Author Year Country Research Design PEDro Score Sample Size	Methods	Outcome
Scevola et al. 2010 Italy RCT PEDro=4 N=13	 Population: Patients affected by SCI with 16 pressure sores over a period of 20 mo. Intervention: Allogenic platelet gel or with current best practice approach to chronic wounds dressing protocol. Outcome Measures: Volume reduction of pressure injuries, reduction in amount of ulcers. 	 No statistically significant difference was demonstrated in volume reduction between the two groups, although a statistically significant difference could be demonstrated in the onset time of granulation tissue proliferation as in the wounds treated with platelet gel the healing process was triggered earlier. Platelet gel is mostly effective within the first 2 wk of treatment while a prolonged treatment does not provide any significant advantage.
Subbanna et al. 2007 India RCT PEDro=9 N=28	 Population: Patients with stage II ulcers. Treatment group (n=14): Mean age=34.25 yr; Gender: males=13, females=1; Control group (n=14): Mean age=31.64 yr; Gender: males=12, females=2.All subjects had stage II ulcers. Intervention: Patients were randomly placed (double blind manner) in the treatment group which received 5mg/ml phenytoin solution soaked sterile gauge for their pressure injury dressing once daily for 15 days and the control group received saline soaked gauge. Outcome Measures: Pressure injury scale for healing (PUSH) 3.0, ulcer size, ulcer volume 	 Improvement in PUSH 3.0 and ulcer size was seen in the topical phenytoin group however this difference did not reach statistical significance, p=0.261 and 0.132 respectively. Reduction in ulcer volume was seen in the control group however it was not significant, p=0.777
Hollisaz et al. 2004 Iran RCT PEDro=7 N=83	 Population: Gender: males=83; Level of injury: paraplegia; Stage of pressure injuries: I=33, II=58. Intervention: 1 of 3 dressing groups: 1) Simple dressing (SD) – changed twice daily; 2) Hydrocolloid dressing (HD) – changed 2x/wk; 3) Adhesive plus phenytoin cream (PC) – changed once daily. Outcome Measures: Healing status of pressure injury. 	 HD group had the most healing (74%) as compared to the PC group (40%, p<0.01) and the SD group (27%, p<0.005). Of all the groups, the HD group also had higher rating of healing of stage I ulcers (p<0.05). For stage II ulcers, HD treated ulcers healed better than SD treated ulcers (67% vs. 16%) p<0.005 but no better than PC (48%, p>0.05) treated ulcers. HD also healed gluteal ulcers more completely than other groups (p<0.001); however, groups did not differ on healing of sacral ulcers.
Kaya et al. 2005 Turkey RCT PEDro=4 N=27	Population: Mean age=16-56 yr; Gender: males=24, females=3; Ulcer stage: I=12, II=34, III=3.Intervention: Treatment group (n=15, 25 PU): an occlusive hydrogel dressing, changed every 4 days (unless contaminated). Control group (n=12, 24 PU): povidone-iodine soaked gauze changed daily.Outcome Measures: Healing rate (cm²/day).	 Healing rates did not differ between groups. More wounds healed in the treatment group (n=21) than in the control group (n=13), p<0.04.
Whittle et al. 1996	Population: Mean age=55.75 yr; Gender: males=3, females=1; Level of injury:	 Hydrogel dressing application varied from 4 to 6 wks.

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Canada Case Series N=4	paraplegia=2, tetraplegia=2; Pressure injury (5 ulcers) stage: II=1, III=3, IV=1. Intervention: Hydrogel dressings, for different time periods depending on the case. Outcome Measures: Pressure injury improvement, measured 1x/wk.	2. In all cases, pressure injuries improved drastically, with 3 cases being completely healed.