

# Swim to cicatrize, or the way the wound dressing leads to therapeutic education

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Thanks to:



May 16, an example of tight dressing\*



L: 32mm W: 27mm D:15mm

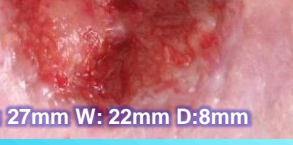
In the case of the patient exemplified below - we will show you how the dressing of the **wound to the requirements** of his sporting requirements leads to his **therapeutic education**.

**THE PATIENT AND THE METHOD:** Mr. 'X' is 70 years old, obese, diabetic and on insulin injections; he shows symptoms of a **lesion on his left leg that is being aggravated by negligent behaviour**. He has a deep wound of the fibro-necrotic type that passes through the aponeurosis. However without surgery management of the diabetes his aims remain limited. Following a brilliant sporting career, **his ambition is to enter for the "Monte Carlo Challenge"** – swimming in the sea from the fortress of the Chateau d'If to Marseille. From his consultation, he expects immediate results, and believes that with a couple of sessions in a hyperbaric chamber, the wound, that has taken 8 months to develop, will heal within 15 days.

**RESULTS:** **The use of a secondary watertight dressing** enabled him to start his training immediately and to compete in the Challenge. **Oxygenation of the muscle tissues** has improved his **ability to move (swim)** and the healing process. The patient has now agreed to **join the therapeutic education programme**. The measures taken are proof of his health improvement and the reduction in his lesions.

**DISCUSSION:** The authorisation for training in the sea and then competing in the 'Challenge' **has motivated a positive element** in the patient. The wound became only an obstacle. In explaining the beneficial effect of oxygen outside of the hyperbaric chamber, we also were able to perceive the inner distribution of muscle activity. Using **the nature of the format of the competition** enabled us to communicate with the patient the echo of his sporting past, emphasising that the correct use of bandages is an entirely new challenge. **The nursing staff became 'his team' and he is their 'champion'**. Training and special nutrition is the logical choice for a sportsman. Therapeutic education provides the keys to understanding the interaction between nutrition, diabetic care and physical effort. The first results of local improvement in the wound encouraged the patient to continue his efforts. After the first sport test, the second followed as a matter of course. The **liabilities of care provision became a partner** in self-care, setting its goal as health improvement.

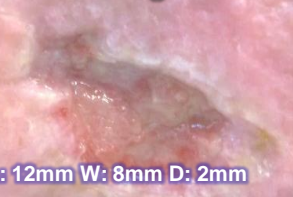
S13 – filling in and epidermization commencement



L: 27mm W: 22mm D:8mm

**CONCLUSION:** This pamphlet is more about the **importance of comprehensive care of patients** with lesion problems than **the use of watertight bandages**. Patient consultations set out the tasks he is required to undertake in the form of priorities without which will lead to a neglect of self-care. Setting aims in the style of **a scheme known to him** (a contest) enabled him to focus on the basics (his health) and also has a potential future therapeutic effect. The healing of the lesion was only the tip of the iceberg. Within only two weeks the patient found other forgotten interests. Personal effort is of extreme importance; **the results cannot depend solely on the medical team**. Could a more formal contract have given a quicker and more satisfactory conclusion to his problems?

S31 - when we believe to reach the goal



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**Therapeutic Education is a continuing process aimed at giving an interested patient his independence.**