Phew! What's That Smell?

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Odor is a problem in many aspects of wound care. Generally, foul smell relates to anaerobic colonization; the presence of aerobic organisms of gut origin and yeasts also can exacerbate unpleasant smells. Controlling odor or the perception of odor is important to patients and everyone with whom they interact. Patients may acclimate to odors emanating from wounds but remain concerned how others perceive the smell.

A topical metronidazole product can work wonders, eliminating the patient's wound odors within an hour or so of application. Metronidazole gels can help dry out weeping wounds; some patients prefer the aesthetics of a cream. Although this is not therapy for a frank tissue infection, it provides a way to deodorize what is often a thin but tenacious biofilm. Application is usually painless; gels may sting a bit. An aqueous solution of gentian violet is similarly efficacious and less expensive; in addition, gentian violet can effectively suppress methicillin-resistant *Staphylococcus aureus* (MRSA) that may be colonizing the wound. However, this product may stain skin as well as items with which it makes contact. Nasal vestibule application also may be useful on MRSA carriage but may cause transient burning and stinging related to the alcohol in commercial preparations. These agents can be used as frequently as needed to suppress odor.

For providers and family who may suffer an involuntary gag response while interacting with a smelly wound, the fix is simple: placing a small dab of inexpensive perfume on a surgical mask will protect from splatter and involuntary retching.

Pearls for practice: if possible, treat the source of the odor (often an infection) and for quick relief, clinicians and patients should avail themselves of a pleasant fragrance. - OWM

Commentary from Ferris Mfg. Corp.

As the accompanying article points out, wound odors can be a difficult problem to manage.

Clinicians often select PolyMem QuadraFoam formulation dressings, regular or silver versions, to help reduce wound odor and help close wounds. These dressings continuously cleanse, fill, absorb, and moisten wounds.

Wound odor often is related to wound bioburden. PolyMem formulation dressings contain a non-toxic, non-ionic, tissue friendly wound cleanser that continuously helps release the bonds between viable and non-viable tissue, facilitating bioburden removal. Additionally, the dressing contains a superabsorbent starch copolymer that draws the liquefied slough onto the surface of the dressing through osmotic action, thus assuring easy removal. Plus, these dressings contain glycerol, a substance known to help reduce wound odors.

Clinicians report that when using these dressings on Pseudomonas or MRSA-positive wounds, patients and caregivers detect odor only during dressing changes. Practitioners also note that after just a few dressing changes wounds have made substantial progress and and the odor is completely eliminated.

PolyMem Silver QuadraFoam formulation dressings provide all the benefits of the regular dressing plus the added antimicrobial benefits of silver, which can provide additional help in reducing wound odors. These dressings include: PolyMem Silver®, Shapes by PolyMem Silver®, PolyMem Max Silver®, and PolyMem Wic® Silver cavity filler. These silver dressings are tissue-friendly because the silver is locked in the dressing, not released into the wound bed. In an independent study,[1] the PolyMem silver dressing was found to be the most absorbent compared to four other silver dressings and to contain one of the highest silver contents.

Reference: [1]Burd A, Kwok CH, Hung SC, et al. A comparative study of the cytotoxicity of silver-based dressings in monolayer cell, tissue explant, and animal models. *Wound Repair Regen*. 2007;15(1):94–104.

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