MALIGNANT WOUND

WHAT’S A MALIGNANT WOUND?

A malignant wound is a break in the skin that may be from:
- Skin cancer;
- A tumor that grows up into and through the skin;
- A tumor that has spread into blood or lymph vessels (metastasis);
- Cancer cells get left behind in the skin during surgery to remove a cancer tumor, or
- Conversion (when an old wound, usually more than 20 years, becomes cancerous).

WHAT DOES A MALIGNANT WOUND LOOK LIKE?

Malignant wounds may start out as small painless lumps, which may be pink, red, violet, blue, brown, or black in color, or normal in skin color. As the cancer grows, the lumps will get bigger and mess with your skin’s blood and lymph vessels. These wounds may start to look like a crater, or they may cause growths that look like a fungus or cauliflower (a.k.a. a fungating wound). Fungating wounds are usually found on the head, face, neck, breast, underarms, groin, and perineal area.

WHAT’S THE TREATMENT FOR MALIGNANT WOUNDS?

Treatment for malignant wounds depends on:
- The type of cancer;
- Where the tumor is;
- How much tissue is involved;
- Whether the tumor is the primary cancer site or a metastasis, and;
- Your health.

WOUND ITCH

Malignant wounds and the skin around them can be very itchy. This can be from your skin stretching as your tumor grows or from drainage sitting on your skin. Unfortunately anti-itch medications usually do not work. Refrigerated menthol or anti-itch creams, hydrogel sheet dressings, and/or electrical stimulation therapy may help the itching. It is important that your healthcare team choose a dressing that will keep the drainage off of your good skin, to prevent itching.

QUESTIONS TO ASK YOUR DOCTOR

As a person with a malignant wound you should visit your doctor regularly. At these visits you should be asking:
- Why do I have a malignant wound?
- How will my wound be treated, and how long will it take to heal?
- What can I do to help?
- Is my HgbA1c 7% or less, and if not, what can I do to improve it (if you have diabetes)?
- Am I at an ideal body weight, and if not, what can I do to get there?
- Can you help me to stop or cut down smoking/drinking alcohol?

For more information on malignant wounds, nutrition, wound healing, and for community resources, go to: swrwoundcareprogram.ca

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**COMMON QUESTIONS**

**WOUND PAIN**

Malignant wound pain can be from:
- The tumor pressing on and/or damaging nerve endings or tissue;
- Exposed nerve endings;
- Infection;
- Swelling, and/or;
- Pain from dressing changes.
  Pain can seem worse if you are dealing with wound odor, feelings of anger/fear/sadness/anxiety/hopelessness, depression, and/or loss of sleep. Pain that is not controlled can keep you from working, sleeping, eating, activity, and can make you feel blue. It is important to tell your healthcare team about any pain you have.

There are different ways to manage wound pain:
- Medications;
- Use of dressings that have pain medication in them and/or that are non-stick;
- Electrical stimulation therapy, and/or;
- Use of complementary therapies, like yoga, acupuncture, message, etc.

The following are some tips to manage wound pain:
- Protect your wound from injury;
- Pour wound cleansers over you wound instead of putting them on with pressure;
- Make sure your wound cleansers are at room temperature;
- Take your pain medications as your doctor tells you to — don’t skip any doses, and/or;
- Take ALL of your antibiotics as your doctor tells you too, even if you are feeling better or think the infection is gone.

**WOUND ODOR**

Malignant wounds can sometimes have a bad odor. This odor can be from dead tissue, bacteria, and/or stale drainage. Let your healthcare provider know if you smell an odor, because you will likely notice odors before they do.

The following are some tips for managing wound odor:
- Have a healthcare provider remove dead tissue from the wound;
- Try charcoal dressings;
- Try putting kitty litter or charcoal under your bed or in locations you often sit or lie;
- Try scented candles, air fresheners, aroma therapy oils and/or put menthol under your nose;
- Change your dressing more often, and/or;
- Bag your old dressing right after your dressing change, and remove them from your living spaces right away, i.e. put them in outdoor garbage.

**WOUND DRAINAGE**

Not only can the drainage from your wound smell, but there may be a lot of it — as much as a liter a day! Infection can also cause more drainage from your wound. This drainage can leak onto your healthy skin, irritate it, and may leak onto your clothes and/or bedding.

To better manage the drainage, try:
- Superabsorbent dressings;
- Changing your dressing more often;
- Using of antiseptics and/or antimicrobial dressings, and/or;
- Pouching the wound (this is like putting a bag over the wound to collect the drainage).

Your healthcare team will work with you to find the best solution.

**BLEEDING FROM YOUR WOUND**

A frequent small amount of bleeding from a malignant wound is not unusual. Your healthcare provider may try dressings and/or medications to control/minimize the bleeding. If your wound suddenly bleeds more than usual it is important that you tell your healthcare provider right away. You and your healthcare team should make up a plan for what to do in such an emergency ahead of time.

5-10% of people with metastatic cancer will develop a malignant wound

MALIGNANT WOUND SYMPTOMS

Just because you have to live with a malignant wound, you should not have to suffer wound pain, indignity, or embarrassment. It is important that you talk to your healthcare team about your feelings of your wound symptoms (like pain, odor, drainage, and itchiness) and come up with a plan to manage them.