHLORHEXIDYNE, KAOLIN AND HYALURONIC ACID IN THE FORM OF SPRAY PACKAGING

Mohan Siddiq Dharma[1], Sunandar Fatwa[2], Dhika Putra Ramadhan[3]
[1,2,3]Puri Husada Tembilahan General Hospital

ABSTRACT

A debilitating complication of diabetes mellitus is diabetic ulcers, which leads to increased overall morbidity in patients. Patients with diabetes mellitus (type 1 or 2) have a total lifetime risk of a diabetic foot ulcer complication as high as 25%. Method this case study used experimental design, the patient is Mr F. with DFU. The spray nozzle was pointed about 10 centimetres from the wound and a thin layer of SiO2 - + Ag+ + Chlorhexidine + Hyaluronic acid was dispersed, covering the entire wound surface. Precaution was taken not to massage or rub the mixture into the wounds. The wounds were then covered with non-adhesive dressing. Result there was rapid wound healing evidenced by absence of infection, presence of granulation, reduction of wound size as well as reduction in pain within a periode of time 1 month. Conclusion the patented formulation of SiO2 - + Ag+ + chlorhexidine + hyaluronic acid was proven to be effective due to significant wound size reduction, absence of infection and presence of granulation as shown in current case series. The Kadermin spray exhibit broad spectrum antimicrobial properties of silver coupled with antiseptic properties of chlorhexidine, moisturising properties of hyaluronic acid as well as protective barrier of silicon dioxide.

Keywords: diabetes melitus, diabetic foot ulcer, kadermin spray

APPLICATION OF SILVERSIL CLOREX POWDER SPRAY ON DIABETIC WOUNDS COMPLICATED TUBERCULOSIS AT THE ASRI WOUND CARE CENTRE MEDAN

Muhammad Affan[1], Asrizal[2]
[1]Asri WOC Center Medan, [2]Fakultas Keperawatan USU
Email: mhdaffan62@gmail.com asrizal1510@gmail.com

ABSTRACT

Indonesia has the fifth highest prevalence of diabetes mellitus. In the world states that diabetes mellitus is a risk factor for active tuberculosis (TB). Currently, TB in Indonesia is the third highest in the world. The results of DM screening for TB complications show a high prevalence of around 5.4% - 44.0%. Asri Wound Care Centre Medan has treated patients with diabetic foot wounds complicated by TB in two cases and treated until recovery using Silversil Clorex Powder Spray (SCX) contain consisting of silicon dioxide optimized with silver ions and chlorhexidine primary dressing. Objective after applying the primary dressing SCX, it is expected to accelerate the healing process of diabetic foot ulcer with TB complications. Method wound care was performed using the concept of Moisture balanced using the principle of TIME Management. Wound care was performed twice a week. The first thing to do was to wash the wound with normal saline, then assess the wound using the Winner Scale. Perform mechanical debridement on necrotic wound tissue, then choose a wound dressing that is in accordance with the wound condition using primary dressing SCX and Polyurethane Foam as a secondary dressing. Next, provide fixation-compression therapy with 2 layers bandages (orthopedic wool and Cohesive bandage. Result after using the primary dressing SCX for 4 (four) treatments, the results of wound care were very significant where there was no strong wound odor compared to when not using the SCX application. Based on the results from the Winner Scale, by the 4th treatment, the wound had epithelized. Conclusion the application of primary dressing SCX in diabetic foot wound patients with TB complications is very good to use and can accelerate the healing process of diabetic foot wounds.

Keywords: diabetic foot ulcer, silversil clorex powder spray, tuberculosis

MANAGEMENT UNDERMAINING DIABETIC FOOT ULCER USING HYDROGEL MIX WITH PHMB: CASE REPORT

Endang Murwaningsih
Cancer Dharmais Hospital
Email: emurwaningsih@gmail.com

ABSTRACT

Diabetic foot ulcers (DFUs) pose significant health risks, leading to high rates of morbidity and potential amputations. Effective management strategies are essential for improving healing outcomes. This case report examines the use of hydrogel mixed with Polyhexamethylene Biguanide (PHMB) as a treatment modality for DFUs. Methode patients received wound care use the 3 M method, washing using water, soap and PHMB. Autolysis with hydrogel mixed with PHMB, inserted into undemining. selection of dressings using foam and fixation using cohaesive. dressing changes every 3-4 days. Duration of healing, level of infection, and patient comfort are assessed using the winners scale and direct observation.
Results the findings indicated a significant reduction in healing time for ulcers treated with hydrogel and PHMB, with healing duration of 12 weeks, Moreover, the antimicrobial properties of hydrogel mixed with Polyhexamethylene Biguanide (PHMB) inserted into undemining, effectively reduced bacterial colonization, further promoting wound healing. Conclusion the application of hydrogel mixed with PHMB demonstrates a promising approach for manage undermaining diabetic foot ulcers, significantly accelerating the healing process and enhancing infection control. These results support the integration of advanced wound care techniques in clinical practice for improved patient outcomes in diabetic foot ulcer management.

Keywords: diabetic foot ulcer, hydrogel, PHMB, undermaining

ACCELERATING WOUND HEALING PROCESS USING 4-STEP WOUND HYGIENE AND TOPICAL OXYGEN THERAPY

Husni Mubarok
Bilqiss Medika Clinic, Bekasi, West Java
Email: abihusnimubarok94@gmail.com

ABSTRACT

Global prevalence among diabetes sufferers is estimated around 3 - 13%, increasing with age and duration of diabetes. The IDF estimates that there were 537 million people living with diabetes globally in 2021, and this number will increase over than 700 million people by 2045. Diabetics have a risk up to 40% of undergoing lower extremity amputation, while the lifetime risk of developing DFU is around 25% and incurs high health care costs. Topical Oxygen Therapy (TOT) offers the potential to reduce costs by providing better and more durable wound healing and reducing recurrence rate is up to 83%. The application of TOT is inefficient if there is biofilm above the granulation tissue. Biofilms can reform within hours, their presence can be assumed to be the main barrier and cause of hard-to-heal wounds. The JWC consensus document in 2022 released a structured approach to overcome biofilm barriers to healing, called the 4 steps of wound hygiene. After implementing wound hygiene, 80.3% of respondents reported an increase in healing rates. Result DFU accompanied by infection healed quickly in 9 meetings and reduced the high cost burden. Conclusion
Using a collaboration of wound hygiene methods and topical oxygen therapy in DFU healed after treatment for 4 weeks which is carried out every 3 days.

Keywords: DFU, wound hygiene, topical oxygen therapy

3C PRINCIPLES COMPRESSION THERAPEUTIC THERAPY TO MANAGE VENOUS LEG ULCERS: A CASE STUDY

Rubiyanto Warja[1,2,3]
[1]Bilqiss Medika Clinic Wound Care Division, Bekasi- West Java - Indonesia
[2]Cardiovascular Center Harapan Kita Jakarta - Indonesia
[3]Student Magister Nursing Muhammadiyah University Jakarta – Indonesia

ABSTRACT

Complexity venous vascular disease the leading is chronic venous insufficiency (CVI) and worse condition in C6 (active ulcers) CEAP classification. CVI lead diminished quality of life and not productivity more than 150.000 new patient in USA yearly. Complication CVI the highest grade is venous leg ulcers. Venous leg ulcers (VLUs) defined as open skin lesion between knee and ankle join that remain unhealed for at least four weeks as stasis ulcers causes of venous incompetence valve. VLUs estimated healing time in European country is 13 months, seriously problem is recurrence rate to 60% in a year. VLUs category hard to heal, the annual US Payer burden for VLUs is estimate at $14.9 billion. Given Compression therapeutic therapy (CTT) positively impact wound healing VLUs and support treatment has health on quality of life, vary widely healing rate 40% to 95% with CTT. CTT is gold standard for support healing in VLUs after select appropriate dressing to apply. CTT need high pressure more than 40mmhg and have 3C principles: comfort, continuous and consistence. Method show case a man 75 y.o ulcer inside left leg malleolar 7 months, itching, changed skin color and cramp. DUS examination: Severe CVI GSV to malleolar sinistra, reflux valve vein, no DVT. C6, Ep, As, Pr Classification. ABPI test 0.8. Wound Assessment finding biofilm colony wound bed, size 6cm X 5cm, dry skin periwound. Wound care management adopted from moist wound healing, application 3C principles high pressure bandaging as gold standard procedure VLUs. Patient rejected laser ablation therapy. Result healing time 12 weeks with support 3C principle CTT. Conclusion appropriate dressing selection case VLUs need skill set. CTT are gold standard to supporting valve vein incompetence lower leg. Three principles comfort, continuous and consistence pressure to support treatment for healing wound VLUs.

Keywords: compression therapeutic, healing wounds, therapy 3C, VLUs

CASE STUDY: USE OF ZINC CREAM ON WOUNDS DUE TO ACCIDENT IN INDEPENDENT NURSING PRACTICE

Stela Tangkilisan
Stelawoundcare_South Minahasa, North Sulawesi, Indonesia,
Email: stelatangkilisan82@gmail.com

ABSTRACT

Wounds are damage to the skin barrier accompanied by loss of epithelial tissue or injury to other tissues such as muscles, bones and nerves caused by various reasons including pressure, incisions and surgical wounds. Wound care management in this case uses modern wound care methods using TIME management, namely by washing the wound using wound soap, removing dead tissue and choosing the right dressing. This case study occurred in a 20 year old student who had an accident due to being hit by a car, and had previously undergone surgery at a hospital, but the wound had decayed. And in modern wound care, zinc cream is used as a primary dressing, while secondary dressings are used as dressings that absorb a lot of fluid. and given additional therapy in the form of ozone. Maintenance visits are carried out every 3 days. Treatment starts from April 20, 2024 to August 26, 2024. The result of the process of wound care and healing with the formation of epithelialization in patients. This is approximately 4 months. By using zinc cream base oil as a primary dressing and a dressing that absorbs a lot of fluid as a secondary as well as additional ozone therapy, it turns out to be very effective in treating wounds caused by accidents that have already begun to rot, thereby accelerating wound healing.

Keywords: accident Wounds, zinc cream

THE POTENTIAL OF AI IN REVOLUTIONIZING DISASTER WOUND CARE: A SCOPING REVIEW

Wawan Febri Ramdani[1]*, Zulfa Dwi Putri[2], Maryadi[3], Renaldi M[4].
*[1]Department of Nursing, Faculty of Health Sciences, Universitas Aisyiyah, Yogyakarta, Indonesia
[1]Woman, Family, and Disaster Studies, Universitas Aisyiyah Yogyakarta, Indonesia
[2]Departement of Nursing, Faculty of Medcine, Public Health And Nursing, Univeristas Gadjah Mada, Yogyakarta, Indonesia
[3]Department of Nursing, Faculty of Sport and Health, Universitas Negeri Gorontalo, Gorontalo, Indonesia
[4]Sekolah Tinggi Ilmu Kesehatan Makassar
Email: wawanramdani@unisayogya.ac.id

ABSTRACT

Wound care in disaster settings presents significant challenges for healthcare providers, often constrained by limited resources and medical personnel. The emergence of Artificial Intelligence (AI) offers promising solutions to enhance wound management in disaster scenarios. Objective this scoping review aims to examine the potential applications and effectiveness of AI technologies in revolutionizing disaster wound care, while identifying implementation challenges and future research directions. Methods asystematic literature search was conducted across major databases including PubMed, Scopus, and IEEE . We reviewed articles published between 2015-2024 focusing on AI applications in wound care and disaster management. The analysis followed PRISMA-ScR guidelines, with data extraction focused on AI technologies, clinical outcomes, and implementation challenges. Results the review identified four primary AI applications in disaster wound care: (1) image-based diagnostic systems achieving 85-95% accuracy in wound classification, (2) predictive algorithms for wound healing trajectories, (3) clinical decision support systems optimizing treatment protocols, and (4) AI-powered telemedicine platforms enabling remote consultation. Implementation demonstrated a 60% reduction in assessment time and improved resource allocation efficiency. However, challenges persist regarding infrastructure requirements, data security, and clinical validation. Conclusion AI technologies show substantial promise in enhancing disaster wound care through improved diagnosis accuracy, treatment optimization, and remote support capabilities. Future research should address validation protocols, ethical considerations, and integration with existing disaster response frameworks. These findings suggest that AI could significantly transform disaster wound care, though successful implementation requires careful consideration of practical and ethical challenges.

Keywords: artificial intelligence, clinical decision support systems, disaster management, emergency nursing, wound care

CHEMICAL CAUTERIZATION TO OVERCOME HYPERGRANULATION IN WOUNDS: CASE STUDY

Hemas Yulinda Rachmawati[1], Khairul Bahri[2], Muhammad Fadli[3], Hardeza Anggara[4], Rifa Qidya Ardi[5], Wantric Anggraini[6], Shanty Chloranyta[7]
[1,2,3,4,5,6,7]Wocare Indonesia Bogor, West Java Indonesian
Email: hemaswocare@gmail.com

ABSTRACT

Hypergranulation is a condition where excessive granulation tissue forms in a wound, inhibiting the wound healing process due to disruption of the epithelial migration process. Chemical cauterization with silver nitrate is said to treat hypergranulation by burning tissue and increasing the rate of wound healing. This case study aims to highlight the impact of chemical cauterization with silver nitrate to treat hypergranulation in wounds and accelerate the rate of wound healing. Methods a case study was conducted on 4 female patients with an age range of 19-65 years consisting of 3 ingrown nail wounds, one diabetic foot ulcer. Chemical cauterization: silver nitrate powder is applied over the wound bed. Change the dressing every 3 days with evaluation of the level of healing using the Bates-Jensen Wound Tool (BWAT). The results of this study found that chemical cauterization increased the rate of wound healing in cases of hypergranulation within 1-2x use. Two patients reported discomfort: heat when cauterizing chemicals were applied, two patients had no problems when applied. The BWAT score showed a decline to the improvement stage. Discussion in hypergranulation, chemical cauterization with silver nitrate is the right choice, although there are several disadvantages to using silver nitrate: damage to the area around the wound, increased pain, potential for tissue necrosis and infection, and can cause systemic problems if used over large areas (Jaeger et al, 2016; Brown, 2019). This can be overcome by applying hydrocolloid dressing or petroline gel to protect the periwound area. Conclusion accurate assessment and management of unhealthy granulation tissue is essential to accelerate wound healing and prevent further complications.

Keyword: chemical kauterisasi, hipergranulasi, silver nitrate

WOUND CARE MANAGEMENT OF ABOVE KNEE AMPUTATION (AKA) WITH METCOVAZIN SILVER AND CALCIUM ALGINATE IN ACCELERATING THE WOUND HEALING PROCESS AT FATCHULL WOUND CARE CENTER DANGI GODONG GROBOGAN

Mansyur Hidayat, Nidaul Khoiriyah
At Fatchull Wound Care Center Dangi Godong Grobogan
email : ncurhidayat93@gmail.com

ABSTRACT

Diabetic Foot Ulcer (DFU) is one of the most feared chronic complications of diabetes mellitus. DFU is a disease of the diabetic foot characterized by sensory, motoric, autonomic neuropathy, macrovascular and microvascular disorders. These complications are generally in the form of diabetic ulcers or wounds due to infection or damage to skin tissue on the feet of diabetics. Trans Femoral Amputation occurs due to infection up to middle of leg, ischemia condition, failure in Below knee amputation (BKA). At Fatchull Wound Care Center Diabetic Ulcer and Diabetic Foot Ulcer as Chronic Wound 98% while 2% acute wound treatment. Out of 98% DFU 90% and 8% with Diabetic Ulcer. To determine the effectiveness of using Topical Therapy as Primery Dressing (Metcovazin silver, Calcium alginate) in base wound preparation and dreesing that creates Moisture Balance as Secondary dressing to accelerate the diabetic wound healing process.

Methode this case study uses the 3M Care Principle, the wound care planning with the Falanga Model is TIME management. Result tissue Management: Autolysis Debridemant using Metcovazin Silver, Inflammation and Infection Control: Cleanse gentle antiseptic, with PHMB for 5 minutes, Moisture Balance: primary dressing Metcovazine Silver, Calcium alginate, secondary dressing foam, gauze, fixation using orthopedic woll, crepe bandage, Epithelialization Edge: Nutritional and Protein Support, dressing change the next 3 days, and adjunctive therapy bagging ozone (GOM). Conclusion the selection of the use of dressings in the treatment of Above Knee Amputation adcausa Diabetic foot Ulcer on Mrs. N using metcovazin silver and cal.alginate shows significant results in the preparation of the wound base and the wound healing process fastly.

Keywords: above knee amputation, diabetic foot ulcer, dehisence

CLINICAL PRACTICE ANALYSIS OF URBAN HEALTH NURSING IN DIABETES MELLITUS PATIENT WITH PRESSURE SORES

Agung Ginanjar
RSUD R. Syamsudin, SH. (Bunut)
Email: agien89@gmail.com

ABSTRACT

Lifestyle changes in urban community could increase the risk of diabetes mellitus that caused a wound and make in faster wound deteriorating and difficult to heal. Pressure ulcer is caused by prolonged pressure in certain areas. The aim of this paper was to describe the effectiveness of moist wound care and prevention of pressure ulcer risk using Braden scale. The concept of moist wound care, and prevention the risk of pressure ulcer using the Braden scale proved to be effective in the treatment of pressure ulcer and help accelerate the wound healing process. Wound care with moist concept and prevention using Braden scale should be addressed for pressure ulcer management.

Keywords: braden scale, diabetes mellitus, moist dressing, pressure ulcers

COMBINATION MODEL OF OZONE THERAPY WITH HYDROFIBER (SILVER DRESSING) AS A STRATEGY FOR HEALING DIABETIC ULCERS: CASE STUDY

Khaerul Azmi
Email: khaerulazmi90@gmail.com

ABSTRACT

Diabetes melitus continues to increase every year and is a threat to world health. The most common complication in DM sufferers is diabetic ulcers. Diabetic ulcers are one of the causes of disability and death in DM sufferers. Diabetic ulcers can cause infection, amputation, and even death of the patient. Therefore, effective treatment methods are essential to treat diabetic ulcers. Objective this case study aims to determine the combination model of ozone therapy with hydrofiber (silver dressing) as a healing strategy for diabetic ulcers. Methods this case reports a 45 year old man with a history of type 2 diabetes for 1.5 years who had experienced a diabetic ulcer of the right extremity for 1 month on the instep with a size of 6 × 3 × 1 cm. The patient's ulcer was infected with Staphylococcus aureus. Despite routine diabetic ulcer care (bandage changes twice daily and intravenous antibiotic therapy), the patient's diabetic ulcer did not improve using standard methods. The patient was then referred to the Al-Muchlisin Clinic Wound Polyclinic. In the first step, necrotic tissue is cleaned with TIME management. Next, the patient is given ozone therapy at a dose of 70 µg/dL over a period of 30 days in 10 sessions (one 20 minute session every 3 days). Between each session, the patient's wound is bandaged using Hydrofiber (Silver Dressing). Results after two months of treatment, the patient's diabetic ulcer healed, and the patient was discharged from our service in good condition. Conclusion this case report study shows that ozone therapy combined with hydrofiber (silver dressing) is an effective approach to improve healing of diabetic ulcers. Therefore, wound care practitioners can utilize it as an adjunct in the treatment of diabetic ulcers.

Keywords: diabetic ulcers, hydrofiber (silver dressing), ozone therapy, wound healing.

EFFECTIVENESS OF USE OF CHITOSAN CREAM AND CADEXOMER IODINE IN PATIENTS WITH LONG-HEALING WOUNDS

Intan Linawati Rahayu
Gama Tama Primary Clinic
E-mail Koresponden: intanlinawati644@gmail.com

ABSTRACT

Long-healing wounds are chronic wounds that take more than 12 weeks to heal due to factors inhibiting the healing process, both internal and external. Proper wound care can speed up the wound healing process. Treatment efforts to overcome long-healing wounds include the use of Chitosan Cream and Cadexomer Iodine. This case study aims to describe the effectiveness of using Chitosan Cream and Cadexomer Iodine in patients with long-healing wounds. The research design was a case study carried out on two clients with chronic wounds from the client's subjective wounds of more than 12 weeks, slough colored wounds and granulation, evaluation of wound development with winners score. The results of this study show that wound treatment using Chitosan Cream and Cadexomer Iodine in patients with wounds that take a long time to heal has proven to be effective with healing in 4 weeks. This case study concludes that the use of Chitosan Cream and Cadexomer Iodine has been proven to accelerate the wound healing process in long-healing wounds.

Keywords: chitosan cream, iodine cadexomer, long-healing wounds

THE EFFICACY OF A CHITOSAN CREAM IN CONJUCTION WITH CADEXOMER IODINE IN PATIENTS HARD TO HEAL WOUNDS

Hemas Yulinda Rachmawati[1], Khairul Bahri[2], Muhammad Fadli[3], Hardeza Anggara[4], Rifa Qidya Ardi[5], Wantric Anggraini[6], Shanty Chloranyta[7]
Wocare Indonesia Bogor, West Java Indonesian
Email: hemaswocare@gmail.com

ABSTRACT

Appropriate wound care can facilitate the wound healing process. The objective of this case study is to describe the effectiveness of using chitosan cream and cadexomer iodine in patients with hard to heal wounds. The research design is a case study carried out on two clients with chronic wounds that had been present for more than 12 weeks. The wounds were subjectively assessed as slough and granulation-coloured. The wound development was evaluated using the winners score. The findings of this study indicate that the appication of chitosan creams and cadexomer iodine in the management of hard to heal wound is an effective approach, resulting in a four-week healing periode. The findings of this case study indicate that the utilisation of shitosan cream and cadexomer iodine has been demonstrated to facilitate the acceleration of the wound healing process in instances of long-healing wounds.

Keywords: cadexomer iodine, chitosan cream, hard to heal

WOUND TREATMENT IN CHILDREN WITH SECOND GRADE BURNS WITH ZINC CREAM: CASE STUDY

Ever Mario Lontaan
Evercare_Tomohon, North Sulawesi, Indonesia
Email: mariolontaan@yahoo.co.id

ABSTRACT

A burn is an injury to the skin or other organic tissue primarily caused by heat or due to radiation, radioactivity, electricity, friction or contact with chemicals. Thermal (heat) burns occur when some or all the cells in the skin or other tissues are destroyed by: hot liquids (scalds), hot solids (contact burns), flames (flame burns). Wound treatment in this case utilizes the TIME management approach. Wound soap and antiseptic solution are employed, followed by the selection of a primary dressing: zinc cream. This case involved a 1-year and 5-month-old child who sustained scalding injuries due to hot water in the chest and right arm area. The parents sought treatment for the child at an independent practice one day after the incident. Maintenance carried out on August 9,2024 and using triple M, 1st M: Wash the wound with sterile water and wound soap, then apply antiseptic solution. 2nd M: Removes waste debris and peels off epidermis. 3rd M: Use zinc cream as a primary dressing, cover with padding, then cover with orthopedic wool and a crepe bandage. Treatment on third, August 16, 2024 found that the wound had improved, the child had begun to do activities well, and the pain had reduced. Treatment was completed in just 8 days. Topical zinc cream therapy functions to maintain wound moisture so that the wound surface remains in optimal condition. As a topical zinc cream, it aids autolytic debridement in preparing red wounds, prevents damage when the dressing is removed, and reduces unpleasant odors. Good and appropriate wound care can help speed up the healing process and improve comfort and quality of life.

Keywords: burns wound, second grade, zinc Cream

CASE REPORT: CLINICAL MANAGEMENT IN PATIENT WITH DIABETES MELLITUS AND DIABETIC ULCUS IN MODERN DRESSING CARE

Rina Wijayanti Sagita
RSUP.dr.Soeradji Tirtonegoro Klaten
Email: sagita02@gmail.com

ABSTRACT

Indonesia is part of country with highest prevalance of diabetes in the World. The number of patient with diabetes mellitus in developing country is more higher than developed country. Diabetic ulcus one of many complications caused by diabetes mellitus. This study describing patient Mr. S with diabetes mellitus, diabetic ulcus with exudate and cavity of ulcus, chronic kidney disease with increasing of ureum and creatinin. Objective describing clinical management patient with diabetes mellitus, diabetic ulcus and chronic kidney disease. Method case study report describing medical history of patient, wound management, outcome and type of dressing in wound care. Result managing patient with diabetes mellitus, diabetic ulcus and chronic kidney disease need multidispilinary team. Patient have managed by nurse, nutritionist, neprologist and internist. Wound management in the patient is using antibioctic cefoperazone 2x 1gr, folic acid 1x1, novorapid 3x 6 unit and levemir 0-0- 0 unit. A nurse using modern dressing, cutimed sorbact to absorb exudate and reduce mal odor. Conclusion appropiate dressing can determine wound healing of ulcus. Cutimed sorbact can absorb exudate and reduce mal odor.

Keywords: clinical management, cutimed sorbact, diabetic ulcus

EFFECTIVENESS OF NANO COLOIDAL SILVER CREAM AND SODIUM HYDROGEL ON DIABETIC FOOT WOUNDS WITH HARD NECROTIC TISSUE IN SUPPORTING AUTOLYSIS DEBRIDEMENT: A CASE STUDY

Wantric Anggraini[1], Khairul Bahri[1,2], Muhammad Fadli[3], Rifa Qidya Ardi[4], Hemas Yulinda Rachmawati[5], Hardeza Anggara[6], Shanty Chloranyta[7]
[1,2,3,4,5,6,7] WOCARE Center Indonesia, West Java, Indonesia
2Wound, Ostomy, Continence Care Department WOCARE Indonesia, West Java, Indonesia
Email: wantric.agrn@gmail.com

ABSTRACT

Wound bed preparation must be carried out in all wounds with dead tissue. This will help the physiology heal faster. Autolysis debriment is the safest way to help remove dead tissue because it is proven to be painless, easy to do, safe and reduces patient trauma. This case study aims to evaluate the use of nano colloidal silver cream and sodium hydrogel in supporting autolysis debridement in diabetic foot wounds with hard necrotic tissue. Methods a case study was applied in this study on a 42 year old female patient with a stage 4 diabetic ulcer on the left plantar. There is hard necrotic tissue with the base color of the wound being 50% black, 50% yellow. Treatment with nano colloidal silver cream and sodium hydrogel as primary dressing, changed every 3 days, for 18 days. Evaluation with photo documentation of wounds and Winners Score. The results after treatment for 6 meetings or 18 days showed changes in the percentage of the wound base with granulation tissue 80%, slough tissue 20%, a decrease in the Winners Score from 44 to 33. The conclusion of this study is that it is effective in helping to accelerate autolysis debridement in hard necrotic tissue. Safe debridement combination: mechanical debridement helps remove dead tissue more quickly.

Keywords: debridement autolysis, nano colloidal silver, necrotic tissue, sodium hydrogel

EFFECTIVENESS OF ADJUNCTIVE THERAPY AND TOPICAL ZINC CREAM WITH CHITOSAN MIXTURE IN OVERCOMING FIBROSIS IN CRONIC WOUND IN WE CAN CARE INDEPENDENT NURSING PRACTICE IN 2024

Wenny Rosaline1, Adi Muhamad Sanusi2 dan Sanggra Gepriliano3
1We Can Care Indonesia, 2Rumah Sakit Muhammadiyah Taman Puring

ABSTRACT

Fibrosis in chronic wounds, such as chronic ulcers, is a major challenge in healing because it causes tissue stiffness, slows epithelialization, and reduces the patient's quality of life. The approach of using adjunctive therapy with topical creams based on zinc and chitosan shows potential in treating fibrosis and speeding up the healing process. This study aims to evaluate the effectiveness of additional therapy with topical zinc cream mixed with chitosan in reducing fibrosis and accelerating healing in patients with chronic ulcers. Methods the study was conducted on 5 patients aged 30 to 65 years who had chronic ulcers with significant fibrosis. The patient underwent a combination of additional therapy which included administration of adjunctive therapy including ozone therapy, inflared and daily application of topical zinc-chitosan cream once every 3 days for 10 weeks. Measurements were carried out using the Winner Scale to assess the reduction in fibrosis, increase in tissue elasticity, and speed of epithelialization. Results after 8 weeks of therapy, fibrosis was reduced by 45%, accompanied by a significant increase in tissue elasticity and faster epithelialization compared to conventional methods. The average score on the Winner Scale shows results in under 10 weeks, and there are reports of reduced pain and increased mobility from patients. Conclusion this study indicates that the combination of topical zinc cream and chitosan as additional therapy has high effectiveness in reducing fibrosis and accelerating the healing of chronic wounds. These results support the need for further research to explore the potential of zinc and chitosan as main components in the treatment of wounds with fibrosis.

Keywords: adjuvant therapy, chronic wound, fibrosis, wound healing, zinc cream

EFFECTIVE MANAGEMENT OF SKIN TEARS IN ELDERLY WITH PARKINSON USING HYALURONIC ACID CREAM: A CASE STUDY IN COMMUNITY BASE SETTING

Khairul Bahri[1], Muhammad Fadli[2], Hardeza Anggara[3], Rifa Qidya Ardi[4], Shanty Chloranytat[1,2,3,4,5]Wocare Indonesia Bogor, West Java Indonesian
anandakhairulananda@gmail.com

ABSTRACT

Wound management in elderly with Parkinson patient face unique challenges due to aging and comorbidities. Skin tears are more common in older adults because of skin fragility due to lacerations caused by shear, friction, or small blunt force trauma. Modern dressing have become increasing important in community base setting to improve in wound healing process. This case study evaluated the effectiveness of hyaluronic acid cream in treating a skin tears in elderly with Parkinson, demonstrating its potential wound healing and reliability treatment option outcome in community base setting. Method a case study was conducted on a 89-year-old man with Parkinson, decreases of visual. Presented with skin tears in left arm after an accidental injury. The wound was considered necrotic tissue 30%, granulation tissue 70%, bleeding and fragile of the around skin. ISTAP classification type 2 with wound size 16x5 cm. The wound was treated using hyaluronic acid cream and were changed every 3 days. Wound healing progression was monitor closely over of 14 days with regular wound assessment, with four images documentation healing and ISTAP classification skin tears. The results of this study show that fourteen days or three dressing changes using hyaluronic acid cream was completed wound edge closure was achieved. Evaluation Changes ISTAP classification type 2 to ISTAP classification type 1 in the second dressing change. Conclusion from a clinical perspective, the successful healing outcome in this case suggest that integrating modern dressing techniques hyaluronic acid cream into wound care protocols for elderly patients with Parkinson in community base setting as they provide a cost-effective, simple solution that reduces infection risk. Accelerates healing and improves patient comfort, making them a reliable option.

Keywords: elderly, hyaluronic acid, Parkinson, skin tears

EFFICANCY TOTAL CONTACT CASTING (TCC) IN DIABETIC FOOT ULCER WITH CALCANEOUS FRACTURE DEXTRA: A CASE REPORT

Khairul Bahri1, Muhammad Fadli2, Shanty Chloranyta3
1,2,3Wound, Ostomy, Continence Care Department in WOCARE Center, Bogor, West Java, Indonesia
2Coordinator Mobile WOCARE Center, Bogor, West Java, Indonesia
Email: anandakhairulananda@gmail.com

ABSTRACT

Diabetic foot ulcers (DFUs) represent a significant complication of diabetes mellitus, frequently accompanied by impaired wound healing and an elevated susceptibility to infections. The management of DFUs, particularly in the presence of complex concurrent conditions such as calcaneus fractures, represents a significant clinical challenge. Total Contact Casting (TCC) is one of the most established offloading modalities, enhancing wound healing by redistributing pressure away from the ulcer site. This case report assesses the effectiveness of TCC in a patient with a diabetic foot ulcer complicated by a fracture of the right calcaneus (calcaneus fracture dextra). Method this study conducted was a 53-years-old male with diabetic foot ulcer. The wound assessment initialy fracture in calcaneous dextra wtih bone expose, heavy exudate, odor, macerated. TIMERS Management was applied in local woundcare and addtional was applied TCC as treatment modality over a periode 5 monts. Clinical assessment included wound characteristic (granulation tissue, exudate, maserated), Radiographic imaging. Result the application of TCC reduced the size of the wound significantly (by 95% reduction in wound area) and improved wound healing. NPWT was applied in Local Woundcare. The wound is still exuding a moderate amount of exudate, which is causing maceration of the surrounding tissue. The use of a stoma bag is recommended to prevent maceration and collect exudate. Radiographic follow-up showed progressive healing of the fracture of the calcaneus. There were no complications related to the application of TCC, such as skin maceration or secondary infections. Conclusion the utilisation of TCC for the management of diabetic foot ulcers in conjunction with calcaneal fractures has yielded encouraging outcomes with respect to wound healing and fracture stabilisation. TCC effectively relieves pressure, thereby facilitating wound healing and reducing patient discomfort.

Keywords: Total Contact Casting (TCC); diabetic foot ulcer; wound healing; offloading technique.

EFFECTIVENESS OF ENZYMATIC DEBRIDEMENT USING VIBRIO ALGINOLYTICUS COLLAGENASE AND HIALURONIC ACID ON DIABETIC FOOT WOUNDS: A CASE STUDY

Hardeza Anggara[1], Khairul Bahri[2], Muhammad Fadli[3], Rifa Qidya Ardi[4], Hemas Yulinda Rachmawati[5], Wantric Anggraini[6]
[1,2,3,4,5,6]Wocare Indonesia Bogor, West Java Indonesian
Hardezaangga@gmail.com

ABSTRACT

Slough is a form of necrotic tissue that contains materials such as fibrin, leukocytes, dead cells, microbes and proteinaceous materials. The presence of slough in wounds can prolong the inflammatory phase and inhibit the wound healing process. Slough that sticks to the wound bed attracts bacteria to the wound bed, increasing the odor and exudate in the wound. Proper wound bed preparation or debridement must be performed to speed healing. One debridement that can be done is enzymatic debridement using vibrio alginolyticus collagenase and hyaluronic acid. This case study aims to examine the effectiveness of enzymatic debridement using Vibrio alginolyticus collagenase and hyaluronic acid in diabetic foot wounds. Methods a case study was conducted on a 42 year old female patient with diabetic foot wounds. Wound criteria, 90% of slough attached to the wound base. The research used a primary dressing in the form of vibrio alginolyticus collagenase and hyaluronic acid. Evaluation of treatment for 2 weeks using BWAT which focuses on the Necrotic Tissue Type and Necrotic Tissue Amount points. Results bsed on the results of the 2 week evaluation, it was found that the Necrotic Tissue Type, previously Loosely adherent yellow slough, became non-visible, then the Necrotic Tissue Amount 75% to 100% of wound covered became non-visible. Conclusion wound bed preparation is important to speed up the wound healing process, enzymatic debridement using Vibrio alginolyticus collagenase and hyaluronic acid is one of the debridement techniques that can be carried out. Clinically, vibrion alginolyticus collagenase and hyaluronic acid are effective in accelerating wound bed preparation.

Keywords: diabetic foot ulcer, enzymatic debridement, hyaluronat acid, vibrio alginolyticus

SENDA LARA IMPROVES THE QUALITY OF LIFE OF PEOPLE WITH TYPE 2 DIABETES MELLITUS

Harmilah[1], Bondan Palestin[2], Joko Tigo Narimo Bekti[3]
[1,2,3]Poltekkes Yogyakarta
Email: harmilah@poltekkesjogja.ac.id

ABSTRACT

The quality of life of Diabetes Mellitus (DM) patients has decreased due to complications. DM complications can be minimized or controlled or prevented by efforts to prevent, control and treat DM appropriately and quickly so that the quality of life of people with type 2 DM can improve. It is known that Senda Lara improves the quality of life for people with type 2 DM. Method this type of research is Quasi Experimental with a "Prettest and Posttest design with control group" design. The sampling technique was random sampling, the data collection technique was carried out using the Diabetes Quality of Life Brief Clinical Inventory quality of life instrument and examination of HbA1c levels. The sample size was 60 respondents consisting of 30 intervention group and 30 control group respondents. Data analysis used the T test. Results the characteristics of the respondents ranged in age from 36.7 – 63.3 years, mostly female, had elementary school education, had DM for 4-5 years, the mean quality of life score of respondents before doing SENDA LARA was 57.3 with SD 4.69 and the average score after doing SENDA LARA for 3 months the quality of life score was 62.23, with SD 5.1. Meanwhile, in the group who did not do SENDA LARA, the previous quality of life score was 55.73 with SD 5.61 after 3 months to 56.13 with SD 5.41, with a p value of 0.00. The increase in the quality of life score of respondents who did SENDA LARA was 5.82, SD 2.68, while the increase in the quality of life of respondents who did not do SENDA LARA was only 3 with SD 1.35, p value 0.00 (0 < 0.05) meaning that there was a difference in the increase in quality of life for respondents who did SENDA LARA with those who don't SEND LARA. Conclusion SENDA LARA can improve the quality of life scores of people with type 2 DM.

Keywords: SENDA LARA, type 2 diabetes mellitus, quality of life,

THE RELATIONSHIP BETWEEN DEPRESSION LEVELS AND QUALITY OF LIFE IN PATIENTS WITH DIABETIC ULCERS

Agung Ginanjar
RSUD R. Syamsudin, SH. (Bunut)
Email: agien89@gmail.com

ABSTRACT

Diabetic ulcers is a complications of diabetes mellitus prolonged healing and recurrent that affect the quality of life patients. The purpose of this study was to identify the relationship between depression and quality of life patients with diabetic ulcer. The design of this study a descriptive correlation cross-sectional approach. The selection of samples were done in purposive sampling method and involved 30 respondents. The result showed significant correlation depression with quality of life with p-value 0,000. It is recommended a program of prevention and treatment of depression patients with diabetic ulcers.

Keywords: depression, diabetic ulcers, quality of life

HYDRO-DESLOUGHING PAD ACCELERATING IN WOUND BED PREPARATION ACTION ON INFECTED BURN CHRONIC: A CASE REPORT

Khairul Bahri[1], Muhammad Fadli[2], Hardeza Anggara[3], Rifa Qidya Ardi[4], Hemas Yulinda Rachmawati[6], Wantric Anggraini[7]
[1-7]Wocare Indonesia Bogor, West Java Indonesian
Email: anandakhairulananda@gmail.com

ABSTRACT

Wound chronic are changeless in wound healing. Necrotizing fasciitis, infection, an inadequate wound care in burn wound command due to delay wound healing. The management of burn wounds with the objective of preventing the onset of infection is of paramount importance, as it is a key factor in avoiding the potential for disability. This case study aims to evaluated hydro-desloughing pad to process removing dead tissue and wound bed preparation action in infected burn chronic patient. Method a case study was conducted on a 48 years old women. with. Presented infected burn chronic on right dorsal, side right of malleolus due to muffler has been in the past 1 month ago. The wound was condition slough tissue 70%, granulation tissue 30%, sign local infection, moderate exudate. The wound was treated using hydro-desloughing pad and were changes every 3 days. Evaluated wound healing progress was monitor four weeks with regular wound assessment with images documentation. The result of this study shows that four weeks using hydro-desloughing pad to process removing dead tissue was completed with evaluation none visible necrotic tissue type, none visible necrotic tissue amount, granulation tissue 100% in dorsal, epithelization on side right of malleolus and no sign infection. Conclusion according to the observation and measuring data by weekly, the effectiveness of hydro-desloughing pad application were found beneficial in promoted wound healing, control infection, reducing healing times, enhancing patient quality of life and in allowing more cost-effective wound care in one month.

Keywords: burn chronic wound, hydro-desloughing pad, wound bed preparation

BIOTECHNOLOGICAL INNOVATION: SYNTHESIS OF FISH COLLAGEN, ALOE VERA BARBADENSIS AND RED FRUIT OIL FOR WOUND HEALING

Indaryati
Griya PUSPA Wound Care Yogyakarta

ABSTRACT

Collagen, a key component of the extracellular matrix, plays critical roles in the regulation of the phases of wound healing has been utilized as an adjunct wound therapy to promote healing. Aloe vera gel can not only increase the amount of collagen in wounds but also change the composition of collagen, increase collagen cross-linking and thereby promote wound healing. Scientific studies have shown that the gel can increase the flexibility and reduce the fragility of the skin since 99% of the gel is water. Meanwhile red fruit oil (RFO) can be used to speed up wound healing because it contains tocopherols, carotenoids, oleic acid, linoleic acid and linolenic acid. Alveda collagen gel is a biotechnology innovation product that combines type I fish collagen, aloe vera barbadensis and Red Fruit Oil in a gel preparation that is used to treat wounds, both acute and chronic wounds. Objective in this work we summarize four case studies of the use of Alveda collagen gel products for the treatment of diabetic ulcers and other chronic wounds at Griya PUSPA Wound Care Yogyakarta. Methode case study. Results of the 4 cases of chronic wounds treated with ALVEDA Collagen Gel, satisfactory results were obtained, 2 wounds healed and 2 wounds reached the re-epithelialization phase. Conclussion ALVEDA Collagen Gel is effective as a primary dressing for wounds in the proliferation and re-epithelialization phases.

Keywords: aloe vera, chronic wound, fish collagen, red fruit oil, wound healing

NURSE ROLE IN WOUND CARE TO ALLEVIATE DISCOMFORT AND RESTORE DIGNITY IN PATIENT WITH MALIGNANT FUNGATING WOUND: A CASE STUDY

Nisrina Zakiya Ulfah
Private Practice Nursing, Depok, Indonesia

ABSTRACT

Patients with malignant fungating wounds (MFW) experience distressing symptoms such as unpleasant odor, exudate leakage, bleeding, and pain. The odor from the wound and frequent leakage of exudate significantly disrupt their daily lives, causing inconvenience and embarrassment during routine activities. Unpredictable bleeding can become difficult to control. Patients tend to avoid social interactions due to feelings of shame and distress. They often hide their wounds because of embarrassment and a loss of self-confidence. Additionally, they may suffer from body image issues related to the loss of femininity, leading them to avoid intimate relationships with their partners. Nurses face significant challenges in addressing both the physical and psychosocial suffering of patients with MFW. Proper wound care management can be a solution to help alleviate the patient's discomfort and restore patient dignity. Methods this study was a case study in patient with malignant fungating wounds. Nursing interventions are implemented with an emphasis on a targeted approach to effective wound care, which encompasses wound management, psychological support, symptom and pain management, and patient and family education. Results a ppropriate wound care strategies are implemented, including the used of advanced dressings to reduce odor, bleeding control, and manage exudates. Antimicrobial dressing, alginate, and foam were used. These advanced dressing also help alleviate the patient's discomfort and pain. Nurse also provide education to the patient and their family regarding how to properly change dressings, manage exudate, and help the patient and family feel more confident and capable in handling the challenges of palliative care. Conclusion proper wound care helps alleviate both physical pain and psychological distress. The nurse's role in managing malignant fungating wounds with appropriate care is essential in reducing discomfort and restoring the patient's dignity.

Keywords: alleviate discomfort, restore dignity, malignant fungating wound

TOPICAL APPLICATION OF GREEN TEA THROUGH THE PEBO APPROACH TO MALIGNANT FUNGATING WOUNDS

Endang Murwaningsih
Cancer Dharmais Hospital
Email:emurwaningsih@gmail.com

ABSTRACT

Malignant Fungating Wounds (MFWs) is a complication of cancer that affects 5-10% of patients, especially in the breast area (60%), head and neck (24%). Symptoms such as pain, exudate, bleeding and unpleasant odor significantly reduce the patient's quality of life. The PEBO (Pain, Exudate, Bleeding, Odor) approach and topical application of green tea are used to treat this problem. Objective to evaluate the effectiveness of topical application of green tea in reducing symptoms of PEBO, especially unpleasant odor in MFWs. Method this study used a non-pharmacological approach, by applying green tea topically to reduce odor, pain, exudate, and bleeding in MFW patients. Observations were made by documenting the odor scale and changes in symptoms during the implementation of the intervention. Results application of green tea showed a significant reduction in wound odor scale. Before the intervention, patients reported wound odor with an average of 4-5 (0-5 scale), and after application, the average odor decreased to 1-2. Significant reductions in pain and exudate were also noted, supporting the use of green tea as an effective alternative for controlling PEBO symptoms in MFWs. Conclusion green tea has been proven to be effective in reducing unpleasant odor, pain and exudate in cancer wounds. It is a cheap and safe topical therapy option, with no risk of long-term resistance, and can be used with other therapies such as metronidazole powder for more optimal results.

Keywords: green tea, malignant fungating wounds, pebo approach, topical application

THE EFFECT OF HEALING OF SECOND DEGREE BURNS TREATED USING ZINC CREAM AND SODIUM HYDROGEL ON BODY IMAGE: A CASE STUDY

Wantric Anggraini[1], Khairul Bahri[1,2], Muhammad Fadli[3], Rifa Qidya Ardi[4], Hemas Yulinda Rachmawati[5], Hardeza Anggara[6]
[1,2,3,4,5,6]WOCARE Center Indonesia, West Java, Indonesia
[2]Wound, Ostomy, Continence Care Department WOCARE Indonesia, West Java, Indonesia
Email: wantric.agrn@gmail.com

ABSTRACT

Treating burns in the facial area must be done quickly and precisely because they often leave scars that affect body image. Modern dressing treatment techniques for burn wounds are needed to improve the healing process, prevent injury severity, reduce pain, and improve quality of life. This study aims to evaluate the effectiveness of zinc cream and sodium hydrogel on second degree burns, and their effect on body image. This research uses a case study with a qualitative approach, on a 47 year old man with second degree burns on the face area. There is 100% necrotic tissue and pain on a scale of 6/10. Implementation of wound care using zinc cream and sodium hydrogel as primary dressing. Evaluation of treatment, photo documentation of wounds and patient subjective responses. The results of treatment after 1 treatment of the wound healed. This is evidenced by the percentage of necrotic tissue decreasing from 100% to 0%, no scars being found, and the pain scale decreasing from 6/10 to 0/10. Qualitative insight "I feel more confident in carrying out activities because the wound on my face has healed as before." Conclusion clinically it shows that the use of zinc cream and sodium hydrogel is very effective in healing second degree burns on the face, speeding up healing, increasing self-confidence and improving quality of life.

Keywords: body image, second degree burn, sodium hydrogel, zinc cream

EFFECTIVENESS OF METHANESULPHONIC ACID (MSA) ON BIOFILM IN HEALING CHRONIC WOUNDS THAT ARE DIFFICULT TO HEAL: A CASE STUDY

Rifa Qidya Ardi[1] , Khairul Bahri[2], Muhammad Fadli[3], Hardeza Anggara[4] , Wantric Anggraini[5] ,Yulinda Rachmawati[6]
[1,2,3,4,5,6]Wocare Indonesia Bogor, West Java Indonesian
Email: rifaqidya@gmail.com

ABSTRACT

Biofilms are often present on the surface of chronic wounds that inhibit the wound healing process and can cause various other infectious complications. Methanesulfonic acid (MSA) has antimicrobial properties that can disrupt the integrity of biofilms and increase the effectiveness of antibiotic therapy so that it can eliminate the negative effects of biofilms in the healing process of chronic wounds that are difficult to heal. This case study aims to see the effectiveness of methanesulfonic acid (MSA) in overcoming biofilms and its impact on the wound healing process. Method the case study was conducted on a 61-year-old male patient with a chronic diabetic foot wound that had not closed for 3 months, and a 49-year-old female patient with a chronic diabetic foot wound that had not changed for 7 months. The treatment was carried out 3 times, where Methanesulfonic Acid (MSA) was applied to the wound surface for 60 seconds then rinsed with gentle antiseptic, the wound was closed using modern dressing. Evaluation using BWAT which focuses on the amount of exudate, wound size and percentage of granulation. Results based on the evaluation results during 3 treatments, the results obtained biofilm disappeared and the amount of exudate that was previously large was reduced to moderate, the size of the wound was reduced and the percentage of granulation increased where these results were able to be an important factor in achieving the wound healing process that was previously stagnant. Conclusion chronic wounds that are difficult to heal and experience failure of the wound healing process, one of which is caused by biofilm, can be overcome by using Methanesulfonic Acid (MSA) by reducing the negative impact of biofilm on the wound healing process.

Keywords: biofilm, methanesulfonic acid (MSA), chronic wounds, wound healing

SUCCESSFUL HEALING HARD TO HEAL WOUND: ARTERIAL ULCER WITH 50% STENOSIS IN TIBIA SINISTRA WITH MANAGEMENT MULTIDISCIPLINE APPROACH

Hardeza Anggara[1], Khairul Bahri[2], Muhammad Fadli[3], Rifa Qidya Ardi[4], Hemas Yulinda Rachmawati[6], Wantric Anggraini[7]
[1-7]Wocare Indonesia Bogor, West Java Indonesian
Email: rifaqidya@gmail.com

ABSTRACT

Diabetic foot ulcers (DFUs) and arterial ulcers are complex wounds that are frequently observed in patients with underlying vascular complications, such as diabetes and peripheral arterial disease (PAD). The treatment of these ulcers is challenging due to the presence of compromised blood flow and prolonged healing times. The objective of this case is to ensure the management of a challenging wound, namely an arterial ulcer with 50% stenosis in the left tibia, through a multidisciplinary approach. Method this case study concerns a 48-year-old male patient with a diabetic foot ulcer that has proven resistant to conventional treatment, in addition to an arterial ulcer that has been further complicated by 50% stenosis in the left tibial artery. A multidisciplinary approach was employed to manage the patient, with input from specialists in vascular surgery, wound care, adjunctive therapy, endocrinology, and rehabilitation. The treatment plan comprised revascularisation via minimally invasive endovascular intervention, advanced wound dressing, infection control, and adjunctive therapy, namely hyperbaric oxygen and metabolic stabilisation. The patient's progress was monitored meticulously, with regular assessments of wound progress, wound healing progress as indicated by the WINNERS Scale Score and glycemic control.
Results the multidisciplinary treatment approach yielded considerable improvement in the process of wound healing, with complete epithelialisation achieved after 11 weeks. The patient's blood flow and glycemic levels were stabilized, thereby reducing the risk of further complications and enhancing the process of wound healing. This case study demonstrates the efficacy of a multidisciplinary approach in the management of complex arterial ulcers with concurrent diabetic foot complications. Conclusion the multidisciplinary management of arterial and diabetic ulcers that are refractory to healing, particularly in patients with vascular comorbidities, has the potential to significantly enhance outcomes. This case study highlights the value of a collaborative approach, which optimises patient outcomes by addressing both the vascular and metabolic factors that are critical to healing.

Keywords: arterial ulcer, multidisciplinary approach, stenosis, wound healing

THE EFFECT OF HYDROPRESSURE APPLICATION ON HEALING RATES OF DIABETIC FOOT ULCERS

Khairul Bahri[1], Muhammad Fadli[2], Hardeza Anggara[3], Rifa Qidya Ardi[4], Hemas Yulinda Rachmawati[6], Wantric Anggraini[7]
[1-7]Wocare Indonesia Bogor, West Java Indonesian
E-Mail: anandakhairulananda@gmail.com

ABSTRACT

Patients with diabetes are prone to developing diabetic foot ulcers, which are challenging to treat due to impaired wound healing. By reducing the bacterial load and facilitating debridement, hydropressure—a wound care technique that employs pressurised water for wound irrigation—has shown promise in accelerating wound healing. The objective of this study was to evaluate the impact of hydropressure on the healing rates of diabetic foot ulcers. Method a quasi-experimental study with a one-group pre-test, post-test design. Total sampling was employed to selected the study participant. The hydropressure intervention was applied to 30 respondent with diabetic foot ulcers between January and October 2024. Wound healing was measured using standardized winners scale score, recorded before and after the intervention period. Data were analysed using paired t-tests to determine the statistical significance of the intervention's effect. Results the findings indicated a significant improvement in the mean Winners Scale score rate after the application of hydropressure, with a marked increase from the pre-test mean of 37.4 SD 5.3 to the post-test mean of 23.23 SD 3.57. A statistically significant difference was observed between the winners' scale score before and after hydropressure, with a p-value of 0.000 ($p<0.05$). This indicates that hydropressure exerted a notable influence on the acceleration of tissue granulation and epithelialisation. Additionally, the overall wound surface area demonstrated a considerable reduction during the intervention period. Conclusion the utilisation of hydropressure markedly enhanced the healing rates of diabetic foot ulcers. These findings imply that hydropressure may serve as an efficacious adjunctive therapy in diabetic wound care, facilitating expedited wound closure and reducing infection risk. Future studies with larger sample sizes and control groups are recommended to corroborate these findings and investigate the broader applicability of hydropressure in clinical.

Keywords: diabetic foot ulcer, healing rate, hydropressure