

WHY TREATING GRAZES CORRECTLY IS IMPORTANT

Grazes can easily be treated incorrectly which may cause them to take much longer to heal and may sideline sports people for longer than necessary. This leaflet is designed to help you treat grazes quickly and effectively to optimise the time required for healing and minimise the risk of unnecessary scarring and infection.

WOUND CLEANSING

As there are often several sites of injury, cleansing is best achieved using lots of tepid water under mild pressure to flush out dirt and see the proper extent of the wound. Flushing with water also removes the need for swabbing the wound with material which might contain further contamination. The water can also help reduce the swelling and slow some of the bleeding by causing constriction of the blood vessels in the area.

Research has shown that the advantages and effectiveness of antiseptic products, in comparison to water, are debatable for cleaning a wound and are not usually recommended. However it is very important to remove any gravel present in the graze as this can cause 'tattooing' of the skin.

Once the wound is clean it is sometimes (but not always) possible to see any remaining dirt/contamination which in serious cases may need to be removed by medical staff.

Any wound left without the protection of skin is susceptible to infection until new skin has formed. It is therefore a good idea to cover a wound even if it means simply using a plaster (if the graze is small). Apply the dressing as soon as possible after the wound has been cleaned.

HEALING

Research indicates that the best wound healing conditions include:

- moisture
- even temperature
- minimised risk of infection
- protection from further trauma.

It is important not to mistake the natural granulation process and hardening of the tissue (which is part of healing) for slough and try and remove it. A granulating wound has a reddish or pink hue due to the growth

Graze Management

of new capillaries and it may have a thin, pale, yellow coating which is a normal part of the healing process. This is often mistaken for dead skin. Granulation may take anything between two days to three weeks depending on the severity of the wound.

It is very important to change the dressings and carry out wound care regularly as this accelerates the healing process and reduces the risk of infection.

DRESSINGS

Exposing wounds to the air leads to the risk of further contamination, so it is recommended that the wound is protected.

Many people are reluctant to dress wounds as they traditionally believe that allowing the wound to 'dry out' speeds the healing process. Choosing appropriate dressings will create a micro-environment conducive to healing as well as acting to encourage the person to protect the injury.

Dressings might be selected on the basis of the following factors:

- wound type
- wound location
- stage of healing reached
- how long the dressing will be on
- cost
- inhibition of movement
- how conspicuous the dressing is.

Semi-permeable film dressings are one of the most recommended dressings as they are easily managed, can be left on during bathing, are inconspicuous and flexible and therefore allow movement. They also allow the wound to be monitored for infection and can be left in place for several days if no infection is present, making after-care simpler and cheaper. All major high street chemists will stock semi-permeable film dressings, trade names include Opsite, Flexigrid or Cutifilm.

If there is any exude (pus) a small piece of non-adherent absorbent dressing such as Melolin can be placed beneath the semi-permeable film dressing. This film dressing can be removed at night leaving just the non-adherent absorbent dressing on, as this is better at absorbing the exude during this time. A paraffin jelly dressing such as Vasaline can be used beneath the

absorbent pad to prevent any adherence. If the pad gets stuck to the wound, soak it off with a salt water solution.

MANAGEMENT

Generally absorbent dressings need to be changed daily while film dressings can be left for up to 5-7 days as long as the seal on the skin is intact.

Seek medical advice if:

- there is a high risk of scarring and the wound site is conspicuous, for example on your face
- if the graze is sited where there is inadequate amounts of tissue to allow healing, for example over a joint
- if healing appears to have stopped or is not progressing as quickly as expected.

QUICK MANAGEMENT GUIDE

- Rinse the graze with lots of water under mild pressure to flush out contamination
- Ensure that the wound is completely clean before applying a dressing
- The main aim is to create an environment that is moist, prevents further infection and protects the wound from further trauma
- Apply a semi-permeable film dressing which is transparent, flexible, waterproof, bacteria proof and self-adhesive. It allows moisture to evaporate, requires no secondary dressing and is particularly good over joints and for sports people
- If there is any exude (pus) from the wound a small piece of non-adherent absorbent dressing such as Melolin can be placed beneath the semi-permeable film dressing
- Replace the film dressing with a non-adherent absorbent dressing at night
- A paraffin jelly dressing can be used beneath the absorbent pad to prevent the wound sticking to the pad, if stuck to the wound soak off with a saline solution
- Absorbent dressings should be changed daily but a film dressing, if intact, can be left for 5-7 days
- Granulation (formation of the scab) may take several days depending on each individual - if you are unsure of the severity of the wound or suspect infection seek further advice from a GP or nurse.

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