

P.E.A.R.L.S. Practical Evidence About Real Life Situations



Skin grafting effective for venous leg ulcers

Clinical Question	How effective is bilayer artificial skin grafting under compression in venous skin ulcers?
Bottom Line	Applying bilayer artificial skin in conjunction with compression bandaging increases the chance of healing a venous ulcer compared with compression and simple dressing (NNT = 5 for 6 months' treatment).
Context	Venous leg ulcers are a recurrent, chronic, disabling condition, affecting up to 1 in a 100 adults at some time. Prevalence increases with age, and is higher among women. Skin grafts may be taken, or grown into a dressing, from the patient's own uninjured skin (autografts), or applied as a sheet of bio-engineered skin grown from donor cells (allograft).
Caveat	There was not enough evidence to determine whether other types of skin grafting, such as xenografts (preserved skin from other animals such as pigs) increased the healing of venous ulcers.
Reference	Jones JE et al. Skin grafting for venous leg ulcers .Cochrane Review 2007. Issue 1. This review contains 15 trials and 768 participants.
Date (Author)	May 2007 (Brian R McAvoy)

NNT = numbers needed to treat to benefit one person

NNH = numbers needed to harm to benefit one person

Both NNT and NNH are only reported if the studies or pooling of studies is statistically significant

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