

PLASTIC SPRAY DRESSING IN OBSTETRIC AND GYNAECOLOGICAL PRACTICE

by

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Introduction

Plastic has revolutionised the methods of routine management in all walks of life and surgery also has not escaped it. Wound dressing—an everyday problem, it appears has been greatly helped by plastic. Since last two decades plastic spray wound dressing has become popular. It is recently introduced in our Country. In everyday work one always wants efficiency, simplicity and economy. Healex Spray—plastic wound dressing material according to our study will be a great help for the same.

Material and Method

The use of Healex Spray in Obstetric and Gynaecological surgery is studied at The Department of Obstetrics and Gynaecology, Government Medical College and Civil Hospital, Surat. Following objectives were kept in mind.

(i) Its use in everyday operation of abdominal tubectomy.

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(ii) Its use in perineal wounds of a. Episiotomy. b. Perineorrhaphy.

In all there are 275 cases of abdominal tubectomies, 55 of episiotomy and 25 of perineorrhaphy. Comparative series of 100 cases of abdominal tubectomy and 50 of episiotomy dressed with conventional dressing were also studied.

Healex Spray: It is a transparent plastic liquid which when sprayed dries immediately and seals the wound.

Its composition is as under:

Polyvinyl Polyner	1.26%
Benzocaine	0.36%
Propellant (11/12, 50:50)	70.00%
Solvent & non-toxic perfumes	
q.s. to	100%

(1) Abdominal Tubectomy

The operation is done with modified Pomeroy's method. With standard technique the wound is closed. On an average the wound is about 1" to 1½" long. After closure it is completely cleaned and is sealed with Healex Spray extending about ½" on all sides. We as a routine do not give antibiotics post-operatively. They are administered as and when required.

It is seen that the incidence of infection is considerably less among those who were dressed with Healex Spray.

TABLE I
Place of Delivery

	Healex spray	Conventional
Hospital	179	51
Home	96	49
Total	275	100

Incidence of wound infection

Out of 55 cases of episiotomy dressed with Healex Spray 5 had wound infection. Three had complete wound gaping whereas 2 had superficial gaping. These 3 cases with complete gaping were emergency admissions.

TABLE II
Hb% in Relation to Wound Infection

Hb%	Less than 8 Gm. %	8 to 10 Gm. %	More than 10 Gm. %	Total
Healex Spray	81	164	30	275
Conventional	55	33	12	100
Wound infection:				
Healex Spray	03	05	Nil	8 (2.9%)
Conventional	06	01	Nil	7 (7%)

(2) *Healex Spray in Perineal Wound*

(A) Episiotomy: There were 55 cases dressed with Healex Spray. We have a practice of giving left medio-lateral episiotomy. Episiotomy wound is sutured in routine manner. There were 37 booked and 18 emergency admissions. Simultaneously 50 cases of episiotomy dressed with conventional dressing were also studied. In this series 34 were booked and 16 were emergency admission.

From among the cases dressed with conventional dressing wound infection occurred in 7 cases—2 complete gaping and 5 superficial gaping.

Comment

It is observed that the problem of daily perineal care with episiotomy was eased to a great extent with Healex Spray. Gauze and Cotton is saved in considerable amount. As far as infection is con-

TABLE III
Hb% and Wound Infection in Cases of Episiotomy

Hb%	Less than 8 Gm. %	8 to 10 Gm. %	More than 10 Gm. %	Total
Healex Spray	6	43	6	55
Conventional	2	39	9	50
Wound infection:				
Healex Spray	Nil	5	Nil	5 (9.1%)
Conventional	1	4	2	7 (14%)

Cases of episiotomy showing their Hb% and wound infection.

cerned it is mainly due to infection already present due to the type of labour.

(B) Healex Spray in Perineorrhaphy: The spray is used over perineorrhaphy in gynaecological operations. There are 25 cases in this series. Evidently the cases were surgically fit and better prepared as compared to those of episiotomy. All the 25 cases had perfect healing.

In one bottle of 114 ml., 15 cases of perineal wound were dressed as compared to 30 cases of abdominal tubectomy.

Conclusion

Healex Spray is found perfectly aseptic, convenient and comfortable wound dressing. This is especially so in perineal wounds which are always soiled with discharges from vagina. The spray being water tight does not allow the infective

discharges to contaminate the wound. It is a great ease in nursing care and in routine activities of the patients. Besides it is economical as it saves lot of gauze and cotton. For abdominal wounds also it is quite effecacious. The wound can be seen through the spray and thus infection can be detected earlier. It, being water tight does not allow wound infection due to perspiration which is a problem in our country.

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