

# Use of RENASYS<sup>◇</sup> GO Negative Pressure Wound Therapy System (tNPWT) for patients with acute or chronic wounds in a hospital at home (H@H) setting resulted in positive clinical, patient and health economic outcomes

Rossato M, Ryrie M, Robinson M, Searle R, Murdoch J. Use of NPWT as part of a Hospital @ Home wound management service. *JCN*. 2021;35(4):50–57.

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## Key points



**Significant reduction in wound area and volume**  
from baseline to Week 5  
( $p < 0.005$ ; all time points)

**Significant improvements in patient quality of life**  
from baseline to Week 5  
( $p < 0.001$ )





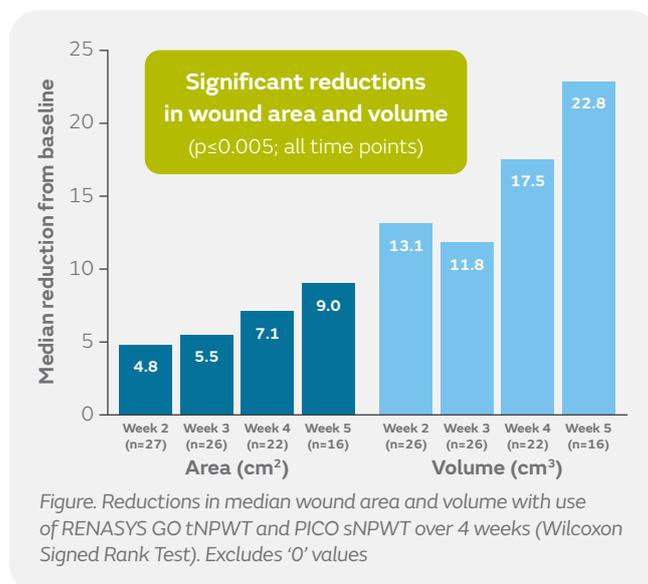
**£5,256 per patient**  
estimated mean cost savings compared with hospital in-patient care

## Overview

- A service evaluation at one UK community nursing base offering H@H using RENASYS GO tNPWT and PICO<sup>◇</sup> Single Use Negative Pressure Wound Therapy System (sNPWT) for wound management
- Patients who were discharged from the local acute hospital service and required NPWT were included (n=31)
  - Most wounds were amputation sites (51.6%) or diabetic foot ulcers (22.6%)
  - Two patients had chronic wounds ( $\geq 6$  weeks in duration)
- Twenty-nine patients received RENASYS GO tNPWT, one patient received PICO sNPWT; one patient had both
- Wound characteristics, NPWT utilisation and quality of life (EQ-5D-5L questionnaire) were recorded prospectively at scheduled H@H visits until discharge from the service
  - Costs of H@H were also estimated
- Median wound length, width, depth, area and volume at baseline (Week 1) were 5.0cm, 4.3cm, 1.0cm, 14.9cm<sup>2</sup> and 18.8cm<sup>3</sup>, respectively

## Results

- Mean time from hospital discharge to first H@H visit was 1.8 days
  - Mean duration of H@H NPWT was 29.2 days
  - Mean duration of treatment was 32.1 days for RENASYS GO tNPWT and 15.5 days for PICO sNPWT
- Significant reductions in median wound area and volume were achieved from baseline to Week 5 ( $p \leq 0.005$ ; Figure)
- Thirty patients were discharged from the H@H service due to no longer requiring NPWT (one patient was admitted to hospital for an unrelated condition)
- Patient quality of life significantly improved from baseline to Week 5 ( $p < 0.001$ ; all time points)
  - EQ-5D-5L score increased from 0.58 to 0.78
  - EQ-Health VAS score increased from 53.6 to 76.0
- Use of H@H resulted in estimated £5,256 mean cost saving per patient (£180 per patient per day) compared with in-hospital treatment



## Conclusions

Use of a H@H acute wound management service incorporating RENASYS GO tNPWT and PICO sNPWT by one UK community nursing base, resulted in significant improvements in wound outcomes and quality of life, as well as estimated mean cost savings per patient of £5,256 compared with in-hospital treatment.

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