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# **VETERINARY COMPOUNDING WOUND MANAGEMENT & SCAR REDUCTION IN HORSES**

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# HOUSEKEEPING



**Cell Phones**



**Download the Slides**



**Questions**



**No photography,  
audio, or video  
recordings**



# DISCLAIMER

DISCLAIMER: The information contained in this program, which may include treatment modalities, diagnostic and therapeutic information, and instructions related to regulatory guidelines and current standards of practice for pharmacy compounding, is FOR EDUCATIONAL PURPOSES ONLY and should not be taken as a treatment regimen, product indication, suggested treatment modality, or suggested standard of practice. NOTE TO MEDICAL OR ALLIED HEALTH PROFESSIONAL: Any treatments, therapies, or standards of practice must be fully investigated and prescribed by a duly licensed medical practitioner in accordance with accepted professional standards and compendia. Any regulatory or practice standard must be fully investigated by a licensed pharmacist in accordance with accepted professional practice standards and compendia.



# SELENA BOYD, BPharm, BSc, MPS



- An experienced community pharmacist and manager
- Pharmacy academic at Queensland University of Technology in Brisbane, Australia since 2008
- Research area is in veterinary compounding- horse wounds and scarring
- Past member of the Queensland Three Day Eventing squad





# INTRODUCTION



**Cost of this horse \$27 500 AUD**  
**Cost of treatment \$10 000 AUD**



**Cost of Sylvie \$30 000**



**Cost of racehorse \$200 000 AUD**



**WARNING:**  
*Some Images May Be Graphic*



# BACKGROUND

## PROBLEMS WITH HEALING

- Distal limb wounds are problematic because 2nd intention repair is subjected to numerous complications
- Possible causes include:
  - predisposition for bacterial wound contamination
  - ↓ blood supply,
  - high motion due to highly mobile joints,
  - relative deficiency of soft tissue coverage

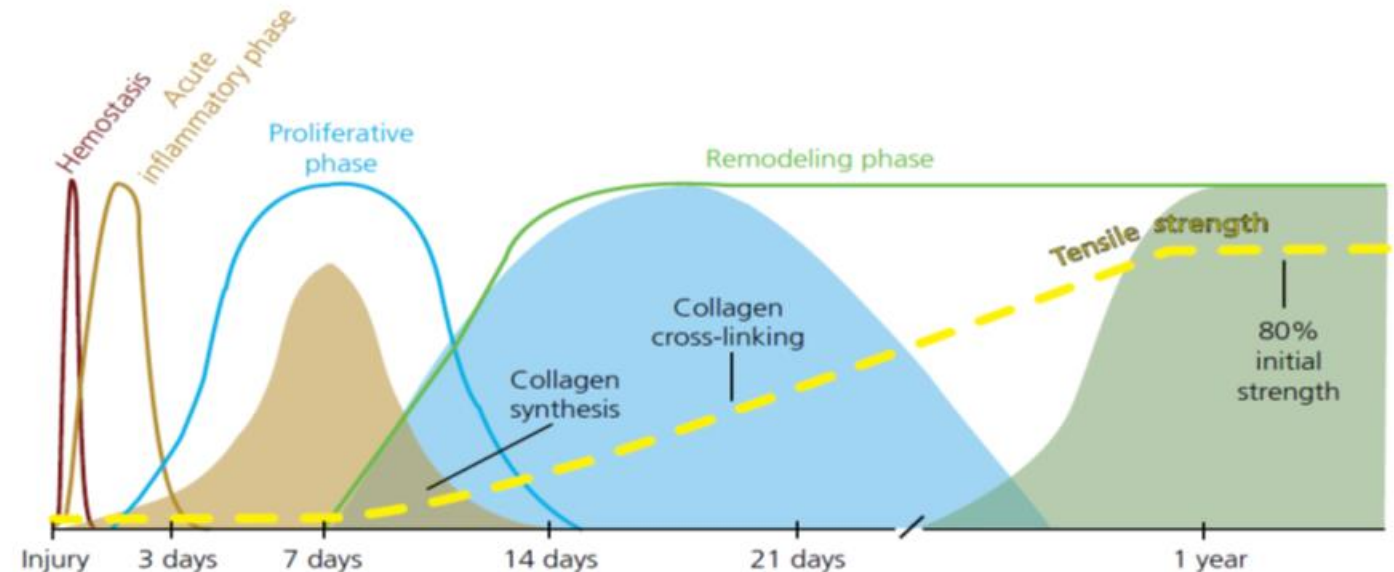




# WOUND HEALING IN HORSES

- Wound healing of a full-thickness cutaneous wound is comprised of four overlapping but well-defined phases:

- Haemostasis
- Acute inflammation
- Proliferation
- Remodelling



The order of the different phases of tissue repair. Reproduced with permission of Elsevier



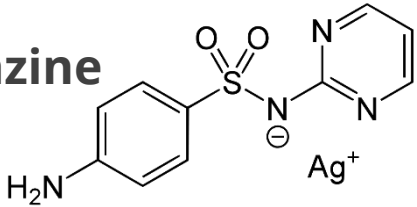


# FACTORS THAT NEGATIVELY IMPACT HEALING

Patient factors	Wound characteristics	Treatments
Age	Infection	NSAIDs
Malnourishment	Location	Corticosteroids
Concurrent illness	Impaired blood flow	
	Exuberant granulation tissue	
	Desiccation of tissue	








# CURRENT TOPICAL TREATMENTS USED FOR WOUND HEALING

Treatment	Proposed mechanism	Advantages	Disadvantages
<b>Silver sulfadiazine</b> 	Broad-spectrum antibiotic & anti-fungal	Effective against <i>Pseudomonas aeruginosa</i>	Inconsistent results. May slow epithelialisation & ↓ wound contraction
<b>Tea tree oil</b> 	Antibacterial, Antifungal, ↑ fibroplasia	May be useful in inflammatory phase	Contact dermatitis in humans
<b>Honey</b> 	↓ inflammation, promotes granulation tissue formation & epithelialisation	Provides a mechanical barrier against infection & has antibacterial properties	Can dry out wound Potential for pathogen import Effectiveness varies depending on source



# CURRENT TOPICAL TREATMENTS FOR SCARRING

Treatment	Proposed mechanism	Advantages	Disadvantages
<b>Onion extract</b> 	Anti-inflammatory, anti-proliferative and anti-oxidant.	↓ fibroblast proliferation & ECM remodelling Improved scar appearance	Moderate pruritus
<b>Aloe vera</b> 	↓ inflammatory cytokines Polysaccharides inhibit bacterial growth	Antibacterial, anti-inflammatory, antifungal, wound healing	↑ fibroblast growth & TGFβ expression
<b>Vitamin E</b> 	Anti-oxidant effect	Hydration and moisturisation No evidence of benefit as monotherapy.	Itching, contact dermatitis, rash.



# NEW POTENTIAL TREATMENTS

## CURCUMIN

- Has **antineoplastic, antimicrobial, anti-inflammatory, antioxidant** & wound healing activities
  - Found to primarily act in proliferative phase of wound healing by  $\uparrow$  re-epithelialisation, collagen deposition, fibronectin production & myofibroblast contraction
  - Appears to regulate fibroblasts growth
- Curcumin's potential as a therapeutic agent is limited by low bioavailability, poor aqueous solubility, light sensitivity & rapid degradation
  - Topical application of encapsulated curcumin significantly  $\uparrow$  wound healing when compared to control & free curcumin





# NEW POTENTIAL TREATMENTS

## SILICONE

- 1<sup>st</sup> line for both prevention & treatment of scars
  - May help to prevent excessive scar formation by restoring water barrier through occlusion & hydration of stratum corneum
- Has been shown to prevent the formation of EGT when compared to a control dressing
- Problems with gel sheets
  - Need for taping
  - Difficulties in using sheets in large areas or near joints
  - Must be washed to prevent infections & complications





# TEST HORSE – 5YR OLD PERFORMANCE DRESSAGE HORSE



Day 1 of treatment



Day 5 of treatment



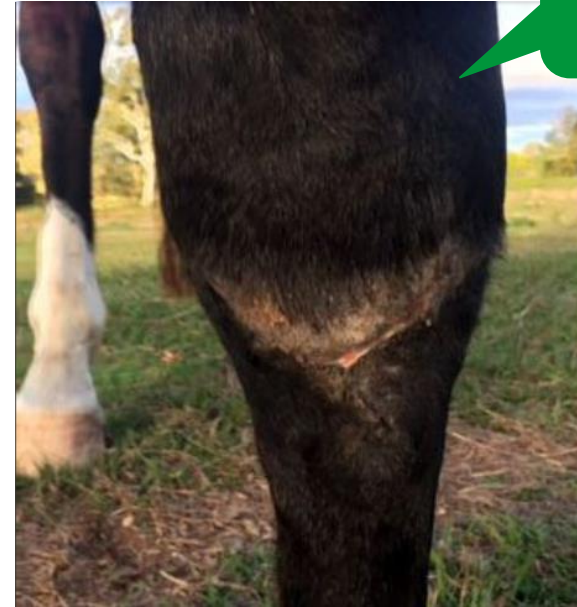
# TREATMENT WITH 2% TURMERIC IN SILICONE BASE

Before



Initial injury after debridement surgery

After

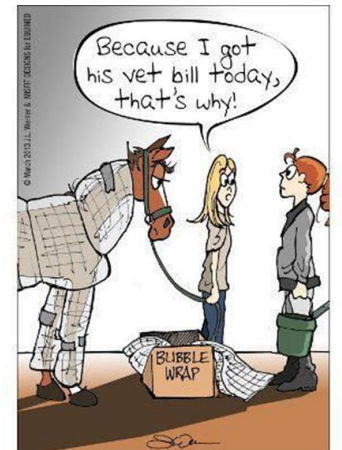


Discharge day





**THANKS FOR LISTENING  
QUESTIONS?**







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