



# Effectiveness of an enhanced silver-containing dressing in hard-to-heal venous leg ulcers: a randomised controlled trial


## Background



**Hard-to-heal wounds**, such as venous leg ulcers (VLUs), are a major challenge to healthcare systems globally




**Biofilm** has long been implicated in hard-to-heal wounds



**Aquacel® Ag+ Extra** is a gelling fiber dressing with antibiofilm properties

## Overview



**203**  
Patients with VLUs

Randomised  
**1:1**

**TREATMENT FOR 2–4 WEEKS**

- Aquacel® Ag+ Extra**
- Standard of Care (DACC dressing)**
- + Compression therapy at 30–40 mmHg**

**ENDPOINTS**

**Primary**

- Complete wound closure at week 12 (100% wound surface epithelialization)

**Other**


- Percent change in wound area
- Satisfactory clinical progress (40% wound area reduction)
- Time to complete wound closure
- Safety

## Results


**COUNTRY**

Aquacel® Ag+ Extra	COUNTRY	SoC* (DACC dressing)
20%	UK	21%
21%	Germany	21%
59%	Colombia	57%

**COMPLETE WOUND CLOSURE**



**75%**



**56%**

**35%** increased likelihood of achieving complete wound closure vs SoC\* (DACC dressing)

**56 days**


**70 days**

**Aquacel® Ag+ Extra**


**SoC\* (DACC dressing)**

**STATISTICALLY SIGNIFICANT**


**BASELINE CHARACTERISTICS**




Median age  
**68 vs 66** years




Female  
**71% vs 54%**



Mean BMI  
**31.8 vs 30.1**




Mean wound area  
**10.2 vs 17.3** cm<sup>2</sup>




Infection  
**7% vs 0%**

**PERCENT WOUND AREA REDUCTION**




**85%**




**61%**

**SATISFACTORY CLINICAL PROGRESS**




**77%**




**65%**

**ADVERSE EVENTS**




**5%**




**18%**


## Conclusion

Management of VLUs with Aquacel® Ag+ Extra versus SoC\* (DACC dressing) was associated with

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Higher rate of and shorter time to complete wound closure
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Greater mean percentage reduction in wound area
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Higher rate of satisfactory clinical progress
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Lower incidence of AEs

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