

Formulary Factsheet: Silver Dressings

Key Messages

Silver-containing dressings provide a barrier to and treatment for infection; however, their bactericidal and bacteriostatic properties are inferior to commonly used topical antimicrobial agents.

- Systemic antibiotics are the first line treatment option for systemically infected wounds.
- Inflammation is not the same as infection.
- Long term use of silver dressings (i.e. greater than FIVE weeks) is not appropriate.
- Evidence of the benefit from silver dressings is inconclusive.
- Review patients using silver dressings after 2-3 weeks for improvement, and refer to Tissue Viability if no signs of improvement.
- Choice of silver dressing should be guided by the amount of exudate present and the level of infection.
- Inappropriate use of dressings containing silver or other antimicrobial agents may contribute to the development of resistant organisms.

The use of silver dressings has increased rapidly in recent years in the UK, with the amount spent on such products in NHS Kernow CCG being around £229,464 in 2013/14.

Silver dressings are not recommended for routine use in the community and are restricted to use on critically colonised/infected wounds for a maximum of 4-5 weeks only.

Please refer to the online Joint Dressings Formulary for current choice of silver dressing by following link below:

https://www.eclipsesolutions.org/UploadedFiles/152_Joint%20dressings%20formulary%20A4%20final.pdf

When should silver dressings be used?

Dressings containing silver should be used only when there is evidence of wound infection and critical colonization and evidence of MRSA.

Is the wound clinically infected?

Check for signs of infection such as:

- redness
- swelling
- pain
- pus
- odour

What is the evidence?

The VULCAN study found no evidence to support the use of silver dressings under compression bandaging for the treatment of venous leg ulcers or wounds that were not colonized or infected. Compared with non-silver low-adherent dressings, silver dressings were not more effective in healing ulcers, did not improve quality of life, and were not cost-effective on chronic non colonized wounds.

National guidance and the available evidence are clear that systemic antibiotics should only be used as first line when there is clear evidence of systemic infection, topical antimicrobials should be first line choice.

Cautions in use

If dressings impregnated with silver sulfadiazine are applied to large areas, or used for prolonged periods, there is a risk of blood disorders and skin discolouration.

- Some silver products oxidise in contact with air and this may be displayed as a brown/black discolouration on the wound bed and/or surrounding skin. Cut Acticoat to the size of the wound in order to be cost effect and reduce this effect. (e.g. Flamazine® and Acticoat®)
- Hypersensitivity reactions may be experienced due to absorption of silver
- The use of silver sulfadiazine-impregnated dressings is contra-indicated in neonates, in pregnancy, and in patients with significant renal or hepatic impairment
- Application of Flamazine® may cause an increase in exudates and will require monitoring daily
- Application of Acticoat® may cause pain on first application, wetting the dressing with tap water before application may reduce this.

References

1. Silver dressings are no more effective than unmedicated low-adherence dressings for treating leg ulcers. (November 2009) <http://www.npci.org.uk/blog/?p=796>
2. Silver dressings – do they work? <http://dtb.bmj.com/content/48/4/38.full>
3. Clinical Knowledge Summaries <http://www.cks.nhs.uk/home>
4. Castellano, J. J., Shafii, S. M., Ko, F., Donate, G., Wright, T. E., Mannari, R. J., Payne, W. G., Smith, D. J. and Robson, M. C. (2007), Comparative evaluation of silver-containing antimicrobial dressings and drugs. International Wound Journal, 4: 114–122. doi: 10.1111/j.1742-481X.2007.00316.x

Silver Dressings Pathway

Is the wound infected/critically colonised/MRSA positive?
Check for signs of infection such as:
Redness, swelling, pain, pus, odour

Yes

Apply formulary silver dressing.

Choice should be guided by the amount of exudate present and the level of infection. Please use correct dressing size to correspond with wound size. Dressings can be cut to size.

No

Apply non-silver formulary dressing.

Refer to online Joint Dressings Formulary for current choice

https://www.eclipsesolutions.org/UploadedFiles/152_Joint%20dressings%20formulary%20A4%20final.pdf

Review wound after 2-3 weeks.
Improvement?

Yes

Continue with silver dressing for further 2 weeks then stop. Consult Tissue Viability if further advice required or wound becomes recolonised.

No

Contact Tissue Viability for advice: tissue.viability@cornwall.nhs.uk
Tel: 01726 627595