Research proposal larvae therapy

Health & Medicine

Natalie Merrier Student nurse yr Declaration of interest: I have chosen to investigate this topic as I have only worked with one patient using lave therapy treatment (contained) and was often designated the task of redressing and watering the lave, this particular gentleman did not mind the therapy and referred to the lave as " his little friends" I could not help but wonder f he wound have been so compliant if they were loose in his wound and if this would have made any difference to the healing process.

Abstract: This article plans to compare the use of contained or caged maggots to those placed directly onto the wound bed itself (referred to in this research proposal as free range). All care has been taken to ensure that patient safety comes first and if at any point a healthcare professional feels that the treatment is not affective for the patient they will be excluded from the research and commenced on a more suitable or preferred treatment.

I expect to find in my results that free range maggots are more effective, however patient tolerance will be better with contained lave due to fear of lave escaping the dressing and sensation if overlapped onto healthy skin. Introduction Maggots, many recent articles comparing debasement versus maggot therapy. Less information available on the application of maggots and how that effects the treatment and effectiveness of the maggots ability to debris, disinfect and stimulate healing. Rotational method of free range maggots Vs.. Contained maggots in gauze or muslin bags. Validity and reliability Lit review/background " Accounts of maggots used on open wounds date back to the Old Testament. " (Bare 1931; Peachtree and Sherman 1983) Bear 1931, treated a WWW soldier on a battlefield using maggots for a femur fracture and abdominal wound. Observed that the

wounds were covered in maggots, after cleaning the wounds noticed that the wound bed consisted of healthy granulating tissue. U to this he began studying maggots and there effect on open wounds in detail and pioneered the international treatment of skin infections withchildhoodfly rave in 1931 it was deemed safe, effective and economical at this time and was widely used until 1950 when antibiotics and surgical debarment therapy became more popular treatment option as suggested by; (ApothecariesEducation& Research Foundation [BETTER], 2003; Fleischmann, Grabbers, & Sherman, 2004; Maggots on wounds have been used for Debarment, disinfection, stimulation of healing and billion inhabitation and eradication.

Although these benefits have use particularly useful in pressure ulcer treatment and diabetic foot ulcers. As suggested y Bear (1931), Horn Cob and Gates (1976) Sherman (2002), Stevedore (2004) and -rampant (2007) Research has been conducted into the sub-species of maggots that is most effective by: REFERENCE And also research has been conducted into patient tolerance of the treatment by: REFERENCE However, less research has been done to see if patient tolerance and containment are directly related, and the extent that containment hinders the debarment process.

Sample Inclusion and exclusion: No participant's with services sepsis or gangrene and need amputation (due to the risk of patient) one of the sample group shall be diabetic as this will affect the rate of healing and cause results to be skewed. For the same reason the wounds on each patient must be about the same size and depth with equal quality of tissue (ox. CM 70% slough, for example). To keep my research fair and ethical I intend to select

clients of similar age andhealthfor a fair opportunity for contained and free ranged maggots.

Due to the nature of this research in intend to select 6 patients and use 3 for each option as long as they consent and tolerate the treatment. Hypothesis/predicted results: I predict that although " free range" maggots will be more effective at debarring the wound quickly, suggested to be more effective in previous research articles Stevedore P, Jacobin CE, Osama a study conducted in the Netherlands.

Wimp Fleischmann, Martin Grabbers (2004) patient preference will lie with contained or caged lava, in addition suggested that the staff applying the dressing would generally prefer the contained lava to free ranged ones. METHOD: (quantitative) statistical numerical data, comparing contained to free range goats on open wounds and infected skin tissue. (Quantitative) survey of the experience for the patient using contained or free range maggots, the combination of both meaner that I will use a triangulation method.

To determine the patients feelings towards the treatment I will provide a simple questionnaire. To determine the effectiveness of the treatment itself the wounds will be measured every 2 days when the dressings are removed to give water to the maggots with aphotoat start and finish helping distinguish the improvement of quality of tissue in the wound bed. Analysis Evaluation Results Ethics Patient aware of research? Know they are able to opt out of experiment at any time? F maggot treatment no longer suitable MET will recommend stopping the maggot treatment and using alternative

therapy such as surgical debasement. References Bare, W. S. (1931). The treatment of chronic storytelling with the maggot (larvae of the blowfly). Journal of Bone and Joint surgery, 13, 438-475. 8. Bare WAS. Sacra-iliac Joint? arthritis deformations? viable antiseptic in chronic storytelling.