Case study: Chemical burn cause by propofol extravasation in dorsum of hand

**SELF-ADAPTIVE WOUND DRESSING CLINICAL RESULTS**

**Patient:**
78-year-old female with chemical burn following IV catheter infiltration of anesthetic during surgery. Patient is obese with history of end-stage renal disease, peripheral arterial disease, neuropathy, diabetes mellitus, hyperlipidermia, and anemia.

**A. At presentation.**
Painful full-thickness chemical burn seven days after injury displays significant tissue necrosis with 100% yellow slough cover and severely pronounced edema and erythema.

**B. Day 0.**
Following 3 weeks of treatment with collagenase and moist gauze, edema is still present with raised wound edges. Patient-reported pain is 9/10 and wound measures 5.1x9.0x0.1cm. A self-adaptive advanced wound dressing is applied over collagenase and secured with gauze wrap. Pain decreases to 6/10 with dressing application.
C. **Day 2.**
At first dressing change after two days of self-adaptive dressings, edema is considerably reduced and wound edges are level with the wound. Wound-related pain is 2/10.

D. **Day 30.**
Wound is 60% granulated and measures 2.9x6.5x0.2 cm. Wound-related pain is 0.
E. Day 75.
Wound is fully re-epithelialized with no surgical intervention.

Reference:
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