Mepilex® Border Post-Op | Mepilex® Border Post-Op Ag

# Set healing in motion.

## It's all about the outcome

Surgical wound management without compromise

- Helps reduce SSIs
- Supports early patient mobilization
- Reduces dressing-related costs

Specifically designed for incisions, Mepilex® Border Post-Op and Mepilex® Border Post-Op Ag help you balance the many demands of incision management and deliver the best possible care.

### Unique flex-cut pad

- multi-directional stretching
- supports early patient mobilization[4,7]

### 3-Part release liner

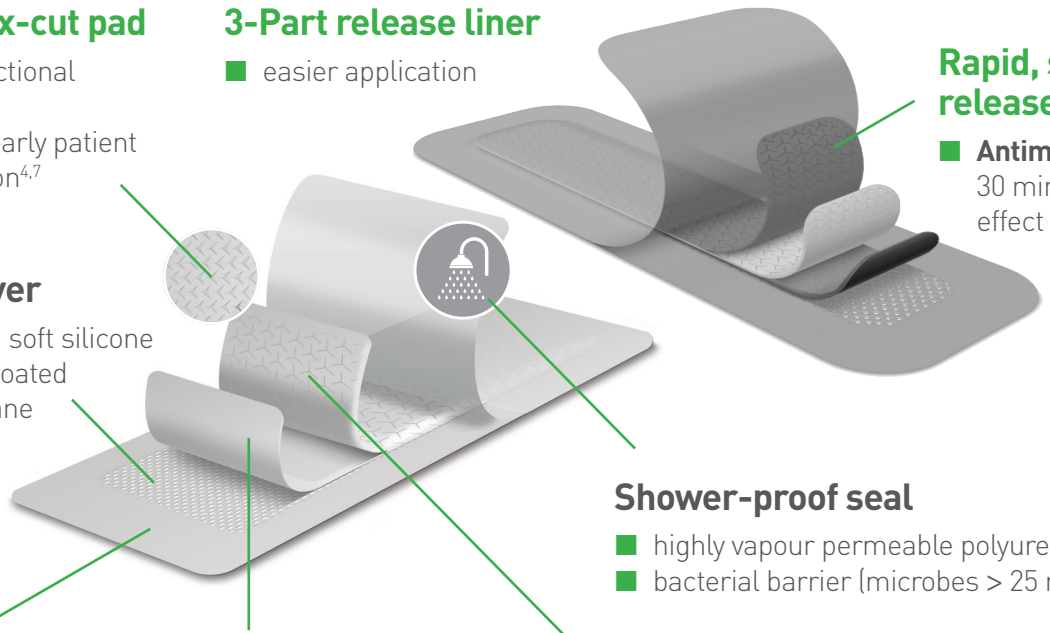
- easier application

### Rapid, sustained release of ionic silver

- **Antimicrobial activity** within 30 minutes with sustained effect up to 7 days[8-10]

### Wound contact layer

- perforated soft silicone
- Safetac® coated polyurethane film



### Shower-proof seal

- highly vapour permeable polyurethane backing film
- bacterial barrier (microbes > 25 nm)[16]

NEW

### Transparent border

- allows inspection of periwound skin without removal

### Spreading layer

- non-woven
- made from viscose and polyester

### Ultra-absorbent material

- superior absorption vs. all other leading dressings[4-7]
- superior blood absorption and volume retention[4-7]

## The Safetac® TECHNOLOGY difference:

# Less Trauma. Less Pain.™

Safetac technology is a patented adhesive technology; exclusive to Mölnlycke Health Care dressings and used in the treatment of millions of patients worldwide.[8-10]

Dressings with Safetac technology are atraumatic upon removal. These dressings minimize trauma to the wound and the surrounding skin, which minimizes pain to the patient and the risk of maceration by sealing the wound margins.[8-10]

Mölnlycke®

# Clinical trials demonstrate that Mepilex® Border Post-Op outperforms other leading post-op options.

| | |
|---|---|
| > Blood absorption | vs. seven leading post-op brands[4-7] (in-vitro) |
| > Dispersion capacity without leakage | |
| ✔ Superior volume retention (wound pad and dressing border) | |
| ✔ Superior ease of application and removal | randomized trial vs. Aquacel® Surgical[11] |
| > Ability to handle blood | |
| ✔ Prevention of dressing residuals | |
| ✔ Patient satisfaction/overall experience | |
| ✔ No damage to the periwound skin | four trials vs. leading competitive products[1-3,6,7] |
| > Wear time (significantly longer) | |
| ✔ Eliminated risk of post-operative blistering | |

## Reduce the risks with Mepilex® Border Post-Op or Mepilex® Border Post-Op Ag


### Decrease the risk of SSIs[4-7]

- fewer dressing changes
- longer wear times
- less risk of skin damage
- less risk of SSIs

### Decrease post-op blistering[3,11,18]

- patients treated with Mepilex® Border Post-Op reported no signs of blisters
- up to 41% of orthopedic patients suffer from post-operative blistering

**Longer wear times • Fewer dressing change**

## Support earlier patient mobilization with Mepilex® Border Post-Op

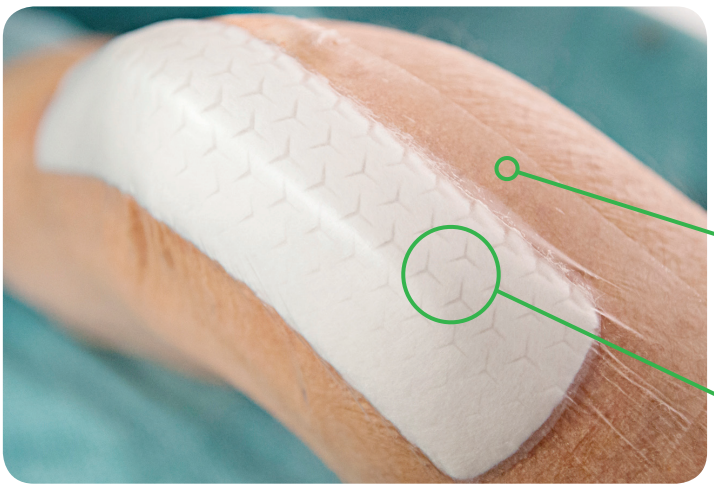
- Engineered to stretch in all directions (multi-directional stretching)
- Superior absorption vs. all other leading dressing options[4-7]
- Help reduce the risk of Deep Vein Thrombosis (DVT) through early mobilization[17]
- Reduce the risk of complications interfering with the normal healing process[12-15]
- Avoid unnecessary healthcare costs associated with dressing changes and skin damage (>$4k in associated costs and up to — 10 days in hospital)[16]

**70%**

of hip, knee and spinal patients did NOT require a dressing change for 7 days![3]

**84%**

of knee replacement patients are at risk of developing DVT[17]



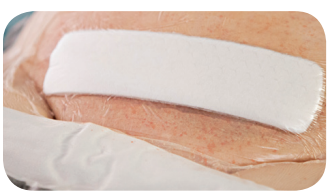
## 100% of patients achieved better comfort and conformability with Mepilex Border Post-Op[3]

- Easy removal (considered painless)[9,10,13]
- Transparent border
- Multi-directional stretching
- Earlier patient mobilization[1]
- Superior patient comfortability[1]

## Applications

Cardiac (Chest and Leg)

Hip



Abdominal

Knee

- Reduced risk of Surgical Site Infections (SSIs)

Mepilex® Border Post-Op | Mepilex® Border Post-Op Ag

# Help prevent complications **for a smooth recovery**

The absorbent, gently adhesive dressing that can reduce dressing-related skin damage and helps reduce the risk of SSIs

## Reducing skin damage[4]

Dressings that adhere aggressively have been shown to cause skin damage such as stripping and blisters, which can compromise the skin barrier and increase the risk of infection. Thanks to its Safetac® interface, Mepilex® Border Post-Op Ag is clinically shown to eliminate dressing related skin damage, safeguarding skin integrity.

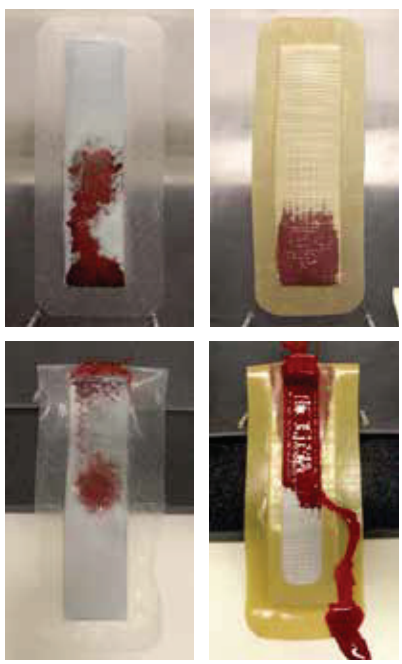
**3 observational trials[3,17,18]**
**2 randomized trials[4,11]**
**No blisters.**

**At the end of five separate trials, patients treated with Mepilex Border showed no signs of blistering.**

## Reducing the risk of wound contamination

The dressings have absorbed 20 ml of blood

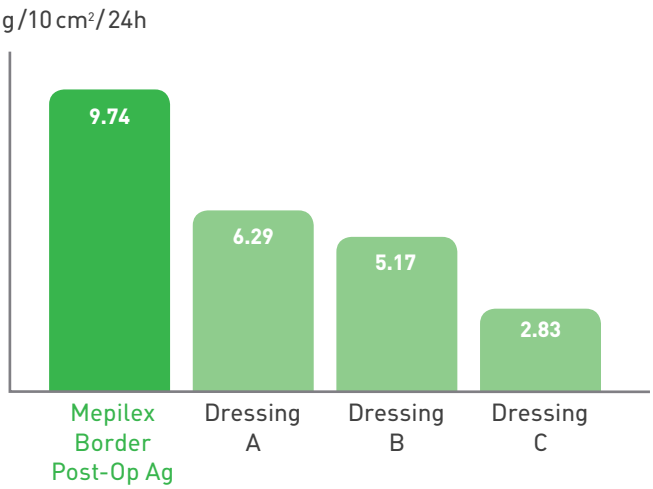
After 15 min, the dressings are removed



Mepilex Border Post-Op | Fiber/ hydrocolloid post-op dressing

Poor absorption can lead to frequent dressing changes, each of which exposes the wound to contamination. Mepilex® Border Post-Op Ag supports longer wear times by absorbing more blood than any current leading post-op dressing.[7]

### Comparing absorption capabilities[12]




- Reduced overall dressing-related costs

# Mepilex® Border Post-Op Ag

# The silver **advantage**

In addition to providing an effective barrier against microbial contamination, Mepilex® Border Ag (post op sizes) contains highly soluble silver that starts inactivating pathogenic bacteria within 30 minutes. The dressing continues to inactivate 99.99% of common microbial threats for 7 days.[8-10]

**4 log** reduction

**Proven to reduce the number of bacteria by 10,000-fold**[8-10]

**7 days** protection

**Starts inactivating 99.99% of pathogenic bacteria within 30 minutes, and continues to protect for a full week**

# Essential components of recovery

For your post-operative patients, this could mean starting to move again. For you, it means finding a way to balance a range of concerns like your patients' pain, mobility and overall satisfaction – as well as reducing the risk of infection. With so many demands to meet, your surgical wound dressing is no place to compromise.

## The many challenges of incision management

### Preventing Surgical Site Infection (SSIs)

SSIs are a leading cause of HAIs and hospital readmissions.

**Up to 9.7** extra days in hospital on average if a patient acquires an SSI

### Supporting patient mobility

To reduce the risk of Deep Vein Thrombosis (DVT), patients must be mobilized as soon as possible.

**Up to 85%** of knee replacement patients are at risk of Deep Vein Thrombosis[2]

### Ensuring patient satisfaction

Complications from surgery delay recovery and impact outcomes.

**Up to 41%** of orthopedic patients suffer from post-op blistering[3]

### Managing costs

Complications from surgery drive up healthcare costs.

**$20,000** estimated increase in healthcare costs if a patient acquires an SSI[1]

### Mepilex® Border Post-Op Assortment

| Art. no | Dressing Size cm | Pcs/Box | Pcs/Case |
|---|---|---|---|
| 496100 | 6 x 8 | 10 | 80 |
| 496200 | 9 x 10 | 10 | 70 |
| 496300 | 10 x 15 | 10 | 100 |
| 496400 | 10 x 20 | 10 | 120 |
| 496450 | 10 x 25 | 10 | 60 |
| 496600 | 10 x 30 | 10 | 40 |
| 496650 | 10 x 35 | 5 | 55 |

### Mepilex® Border Post-Op Ag Assortment

| Art. no | Dressing Size cm | Pcs/Box | Pcs/Case |
|---|---|---|---|
| 498300 | 10 x 15 | 5 | 70 |
| 498400 | 10 x 20 | 5 | 25 |
| 498450 | 10 x 25 | 5 | 35 |
| 498600 | 10 x 30 | 5 | 25 |
| 498650 | 10 x 35 | 5 | 60 |

**References:** **1.** Ban, Kristen A. et al. American College of Surgeons and Surgical Infection Society: Surgical Site Infection Guidelines, 2016 Update. Journal of the American College of Surgeons , Volume 224 , Issue 1 , 59 - 74. **2.** Llau, J. ed. Thromboembolism in Orthopedic Surgery, Ch. 2 - Kakkar, A. Incidence of Venous Thromboembolism in Orthopedic Surgery. **3.** Johansson C et al. Preventing post-operative blisters following hip and knee arthroplasty. Wounds International, 2012. **4.** Bredow, J., et al. Randomized clinical trial to evaluate performance of flexible self-adherent absorbent dressing coated with silicone layer after hip, knee or spinal surgery in comparison to standard wound dressing. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. **5.** Dykes, P.J., et al. Effects of adhesive dressings on the stratum corneum of skin. J Wound Care 2001; 10: 2, 7-10. **6.** Feili, F., et al. Fluid handling properties of antimicrobial post-operative wound dressings. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. **7.** Feili, F., et al. Blood absorption capacity of post-operative wound dressings. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. **8.** Data on file. Laboratory test 20151026-005. **9.** Data on file. Laboratory test 20151109-002. **10.** Data on file. Laboratory test 20151110-007 **11.** Van Overschelde, P., et al. A randomised controlled trial comparing two wound dressings used after elective hip and knee arthroplasty. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. **12.** Data on file. Laboratory test 20151210-003. **13.** Shirley Zurcher, BSN, RN, CWOCN, LeAnn Krapfl, BSN, RN, CWOCN, Ann Burds, BSN, MA, CIC, CPHQ – Mercy Medical Center, Dubuque IA, Poster Presentation 2013 WOCN – Reducing Postoperative Surgical Site Infections in Coronary Artery Bypass Graft Patients. **14.** Kles C, Murrah P, Smith K, et al. Achieving and sustaining zero: prevention of surgical site infections after isolated coronary artery bypass with saphenous vein harvest site through implementation of a staff-driven quality improvement process. Dimens Crit Care Nurs. 2015;34(5):266-72. **15.** Davies, P., Rippon, M. Evidence review: the clinical benefits of Safetac technology in wound care. Journal of Wound Care 2008; Supplement: 3-31. **16.** Lab report 20151125-003. **17.** Eastburn, S. et al. A review of blisters caused by wound dressing components: can they impede post-operative rehabilitation and discharge? International Journal of Orthopaedic and Trauma Nursing 2016; 21:3-10. **18.** Zarghooni, K., et al. Effect of a modern dressing compared to standard dressings on outcome after primary hip and knee arthroplasty: a prospective, non-randomised controlled study. E-poster presentation at EWMA, 2015.

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