



Malignant Wounds

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What is a malignant wound?

A malignant wound is an open cancerous lesion of the skin, which may be draining. It may look like a cavity or open area on the surface of the skin. It may also appear as skin bumps or irregular-looking growths on the skin's surface. The wound may result because of a primary cancer, or may spread to the skin from another site. Cancers such as breast, head and neck, primary skin, anal-rectal, gastrointestinal and lymphoma are the most common types that cause malignant wounds.

Malignant wounds result from cancerous cells invading the skin and its lymph and blood vessels. They cause tissue to die, which can lead to inflammation and result in infection, bleeding, odour and drainage from the wound. Sometimes the wound becomes very painful.

Malignant wounds can affect a person's overall quality of life. They can limit independence and cause emotional distress. Continuously assessing these wounds is important because they can change frequently. Unfortunately, advanced malignant wounds often do not heal and are associated with poor prognosis. Treatment is generally directed at managing wound-related pain and symptom issues.

What your health care team might ask

Your health care team may ask some questions to assess you, your malignant wound and how it affects you. They will also measure your wound and take a history of your other medical conditions and medications. The team might ask you:

- How long have you had the wound?
- Do you know what caused the wound?
- Have you had any previous treatment such as surgery, radiation or chemotherapy for the wound?
- What treatments or dressings for your wound have you tried before?
- Do you have other diseases or health problems such as diabetes, a bleeding disorder and/or a loss of sensation?
- What medications are you on? Medications may include something for pain, depression, or infection?
- Have you lost weight? How is your appetite?
- Do you have concerns about how you look to others?
- Does your wound make it difficult for you to go out or socialize with others? Do you feel depressed?
- Does the wound affect your walking, sitting and/or lying down? Does the wound affect your day-to-day activities?
- Is your wound painful? Does it hurt to have your dressings changed?
- How much is the wound draining?
- What kind of drainage is coming out of the wound? What colour is it? Is it bloody?
- Is there any odour? How bad is the odour?
- What does the skin around the wound look or feel like? Is there any redness, swelling, pain or warmth?
- What are you most concerned about?

What are you most concerned about?

What your health care team can do

Your health care team may suggest treating malignant wounds with surgery, radiation or chemotherapy. But this may not be an option if your health status is poor, if the wound is bleeding and/or if it involves nearby parts of the body. Palliative radiation, however, may reduce the size of a malignant lesion and improve symptoms such as bleeding or drainage.

Managing malignant wounds includes the following goals: preventing infection, promoting comfort and optimizing your quality of life. Your health care team will focus on addressing issues such as pain, bleeding, odour, infection, too much drainage and emotional distress. They will provide a special wound dressing to help you manage these symptoms.

Pain

Pain assessment and management of malignant wounds are important. If you have constant pain, it is likely because the lesion is pressing on nerves or blood vessels. Your health care provider may prescribe a pain medication, such as an opioid, that works around the clock. If you have pain only when your dressing is changed, your doctor and nurse may suggest that you:

- receive pain medication before the dressing change;
- have fewer dressing changes, if appropriate (your health care team can advise you);
- help with the dressing change;
- use special wound dressings that cause less pain when they are removed; and
- distract yourself by watching TV or listening to music.

See also: [Pain](#)

Bleeding

Bleeding is common with malignant wounds. The lesion may erode into blood vessels, or the surface of the wound may be easily damaged and start to bleed. Any dressing that contacts the surface of the wound may stick and can tear the wound when it is pulled off. Blood thinners (such as aspirin, warfarin, or heparin) also increase your risk of bleeding. If bleeding persists, your health care team may consider stopping the blood thinners. Your team may suggest these management options for decreasing bleeding:

- removing the dressing carefully;
- using special wound dressings that don't stick or that help blood clot; and/or
- soaking the dressing with water before removal.

If you notice a lot of bleeding, apply pressure to the wound for 10–15 minutes and contact your health care team.

Odour and infection

The impact of odour from a malignant wound can be very upsetting for you and your family. The odour is caused when bacteria break down proteins in the dead tissue. Bacteria or fungus can also cause a wound infection. Odour and puss-filled drainage are often the first signs of infection. A serious infection may require the appropriate antibiotic or antifungal medication. Your health care team may suggest these management options for wound odour:

- cleaning the wound by showering or using saline solution;
- using dressings containing charcoal to cover the wound or using an antifungal medication;
- placing a container of dry kitty litter under the bed and changing it every few days;
- using aromatherapy in the room, such as 5–6 drops of vanilla oil, peppermint oil, citronella

- oil or lemon grass oil on a gauze swab (changing it 3–4 times a day); and/or
- removing dirty dressings and linens from the room right away.

Drainage

You may experience a lot of drainage from a malignant wound. The amount of drainage depends on a number of factors including blood flow or edema in the area. Infection from bacteria in the wound can cause more drainage to occur. Drainage varies in amount and type in malignant wounds. The goal is to prevent drainage from softening the skin surrounding the wound, which can make the skin fragile. To protect the surrounding skin, your health care team may use special dressings to absorb the drainage and reduce the number of times the dressing needs to be changed. They may also use skin barrier creams, sprays and wipes to help protect the surrounding skin.

Emotional distress

The presence of a malignant wound can be a constant visual reminder of your cancer. It can be emotionally upsetting and affect your body image and quality of life. A malignant wound can change your relationships with family and friends and make you feel isolated and depressed. A growing lesion often is a sign that your disease is progressing. This can make you feel vulnerable and not in control because you cannot predict what will happen with the wound. Talk to your health care team about the difficulties you are experiencing and what might be helpful. Your health care team may suggest:

- connecting you with a social worker, counselor, or spiritual care provider who can offer counseling, emotional support, education, and other practical suggestions;
- a referral for additional help in your home; and/or
- medications that can help relieve anxiety and depression.

See also: [Stress and Distress](#)

See also: [Depression](#)

See also: [Anxiety](#)

When to meet with the health care team

Call your doctor or nurse if you experience any of the following:

- You notice signs of possible infection, such as increased odour, increased amount or appearance of drainage, increased pain, swelling, redness and warmth in the skin around the wound, or fever.
- Your pain medication is not working.
- You notice more bleeding from the wound or during dressing changes.
- You are feeling emotionally overwhelmed or depressed.

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