



Authors of “Wireless Textile Moisture Sensor for Wound Care” Misinformed

Linda L. Benskin^{1,2*}

¹Independent Researcher, Austin, TX, United States, ²Ferris Mfg. Corp., Fort Worth, TX, United States

Keywords: wound moisture, polymeric membrane dressings, wound dressings, moisture balance, indicator dressings, intelligent dressings

A Perspective on

Wireless Textile Moisture Sensor for Wound Care

by Tassarolo, M., Possanzini, L., Gualandi, I., Mariani, F., Torchia, L. D., Arcangeli, D., Melandri, F., Scavetta, E., and Fraboni, B. (2021). *Front. Phys.* 9:722173. doi: 10.3389/fphy.2021.722173

OPEN ACCESS

Edited by:

Karthikeyan Rajagopal,
Chennai Institute of Technology, India

Reviewed by:

Richard Mazess,
University of Wisconsin-Madison,
United States
Lars-Peter Kamolz,
Medical University of Graz, Austria

*Correspondence:

Linda L. Benskin
lindabenskin@utexas.edu

Specialty section:

This article was submitted to
Interdisciplinary Physics,
a section of the journal
Frontiers in Physics

Received: 17 December 2021

Accepted: 24 February 2022

Published: 26 April 2022

Citation:

Benskin LL (2022) Authors of “Wireless
Textile Moisture Sensor for Wound
Care” Misinformed.
Front. Phys. 10:828709.
doi: 10.3389/fphy.2022.828709

COMMENTARY

The researchers (Tassarolo, et al.) who conducted the study described in Wireless Textile Moisture Sensor for Wound Care seem to have been misinformed, because in the abstract they state, “Currently, clinicians monitor the wound’s status by removing the dressing, disturbing the healing process. A relevant parameter that they need to monitor is wound moisture.” [1] It is correct that when clinicians use most conventional dressings, they need to remove the dressing to monitor the wound’s moisture status. However, several moisture “indicator” dressings already exist, including all PolyMem dressing configurations and Alleevyn Life [2–6]. These dressings all have backings which facilitate a color change to indicate when they have absorbed the appropriate amount of moisture, and it is therefore time to change the dressing.

Polymeric membrane dressings (the generic name for the dressing type which includes PolyMem dressings), are moisture indicator dressings that also balance moisture across the wound bed, absorbing moisture from overly wet areas while simultaneously donating moisture to overly dry areas [2, 3, 5, 6]. Clinicians using these dressings are instructed to remove the dressing only when it is ready to be changed, because they should be monitoring the wound’s moisture status by examining the outside of the dressing without lifting it [2–6].

It is certainly understandable that Tassarolo, et al. would be unaware of the existence of moisture “indicator” dressings, because there are hundreds of commercial wound dressing types, and very few include this important feature [7]. Alleevyn Life is the only dressing configuration in the Alleevyn line that is a moisture indicator dressing [4]. And, although the evidence base for polymeric membrane dressings goes back 30 years, they are made by a small, family-owned company [8–11]. In addition, most wound dressing review articles either overlook polymeric membrane dressings completely, or miscategorize them as

conventional foam or hydroactive dressings, without regard to their unique additional functions [12, 13]. However, polymeric membrane dressings are increasingly being recognized as a unique dressing type because of their versatility and exceptional benefits [5, 14–20]. One of these benefits is that clinicians do not need to “peek” to know when polymeric membrane dressings are sufficiently saturated that

they should be changed, because they are moisture “indicator” dressings [6].

REFERENCES

- Tessarolo M, Possanzini L, Gualandi I, Mariani F, Torchia LD, Arcangeli D, et al. Wireless Textile Moisture Sensor for Wound Care. *Front Phys* (2021) 9: 616. doi:10.3389/fphy.2021.722173
- Benskin LL. Polymeric Membrane Dressings for Topical Wound Management of Patients with Infected Wounds in a Challenging Environment: A Protocol with 3 Case Examples. *Owm* (2016) 62:42–50. doi:10.25270/owm.2016.6.4250
- Benskin L. PolyMem the Ideal Dressing (2015). Available at: <http://polymem.com/mkl/MKL662.pdf> (Accessed March 2, 2022).
- Rossington A, Drysdale K, Winter R. Clinical Performance and Positive Impact on Patient Wellbeing of ALLEVYN Life. *Wounds UK* (2013) 9:91–95.
- Benskin LL. Evidence for Polymeric Membrane Dressings as a Unique Dressing Subcategory, Using Pressure Ulcers as an Example. *Adv Wound Care* (2018) 7:419–26. doi:10.1089/wound.2018.0822
- Hess CT. *Product Guide to Skin & Wound Care*. 8th ed. Philadelphia, PA USA: Wolters Kluwer (2020). Available at: <https://www.amazon.com/Product-Guide-Skin-Wound-Care/dp/1496388097>.
- Dressings. WoundSource (2020). Available at: <https://www.woundsource.com/product-category/dressings> (Accessed November 17, 2020).
- Blackman JD, Senseng D, Quinn L, Mazzone T. Clinical Evaluation of a Semipermeable Polymeric Membrane Dressing for the Treatment of Chronic Diabetic Foot Ulcers. *Diabetes Care* (1994) 17:322–5. doi:10.2337/diacare.17.4.322
- Fowler E, Papen JC. Clinical Evaluation of a Polymeric Membrane Dressing in the Treatment of Dermal Ulcers. *Ostomy Wound Manage* (1991) 35(35–38):35–4.
- Kim YJ, Lee SW, Hong SH, Lee HK, Kim EK. The Effects of PolyMem(R) on the Wound Healing. *J Korean Soc Plast Reconstr Surgeons* (1999) 26:1165–72.
- PolyMem | Official Site. What Makes PolyMem Different? (2022). Available at: <https://www.polymem.com/> (Accessed February 9, 2022).
- Weller CD, Team V, Sussman G. First-Line Interactive Wound Dressing Update: A Comprehensive Review of the Evidence. *Front Pharmacol* (2020) 11: 11. doi:10.3389/fphar.2020.00155
- Benskin LL. Commentary: First-Line Interactive Wound Dressing Update: A Comprehensive Review of the Evidence. *Front Pharmacol* (2020) 11:11. doi:10.3389/fphar.2020.01272
- Dabiri G, Damstetter E, Phillips T. Choosing a Wound Dressing Based on Common Wound Characteristics. *Adv Wound Care* (2016) 5:32–41. doi:10.1089/wound.2014.0586
- 2019 Guideline CPG E-Version (NPIAP). Clinical Practice Guidelines (2019). Available at: <https://guidelinesales.com/store/ViewProduct.aspx?id=15036996> (Accessed November 25, 2019).
- Saha S, Smith MB, Totten A, Fu R, Wasson N, Rahman B, et al. *Pressure Ulcer Treatment Strategies: Comparative Effectiveness*. Rockville (MD): Agency for Healthcare Research and Quality (US) (2013). Available at: <http://www.ncbi.nlm.nih.gov/books/NBK143657/> (Accessed February 27, 2014).
- Lee B. The Diabetic Foot: a Comprehensive Approach. In: *The Wound Management Manual*. New York: McGraw-Hill (2005). p. 360–1.
- Mulder M. The Selection of Wound Care Products for Wound Bed Preparation. *Wound Healing South Africa* (2009) 2:76–8.
- Thomas S. *Surgical Dressings and Wound Management*. 2nd ed. Hinesburg VT: Kestrel Health Information (2012).
- Mulder M. The Selection of Wound Care Products for Wound Bed Preparation : Wound Care. *Prof Nurs Today* (2011) 15:30–6. doi:10.10520/EJC79462

Conflict of Interest: As a result of her extensive experience managing wound patients while working for 5 years in a remote clinic in northern Ghana, West Africa, LB became so passionate about the benefits of PMDs that she is currently an employee of Ferris Mfg. Corp., the makers of PolyMem. LB also works independently developing village health worker training programs in remote and conflict areas of tropical developing countries. She just completed the data collection portion of a randomized controlled trial for sustainable wound management options for lay health providers in rural areas of tropical developing countries using improvised dressings.

Publisher’s Note: All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors, and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

Copyright © 2022 Benskin. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.