

# Use of Spycra Protect in Epidermolysis Bullosa (EB)

Jane Clapham Lead EB CNS • Chris Bloor EB CNS • Guy's & St Thomas' NHS Trust

## Introduction

EB is a group of inherited fragile skin disorders for which there is no known cure. There are 4 main types ranging in severity however the commonalities are characterised by blister formation in response to the slightest friction or trauma. Treatment aimed at minimising pain & reducing risk of infection. Open lesions occur at the site of blistering which may result in secondary infections; blisters are not self-limiting & must be lanced.

EB Simplex (EBS) is often perceived as a milder form of EB however it can be very disabling, affecting the quality of life. Blistering is primarily to hands & feet, but can occur on any part of the body exposed to friction. A major problem for those affected is protection of vulnerable areas such as hands, feet & bony prominences. Good protection can reduce the number of blisters & severity of skin damage. Removal of many adhesive medical products can cause further skin damage. Soft silicone products are mostly well tolerated as can usually be removed without further pain & damage to fragile skin.

## Method

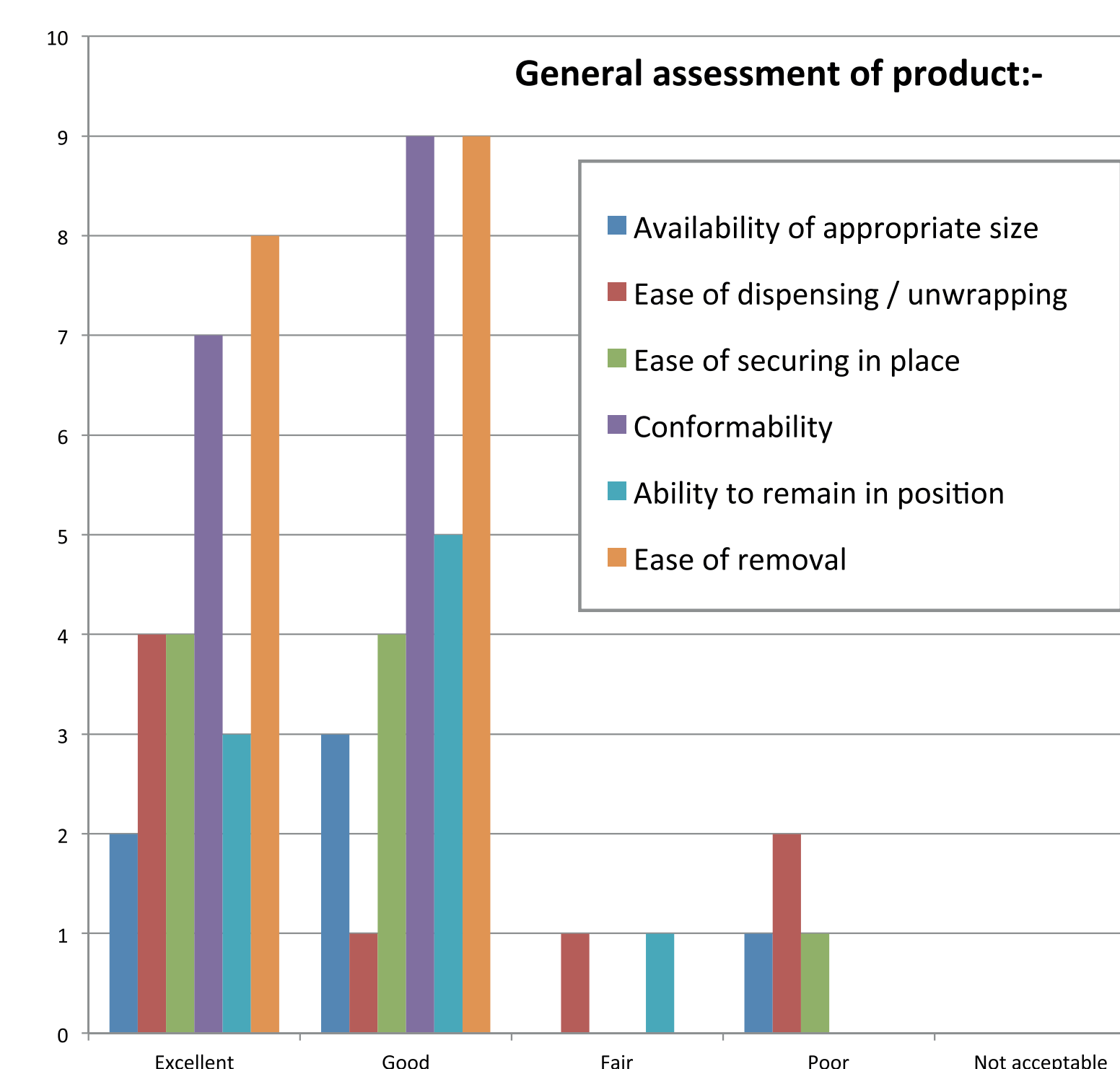
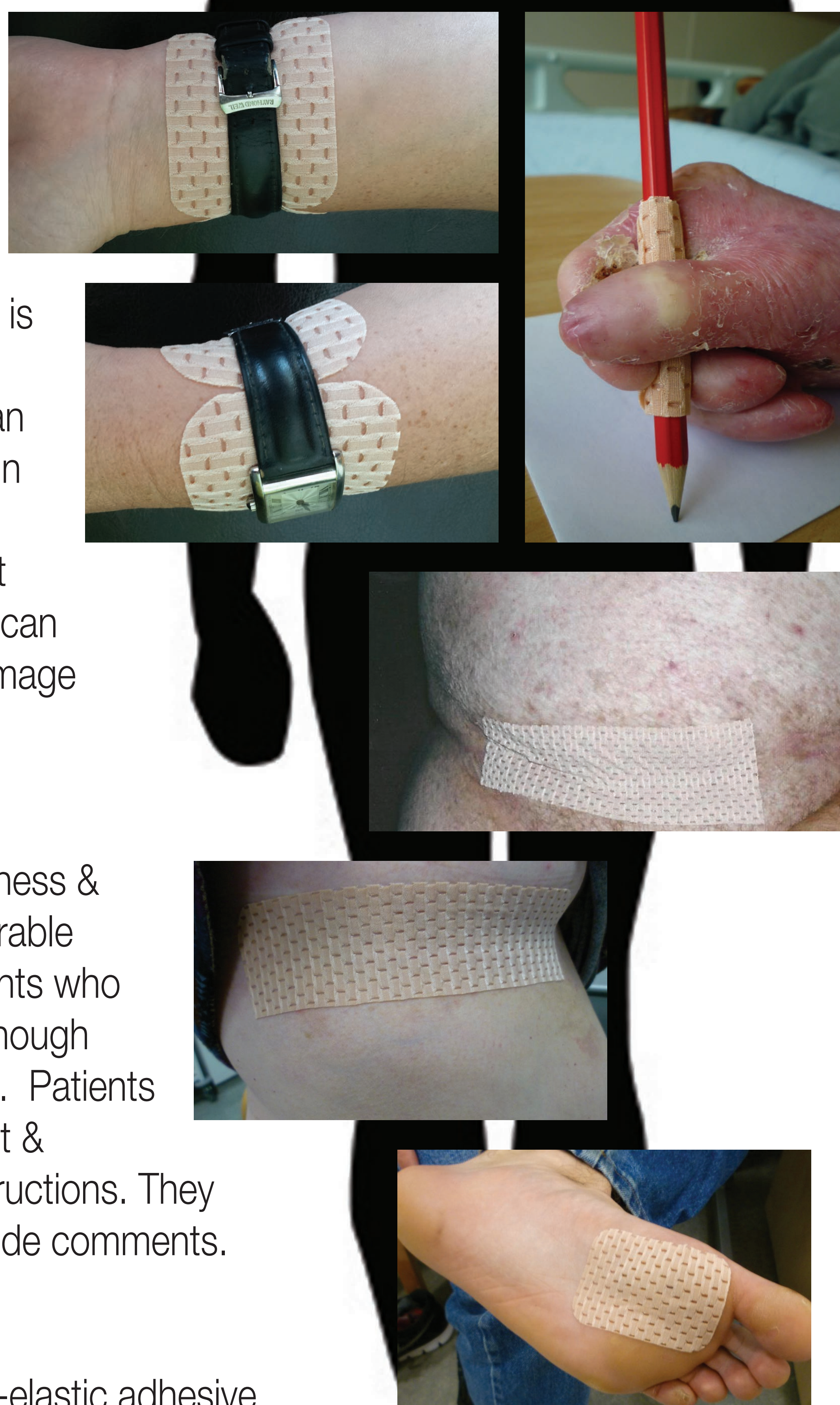
Aim of this evaluation was to assess effectiveness & tolerability of Spycra Protect in this very vulnerable group, whilst maintaining comfort. Most patients who evaluated Spycra Protect suffer with EBS, although patients with other types of EB were included. Patients were provided with a supply of Spycra Protect & instructions on use as per manufacturers instructions. They were asked to complete an evaluation & provide comments.

## The product

Spycra Protect is a soft, one-sided silicone bi-elastic adhesive dressing. The bi-elasticity is purported to reduce friction through complex 3D weave of the fabric thus reducing risk of blistering from shearing forces. The pore structure allows the dressing to breathe; the non adherent dressing can be easily removed or repositioned without pain or further skin damage. It can be used directly onto intact skin, minor wounds or blister sites. It is not designed to absorb, if the wound is wet an alternative dressing would be required.

## Discussion

A big advantage of Spycra Protect is its conformability; the thinness allows the dressing to be used on areas such as the feet. Feedback suggested the dressing could be a stickier. However there is a fine balance between a dressing not sticking & falling off or being too sticky it causes further skin damage.



## Results

Spycra Protect was used on the following areas

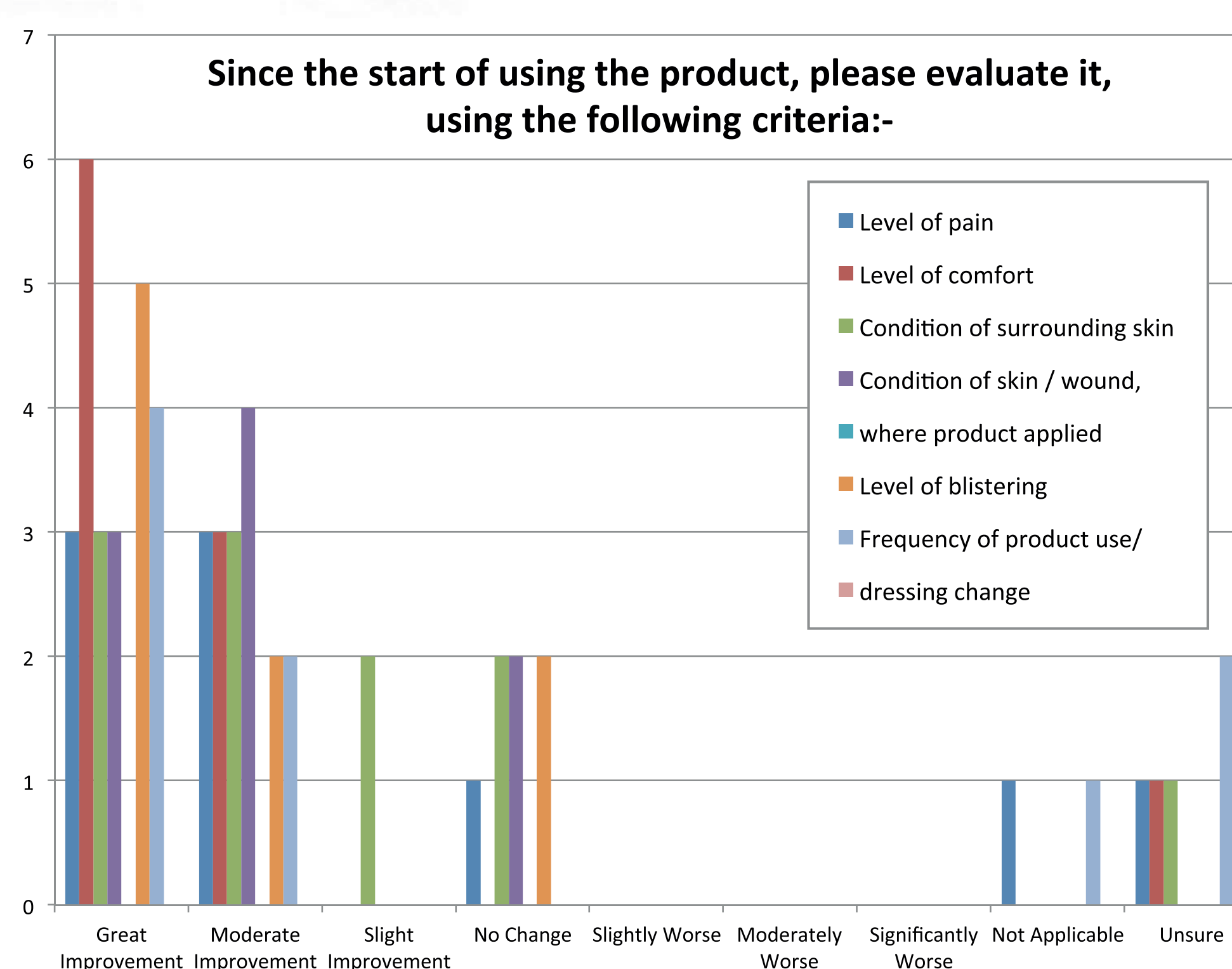
- Feet, toes, heels, ankles
- Bra & waste band areas
- Elbows
- Sacrum

Most patients changed the dressing daily although some re-used if it had been placed on intact skin.

Innovative & interesting uses were identified such as securing dressing post operatively in difficult areas.

## Conclusion

Results demonstrate the dressing is well accepted & comfortable. Most patients found it excellent, protecting their fragile skin, some found it eliminated skin damage from friction altogether. Evidence also suggests it is best suited to patients with EBS, those with other types of EB did not find it as useful. This dressing is a valuable addition to people with EB.



This Poster was supported by Bullen Healthcare, the distributor of Spycra Protect.



Generations of Quality Healthcare



General assessment of product:-	Excellent	Good
Availability of appropriate size	2	3
Ease of dispensing / unwrapping	4	1
Ease of securing in place	4	4
Conformability	7	9
Ability to remain in position	3	5
Ease of removal	8	9

Since the start of using the product, please evaluate it, using the following criteria:-	Great Imp	Moderate Imp
Level of pain	3	3
Level of comfort	6	3
Condition of surrounding skin	3	3
Condition of skin / wound, where product applied	3	4
Level of blistering	5	2
Frequency of product use/ Dressing change	4	2