Role of nurses in the treatment of injury due to drug extravasation with vesicant property

Authors: MARIA DO CARMO PEDROSA; JULIANA LUCINDA DOS SANTOS; ANA CRISTINA MONTES CAETANO; KEILLA RODRIGUES CARVALHO; PAULA PIRES DE SOUZA. **HOSPITAL DA CRIANÇA, GOIÂNIA – GOIÁS - BRAZIL.**

Introduction: The care of the nursing team with peripheral intravenous therapy in neonates have fundamental importance in the prevention and treatment of incidents caused by extravasation of vesicant solutions. Leakage injuries are produced by the efflux of drugs from the circulation into the perivascular spaces. The vesicant agents have the ability to cause local inflammatory reaction, skin necrosis, infections and scars. Being the most frequent complication in peripheral venous therapy.

Objective: To describe the evolution of a drug extravasation injury with vesicant property and the treatment provided by the nursing team to a newborn on intensive care.

Methods: The case report of a newborn full-term hospitalized in a private hospital. The patient came to the Neonatal ICU for cardiac evaluation, with Patau syndrome, absence of eyeball, ambiguous genitalia, presenting a lesion due to an extravasation of vesicant medication on the back of the right foot, necrotic lesion measuring 7x5 centimeters. At principle, the programming for the treatment of the injury would be chemical debridement with hydrogel, however, to no avail. In the sequence, was requested a surgical debridement and after, performed dressing with aqueous solution of polyhexanide, polyhexanide gel and Antimicrobial Dressing for three days, with changing interval every 24 hours. Performed two dressings with antimicrobial gauze, after the presence of bleeding, was replaced it with non-adherent gauze with polyhexanide gel, performing the exchange every day, using laser 1J LED red, once a week. Finished with rayon non-adherent gauze impregnated with a dermo protective oil based on EFA (Essential Fatty Acids), TCM (medium chain triglycerides), Vitamins A and E, Copaíba and Tea Tree oils in the lesion bed and skin protector based on micronized zinc oxide at the edges and perilesional areas.

Results: After surgical debridement and dressings, we had the total epithelialization of the skin with excellent healing, with no impairment maintaining limb perfusion for the entire period of one month and ten days.

Conclusion: Topical treatment with the dressings used, associated with laser therapy, was paramount for the total recovery of the tissue. For the nursing team involved in the process the importance of the safe assessment of stages and evolution of the injury, for product decision and coverage to be used at the Hospital.

みんっさん、ありがとございます.

Contact: Maria do Carmo +55 62 991012013