

More success with honey

When conventional treatments fail or are unavailable, consider honey as a topical wound dressing.

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I read with practical interest the article in the March 2007 *BCMJ* “Sweet success? Honey as a topical wound dressing” [*BCMJ* 2007; 49:64-67] by Nevio Cimolai, MD.

In August 2005 as a member of a medical team whose mission is to run a yearly clinic delivering free health care to poor Tibetan nomads in Yushu (Yushu Autonomous Prefecture, Qinghai, China), we were faced with a challenging case. A teenage girl (**Figure 1**) had four large, full-thickness pressure sores on her sacrum and hips (**Figure 2**), the consequence of a prolonged hospital stay. She survived, with paralysis below the waist, a bout of bacterial meningitis. We visited the girl at home where her parents’ treatments consisted of the following:

- A cloth covering the (remarkably clean) sores to keep the flies away.
- A rope from the ceiling to assist transfers.

Medical care is costly in Tibet and there is no health insurance scheme; to purchase the basics for care the family had had to sell their small front yard to



Figure 1. The patient with her mother.



Figure 2. Full-thickness pressure sore, 2005

a neighbor. Standard treatment in Canada would include at least antibiotics, complex dressings, wound-care nursing, OT/PT assistance, special mattresses, and possibly plastic surgery—all beyond this family’s means and that of our emergency contingency fund.

Fortunately the team nurse had experience in just such circumstances and suggested the use of a honey-sugar mix (increased viscosity to stick in place), applied twice daily. Within 5 days the edges appeared vividly hyperemic and healthier. As we left for Canada shortly thereafter, we left the parents with some funds and instructions to continue the treatment, not knowing what to expect in the long term. The next year’s team in 2006 found the patient much improved with considerable closure of the sores (**Figure 3**). Follow-up during my recent visit in August 2007 revealed that the patient continues to improve.

Although anecdotal and a study of one, this case has been a “sweet suc-



Figure 3. The same sore treated with a honey-sugar mix, 2006.

cess” so far, for reasons that I now understand from Dr Cimolai’s article. In similar adverse circumstances, it may well be the first and only treatment when more conventional therapies are unavailable.

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ROKPA CANADA is a division of Rokpa International, which is a Tibetan aid organization founded in 1980 by a Tibetan doctor and meditation master to provide assistance in the areas of health care, education, relief from hunger, poverty, and suffering, and preservation of culture and environment.

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