

# AS WELL AS KICK-STARTING THE HEALING PROCESS, EST MAY PROVIDE A VALID ADJUNCT TO ORAL MEDICATION IN THE ATTEMPT TO ADDRESS PERSISTENT WOUND PAIN IN PEOPLE WITH LONG-STANDING HARD TO HEAL WOUNDS

Despite widespread use of analgesics, wound pain often remains unresolved; this is a major unmet need in the management of hard to heal wounds.

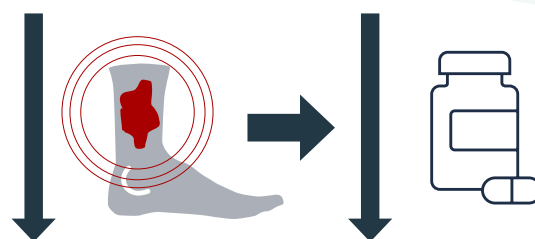
**Objective:** A 20-patient study investigated the effect of Accel-Heal Solo on wound pain and associated analgesic consumption. Preliminary case results were presented.

## Methods:

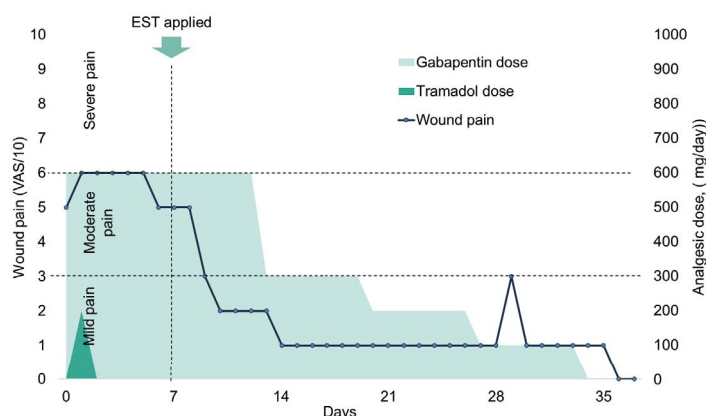


- 20 patients
- Mostly VLU
- Wound pain VAS was greater than 4/10 in all enrolled patients
- Daily wound pain and analgesic use was recorded in a diary for a 7-day run-in period and during treatment with Accel-Heal (applied as two back-to-back applications (24 days of therapy)

## Results:



- As wound pain reduced, the dose of analgesics needed to manage wound pain was reduced
- Reductions in wound size were also observed



## In the case shown:

- Wound pain reduced from 5-6/10 in the 7-days prior to Accel-Heal Solo, to 1/10 within 7-days of treatment
- Occasional tramadol use (dark green) was no longer required
- Gabapentin dose reduced gradually (pale green) and eventually was ceased 4-weeks after starting treatment

Conclusion and interpretation: Treatment of painful, hard to heal wounds with EST resulted in a meaningful reduction in wound pain that enabled a corresponding reduction in pain medication, including the complete cessation of controlled analgesics in some cases. Cessation of controlled analgesics in people with hard to heal wounds, typically elderly and medically compromised individuals, is important because side-effects from these medications can lead to an increased risk of falling and other treatment-related adverse events

[VIEW THIS ARTICLE ONLINE>](#)

[VIEW ACCEL HEAL PRODUCT INFO>](#)