## A Retrospective Review of 30 Consecutive Patients with Open Wounds Treated with Techni-Care®.

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The emergence of resistant microbes has led to a search for effective nontoxic topical microbicides for the treatment of open wound infections. We hypothesized that a topical microbicide would promote wound healing and improve patient outcome. Therefore, we retrospectively reviewed 30 consecutive patients treated with the topical microbicide. Techni-Care® (active ingredients: Chloroxylenol and cocamidopropyl PG-dimoniun chloride phosphate). 24 after failure of conventional therapy and 6 as a first line agent. Failure was defined as persistent purulent discharge. cellulitis or absence of granulation tissue formation. We examined age, weight, site of infection, and outcome, then compared febrile days (>101° F), WBC, hospital days, wound cultures, and debridements before and after initiation of Techni-Care®. Wounds received a 2 minute application of Techni-Care® 2-3 times a day followed by saline irrigation and sterile dressing. Parenteral antimicrobials were used in all patients. Of the 30 patients, 14 were female, 16 male; 13 (43%) were immunosuppressed transplant patients, 17 (57%) had abdominal wounds, 7 (23%) had extremity wounds, and 6(20%) had cellulitis. Average age was 50.9 yrs (27-76 yrs) and average weight was 84.8 kg (54-213 kg). Conventional therapy was used for an average of 22.8 days. Analysis revealed a significant reduction in WBC (p=0.02), febrile days (p<0.02),

debridements (p<0.005) and wound cultures (p<0.00005) but no difference in hospital days before and after Techni-Care (D) (Table). Wounds were closed in 8 of

Table		Before	After	
	Techni-Care®			
	n	mean ± sd	mean ± sd	Р
WBC	16	13.1±6.8	9.1±2.45	0.02
Febrile days	23	2.8±5.0	.13±.45	0.014
Debridements	29	.93±1.3	.14±.35	0.003
Wound cultures	28	2.8±2.3	.46±1.1	0.00001
Hosp. days	23	14.0±14.9	13.9±13.2	ns

the 30 (27%). There were no treatment failures. All wounds, except 1, are healed, closed, or currently granulating well. One pt, with an improving wound, died of gram negative sepsis during therapy. No adverse reactions were seen. It appears from this nonrandomized retrospective review that Techni-Care® is a safe and effective topical microbicide which may play an important role in the future care of complex, infected open wounds. Based on this data, we are beginning a controlled randomized trial.