SMTL Dressings Datacard

Product Name:	**KALTOSTAT CAVITY DRESSING**
Classification Name:	**Dressing Calcium/Sodium Alginate Cavity**
Manufacturer:	**ConvaTec Ltd**

Description

[*** display ps-kaltostat-cav ***]

[*** linked kaltostat-cav-01 ***]Kaltostat Cavity Dressing consists of an absorbent fibrous rope composed of the mixed calcium and sodium salts of alginic acid in the ratio of 80:20. In the presence of exudate or other body fluids containing sodium ions, the fibres absorb liquid and swell and calcium ions present in the dressing are partially replaced by sodium to form a gel-like material. This overlays the wound and provides a micro-environment that is believed to facilitate wound healing.

Indications

Kaltostat Cavity Dressing is indicated as a primary dressing for the management of heavily exuding cavity wounds including [*** linked p-sore-g4-01 ***] pressure sores and surgical and traumatic wounds healing by secondary intention.

Kaltostat Cavity Dressing, is of little value if applied to dry wounds or wounds filled with dry slough or hard black necrotic tissue.

Contra-Indications

Known sensitivity to Kaltostat or its components.

Method of use

The dressing, which can be teased out to aid insertion, should be gently layered or coiled into the wound to the level of the surrounding skin, not packed in tightly. This will allow the alginate fibre to swell as it absorbs fluid and thus expand to fill the cavity. Once in place the dressing is covered with a second sterile dressing held in place with surgical tape or a bandage as appropriate. The selection of the secondary dressing will be governed by the condition of the wound. If large quantities of exudate are produced a simple absorbent dressing pad should be applied to increase the absorbency of the dressing system. More lightly exuding wounds may be covered with an adhesive product such as a film dressing or a hydrocolloid wafer. The dressing can be removed with forceps or the gloved fingers. A flush with sterile normal saline may aid removal from deeper cavities.

Frequency of Change

The interval between dressing changes will depend entirely upon the state of the wound but should be undertaken when the maximum absorbency of the system is reached as indicated by leakage or when strike-through occurs. Daily changes may be required initially but the dressing change requence should reduce as healing progresses. Kaltostat should not be left on longer than 7 days without changing.

Warnings

Wounds that show signs of clinical infection may be dressed with Kaltostat, which should be changed daily. In these situations a non-adhesive secondary dressing is recommended. Adjuvant therapy should be initiated as appropriate.

Presentation

Kaltostat Cavity Dressing is presented individually wrapped in a peel pouch, sterilised by gamma irradiation.

Sizes

2 g ball

Legal Category

Pharmacy Only [P]

Bibliography

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2. Sirimanna KS, *et al.,* A randomized study to compare calcium sodium alginate fibre with two commonly used materials for packing after nasal surgery, *Clin. Otolaryngol,* 1992, **17,** 237-239.

3. Dawson C, *et al.,* Use of calcium alginate to pack abscess cavities: a controlled clinical trial, *J. Coll. Surg. Edinb.,* 1992, **37,** 177-179.

4. Thomas S, A guide to the properties and uses of the different alginate dressings available today, *J. Wound Care,* 1992, **1,** (1), 29-32.

5. Gibson C, Cavity dressings ancient and modern. A little research. *British Journal of Theatre Nursing,* 1993, **3,** (1), 8-10.

6. Young MJ, The use of alginates in the management of exuding, infected wounds:Case studies. *Dermatology Nursing,* 1993, **5,** (5), 359-363 & 356.

Revision Details

Revision Author	Dr S. Thomas
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Please inform SMTL of any inaccuracies or changes required in this datacard.

Disclaimer

This datacard has been prepared as an aid to contracting for purchasers in the NHS in Wales, and should not be used as a substitute for literature, instructions or training from the manufacturers of the devices.