



# Patient information

## Larval Therapy

**Tissue Viability** 

## What is larval therapy?

This is a treatment, which is widely used in the NHS for the treatment of wounds. Larvae are sterile maggots, which clean wounds that are infected or covered with dead tissue.

The larvae (maggots) are produced from the common green bottle fly. Their eggs are hatched in a sterile environment in order to produce maggots for use on wounds. There is no risk of any germs being put on the wound. They are sterilised in a special laboratory in Bridgend, South Wales.

The benefits of this treatment have been recognised over the centuries on the battlefield. Napoleon's surgeon reported that those wounds which were covered in maggots, did not develop infections and the soldiers did not die from wound infections.

#### How do they work?

In modern times there are some germs (e.g. MRSA), which are not easily treated with antibiotics. As a result of the benefits noticed during the First World War, maggots were produced commercially for application to wounds. It has been found that for some wounds this is the best treatment.

If there is dead tissue on a wound, healing is slowed down. Maggot therapy may be used to remove the dead tissue much quicker than other wound dressings.

Maggots produce a substance that breaks down the dead tissue and changes it to a thick fluid that they then swallow. They also reduce any smell and swallow bacteria (germs) from the wound.

#### They do not damage the good skin.

When they are first applied to a wound they are only two to three mm (less than  $\frac{1}{4}$ ") long. They are usually left for three days during which time they grow to eight to ten mm (about  $\frac{1}{2}$ ") in length.

#### Application of larval therapy

First of all the skin around the wound will be protected from any of the fluid which may leak from the wound. A special dressing will be used to do this. Once this is in place a sealed sterile net bag, which has the maggots in, is placed on top of your wound. Another dressing pad is put over the top of this.

A nurse will remove the outer dressing and check the net at least daily.

It is important not to get the wound too hot, such as by sitting too close to a radiator, as this will cause the dressing to dry out and the maggots will die.

The maggots will quickly clean the wound of all the dead skin that is called slough or necrosis. This must be done before your wound will start to heal.

Normally, between the third and fifth day all the dressings and maggots are removed.

Your nurse will decide what is the best dressing to use on your wound once the treatment has been stopped.

If there has been a lot of dead skin, it may be necessary to apply more maggots.

#### During your treatment

If you are concerned about your wound, please let your nurse know straight away.

Most people are not aware that the maggots are in place and do not feel any discomfort at all.

Do not be alarmed if there is an increase in the amount of fluid coming through your dressing, this is normal.

Your nurse will give you advice about how to avoid pressing your wound to prevent damaging the maggots.

Apart from this, you can continue life as before – the only thing we ask you not to do is have a bath or shower as this will wet the dressing too much and the larvae will drown!

The maggots cannot lay eggs in your wound or turn into flies. They cannot burrow into your skin – they only work on the flesh that is dead.

If you change your mind about the dressing once it has been applied, tell your nurse who will arrange for it to be removed. There are other methods to remove dead skin but they may not work as well or as quickly.

#### Feedback

Your feedback is important to us and helps us influence care in the future

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## **Further information**

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Author: Tissue Viability Nurses Review date: October 2021 All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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