Traditional Wound Tx Persists Without Evidence

BY GREG MUIRHEAD
Contributing Writer

MAUI, HAWAII — Common practices in wound treatment, such as wearing sterile gloves and using saline instead of tap water for irrigation to prevent infection, are not supported by evidence from clinical studies but are continued from fear of lawsuits, Dr. Adam Singer observed at a conference sponsored by the American College of Emergency Physicians.

Dr. Singer examined several common wound treatment practices:

- **Sterile vs. nonsterile gloves.** A multicenter, single-blind, randomized controlled trial had 816 patients (of 9,000 patients) randomized to be treated with either sterile gloves (408) or without sterile gloves (408) (Ann. Emerg. Med. 2004;43:362-70). There was a 97% follow-up rate after 1 week. Infection rates were 6.1% for those patients treated with sterile gloves, compared with 4.4% for those treated without sterile gloves. “Look at how many patients were screened, 9,000, while only 816 were entered,” he said, adding that this suggests a selection bias. Nevertheless, the differences between groups were not statistically significant. “So, there’s no difference whether you use sterile gloves or you do not use sterile gloves,” remarked Dr. Singer, professor and vice chairman for research in the department of emergency medicine at the State University of New York at Stony Brook. But given concerns about potential lawsuits, he added, “I just put on the gloves—for a dollar, it’s not worth the hassle.”

- **Wound irrigation in children: saline or tap water?** A randomized, controlled trial compared outcomes of wounds irrigated with saline in 271 children with outcomes of wounds irrigated with tap water in 259 children (Ann. Emerg. Med. 2003;41:609-16). In the tap water group, there were more hand wounds, which increased the risk of infection. But the infection rate was 2.8% for saline-irrigated wounds, compared with 2.9% for tap water-irrigated wounds. “The infection rates were almost identical,” Dr. Singer said, “but I don’t use caps and masks.”

- **Effect of cap and mask on infection rates.** A study compared infection rates for 442 lacerations (J Am. Med. Assoc. 2003;290:101-7). In the tap water group, there were more hand wounds, which increased the risk of infection. But the infection rate was 2.8% for saline-irrigated wounds, compared with 2.9% for tap water-irrigated wounds. “The infection rates were almost identical,” Dr. Singer observed. But he doesn’t use water in practice, he added—for the same reason that he uses sterile gloves.

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