

# Wound Care Insider

An educational resource from Gentell

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## What To Do When A Wound Won't Progress Despite Appropriate Treatments?

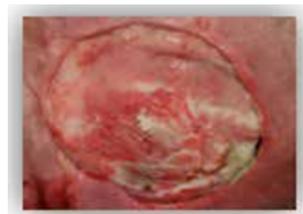
When a wound fails to demonstrate measurable progress despite appropriate topical therapy, clinicians must look beyond the wound bed itself. Optimal healing requires a comprehensive, holistic assessment. Before modifying topical products or escalating advanced therapies, the following foundational factors must be addressed and optimized:

- Nutrition
- Circulation/perfusion
- Pain control
- Presence of non-viable tissue or bioburden
- Underlying comorbidities
- Moisture balance
- Pressure reduction and offloading
- Glycemic control

If these elements have been adequately managed and the wound still does not progress, clinicians must evaluate systemic and etiologic factors that may be impeding healing.

**One of the most critical steps in managing a non-healing wound is ensuring that the correct wound etiology has been identified. An inaccurate diagnosis will lead to ineffective and potentially harmful interventions. Accurate wound etiology guides appropriate treatment selection, diagnostic testing, and escalation of care.**

Additional tests to consider which can assist in determining how best to treat a wound that is not healing and/or determine the wound etiology:



### Bone Scan or MRI

Will rule out osteomyelitis in pressure ulcers that are open more than 3 months over a bony prominence.

*Left: Exposed bone w/ osteo*



### ESR/Sedimentation Rate

Will help determine if an inflammation is present caused by an autoimmune disease or infection.

*Left: Pemphigus r/t autoimmune disease*



### Hemoglobin A1C

Will indicate long term glucose control and the efficacy of the wound treatment.

*Left: Diabetic foot ulcer*



### Tissue Biopsies

Can indicate cancer, abnormal tissue growth, infection.

*Left: Cancerous growth to LE*



### Arterial/Venous Dopplers

Arterial doppler will determine bloodflow/blockages to the lower leg; venous dopplers will tell of any DVT.

*Left: Arterial wound r/t blockage*

### Sources:

Bryant, R.A. and Nix D.H. (2012). Acute and Chronic Wounds: Current Management Concepts. (4th ed.) St. Louis, MO: Elsevier.