SilVet$ Solution

Wound Management Case Study: Horse H2

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Wound Management Case Study - Horse H2

Breed: Paint horse	**Wound:** Acute, injury
Age: 10 months	**Wound location:** Left laterodorsal metatarsus
Sex: Male	**Exudate level:** -

Presentation:

The foal got stuck with his hind limbs in a space between the bars in his box. The entire area of the left laterodorsal metatarsus was torn, leaving exposed bone with engraving marks. (**Fig. 1 & 2**).


Fig.1


Fig.2

Management:

At the beginning of treatment, the laceration was contaminated with feces and dirt. Rinsed well with a stream of water, and irrigated with Silvet-Solution.
The wound dressing contained a sterile abdominal pad socked in Silvet-Solution, an irrigation tube with the tip exposed.
This dressing method allows constant rinsing of the wound and remains moist without frequent dressing changes.


Fig.3

<u>The treatment method</u>:

- Irrigation frequency thru a tip (without dressing changes): 2-3 times a day (**Fig.3**).
- Dressing changes : Once in a week. After removing the dressing, the wound was refreshed with gauze soaked in Silvet-Solution and dressed again (as described in **Fig.3**).

No surgical debridement (only Silvet-Solution as a Autolytic & Mechanical debridement), no other topicals were used, no grafting.

<u>Observation: 18 days after</u> (**Fig.4**)

The bone is almost covered, substantial wound contraction, low-level exudates (the amount of exudates decreases from dressing to dressing), no unpleasant odor, healthy granulation tissue, and no sign of infection. Silvet-Solution promoted wound moist and defended from microbial contamination without tissue toxicity, coloring or staining, accelerated tissue granulation and reduced pain. No local irritation or allergic reactions were observed , did not harm healthy tissue.



Fig.4

Outcome:

Complete closure of the wound. Successful end of the treatment. Combining Silvet-Solution in the treatment of wounds significantly improved the final result compared to the traditional wound dressing. i.e low scar size with no exuberance granulation tissue as shown in Fig.5 (2.8 months after injury-**Fig. 5**).


Fig.5

SilVetS Solution

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