

## 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, hyperlipidemia, 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:**

Juan Bravo, MD Medical Director  
Center for Wound Care and Hyperbaric  
Medicine,  
Broward Health, Coral Springs, FL