

Wound care - Soft polymer dressings

In England and Wales over £39.7 million is spent annually on soft polymer dressings (ePACT Aug - Oct 2015), with over 35% of prescriptions being for more than ten dressings.

Key recommendations

- Limit the use of soft polymer dressings (particularly the more costly, often silicone coated type) to situations where their use is advantageous over and above less costly alternatives, e.g. where easy removal is important and other types of dressing may adhere to the wound bed.
- Ensure products with longer wear times are used appropriately. If, for example, a silicone-coated contact layer is being changed frequently, consider if a less costly alternative such as a low-adherence dressing would be a suitable alternative.
- Use simple low-adherence dressings under compression for venous ulcers, in line with SIGN guidance, unless there is reason to prefer an alternative.¹ If exudate is an issue foams, alginates or hydrocolloids may have advantages.²
- Choose the smallest size dressing that is appropriate to the wound (allowing for any necessary overlap onto healthy skin), as dressing price can rise significantly with increasing size.
- Prescribe the minimum quantity of dressings necessary to meet people's needs to help minimise wastage and stockpiling.³ Prescribe the exact number of dressings rather than 'original packs'.
- Do not prescribe dressings on repeat unless there is a clear long term need for the same dressing.
- Ensure GP practices have a process in place for identifying and investigating prescriptions for non-formulary dressings or large quantities of dressings (such as quantities over ten dressings per month).

Supporting evidence

There is a relative lack of robust clinical or cost-effectiveness evidence to guide dressing choice. The relevant national guidelines do not therefore generally make specific recommendations about choice of dressing. NICE recommend that prescribers should routinely choose the dressing with the lowest acquisition cost and the performance characteristics appropriate for the wound and its stage of healing.³

SIGN recommend simple non-adherent dressings under compression in the management of venous leg ulcers on the basis of a Cochrane review.^{1,4} Cochrane reviews comparing simple non-adherent dressings (e.g. knitted viscose, paraffin gauze) to a range of modern dressings (alginate, hydrocolloids, hydrogels and foams) found no evidence to support superiority of any dressing type over another when applied under compression.^{4,5,6}

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Additional resources available:

<https://www.prescqipp.info/resources/viewcategory/450-wound-care-soft-polymer-dressings>



Bulletin



Data pack

Costs and savings

Full costing information on dressing types is available in the bulletin.

Table 1. Potential national cost savings for soft polymer dressings supplied via FP10 (ePACT Aug - Oct 2015)

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|---|---------------------------------|
| Average percentage prescriptions for more than ten soft polymer dressings | 35% (range 0% to 82%) |
| Annual savings if 50 th percentile of cost reached by all currently above it | £4,416,705 (England only) |
| Annual savings if 10 th percentile of cost reached by all currently above it | £26,708,641 (England only) |
| Annual savings for a 50% reduction in prescribing | £19,884,748 (England and Wales) |

Data on spend for dressings supplied through direct procurement are not readily available so cannot be included in the potential savings figures.

References

1. Scottish Intercollegiate Guidelines Network (SIGN) Guideline no.120. Management of chronic venous leg ulcers. August 2010. <http://sign.ac.uk/pdf/sign120.pdf> Accessed 31/3/15
2. National Institute for Health and Care Excellence (NICE) , Clinical Knowledge Summary. Leg ulcer - venous, last revised September 2012. [.cks.nice.org.uk](https://cks.nice.org.uk) Accessed 31/3/15
3. National Institute for Health and Care Excellence (NICE) Key Therapeutic topics, Wound care products. 15th January 2015. <https://www.nice.org.uk/advice/ktt14/resources/non-guidance-wound-care-products-pdf> Accessed 18/2/15
4. Palfreyman SSJ, Nelson EA et al. Dressings for healing venous leg ulcers (Review). Cochrane Database of Systematic Reviews 2006, Issue 3. Art. No.: CD001103. DOI: 10.1002/14651858.CD001103.pub2. <http://www.cochranelibrary.com> Accessed 15/4/15
5. O'Meara S, Martyn-St James M. Foam dressings for venous leg ulcers. Cochrane Database of Systematic Reviews 2013, Issue 5. Art. No.: CD009907. DOI: 10.1002/14651858.CD009907.pub2. <http://www.cochranelibrary.com> Accessed 31/3/15
6. O'Meara S, Martyn-St James M. Alginate dressings for venous leg ulcers. Cochrane Database of Systematic Reviews 2013, Issue 4. Art. No.: CD010182. DOI: 10.1002/14651858.CD010182.pub2. <http://www.cochranelibrary.com> Accessed 31/3/15

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