

# Pathway for Larval Debridement Therapy

**(To be initiated in Secondary Care or Tier 4 services only. Follow up care can be provided by Tier 3/ District Nurses.)**

## Definition

Larval Debridement Therapy (LDT), known as 'maggot therapy' or 'bio surgery' involves the use of larvae of the green bottle fly, which are introduced to a wound to remove necrotic, sloughy and/or infected tissue. The benefits include, the removal of dead tissue. Reduction of bacteria and acceleration of healing. Indications of use include, diabetic foot ulcer, leg ulcer, pressure ulcer, non-healing surgical wounds, post traumatic wounds and infected wounds (including MRSA).

## Assessment

Are there any contradictions such as exposed bowel, high INR, wounds which have a tendency to bleed, close proximity to an artery or patient is unable to offload pressure for the whole treatment duration to avoid suffocation of the larvae?

**YES**

Does the wound have soft and moist tissue?

**NO**

Refer to the relevant wound aetiology pathway or T.I.M.E.S pathway.

**NO**

Soften the hard dry eschar using autolytic debridement prior to application.




**YES** - Measure the length, width and depth of the wound to select a Biobag from the 5 available sizes, ensuring the wound bed and margins are covered.

## Order and Receive

**Secondary Care:** Contact the Skin Integrity Team who will place an order by 2pm for next day delivery  
**Primary Care:** Contact the Tissue Viability and Lymphoedema Service for ordering.

On delivery item must be kept in the transit container and stored at room temperature (6-25C). Check the viability of the larvae (they should be cream/beige in colour and still visibility moving) and check the expiry date.

## Application

1. Cleanse	2. Protect	3. Apply	4. Moisten	5. Absorb	6. Secure
Use normal saline to cleanse wound bed				Apply a Kiliniderm super absorbent pad	Secure the dressing using either tape or a K-Lite bandage
	Apply the protective barrier cream supplied to the peri-wound	Apply the Biobag with direct contact to the wound	Cover with saline moistened gauze		

## Daily Care, reassess and removal

Change the outer dressing and saline moistened gauze daily and reapply the protective barrier If needed. Monitor for pain and bleeding.

Reassess the wound at day 3 (72 hours) to decide on further treatment. If LDT is still required due to slough still being present reorder the appropriate Biobag.

Remove and dispose of the Biobag at Day 4 (96 hours) in a secured double bag and dispose as per your organisations contaminated waste policy.

If another Biobag was required and ordered repeat this process (Full debridement usually requires between 1 and 3 treatments).

**If the named product on this pathway is not available a temporary second line product is available to use. This can be found within the main text of the Doncaster Wide Wound Care Formulary Document.**