

Reliable, efficient and non-adherent

3M[™] Inadine[™] (PVP-I) Non Adherent Dressing



What is it?

3M[™] Inadine[™] (PVP-I) Non Adherent Dressing consists of a low adherent knitted viscose fabric impregnated with a polyethylene glycol (PEG) base containing 10% Povidone Iodine; equivalent to 1.0% available iodine.

Reliable

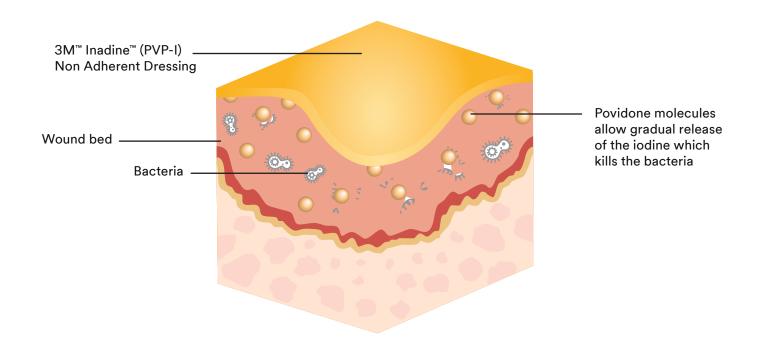
Inadine Dressing is a reliable, efficient and non-adherent dressing designed to help manage bacterial contamination and prevent infection in both chronic and acute wounds.

lodine is a highly effective topical antimicrobial that has been used clinically in the treatment of wounds for more than 170 years¹. It has a broad spectrum of antimicrobial activity with efficacy against bacteria, microbacteria, fungi, protozoa and viruses.¹



Efficient

The Povidone lodine molecule has a broad spectrum antimicrobial action^{1,2} and has been proven to be effective against MRSA³⁻⁵.



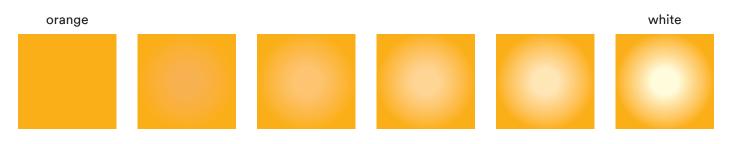
Non-adherent

Inadine Dressing minimises adherence to the wound bed, therefore reducing the risk of damage to the granulation tissue at dressing removal², and in clinical practice has been shown to reduce pain for patients.^{6,7}



How does it work?

As PVP–I is released from 3M[™] Inadine[™] (PVP-I) Non Adherent Dressing, the dressing will change colour from orange to white. The colour change provides an indicator of how frequently dressings should be changed preventing unnecessary dressing changes, when compared to other dressings.¹ This could improve cost effectiveness in treatment.





In a clinical evaluation study 90% of patients reported **no adherence to the wound bed** and **no pain at dressing change.**⁷

When to use it

Inadine Dressing is indicated to manage ulcerative wounds and may also be used for the prevention of infection in:

- Minor burns
- Minor traumatic skin loss injuries

Clinical studies suggest that Inadine Dressing may also be an appropriate dressing choice in the management of chronic wounds, including:

- Ulcers deriving from different aetiologies^{7,8}
- Diabetic foot ulcers^{7,9}
- Pressure ulcers^{1,8}

Inadine Dressing can be used as a primary dressing in combination with other dressings.



RCT study on partial thickness burns confirms that patients treated with Inadine Dressing require less analgesia and experience faster healing, thus reducing hospital visits and time off work.⁶



References

1. Sibbald, R.G. et al. Iodine Made Easy. Wounds International 2011; 2(2). 2. Langley, S.R.N. INADINE* wound dressings speed healing, reduce patient discomfort and cuts costs by almost 40%. Burns 1989 Vol.15. 3. Vowden, P. and Cooper, R.A. An integrated approach to managing wound infection Position Document: Management of wound infection. European Wound Management Association (EWMA). London: MEP Ltd, 2006. 4. Balmforth, V. INADINE Povidone Iodine non adherent dressing as a treatment for superficial wounds infected with Methicillin resistant Staphylococcus aureus. Case Study, 1996. 5. Gordon, J. Clinical significance of methicillin-sensitive and methicillin resistant Staphylococcus aureus in UK hospitals and the relevance of povidone iodine in their control. Postgrad. Med J. 1993, 69(3):106-116. 6. Han K.H et al. Management of partial skin thickness burn wounds with INADINE® dressings. Burns 1989 Vol.15 (6) 399-402. 7. Campbell, N. et al. Evaluation of a non-adherent, povidone–iodine dressing in a case series of chronic wounds. Journal of Wound Care, Vol 22, No 8, August 2013. 8. Witkowski, K. Practice Improvements Related to the Use of Antimicrobial/Antiseptic Products. Poster CAWC 2011. 9. Jeffcoate, W.J. et al. Randomised controlled trial of the use of three dressing preparations in the management of chronic ulceration of the foot in diabetes. Health Technology Assessment 2009; Vol. 13: No. 54.

Note: Specific indications, contraindications, warnings, precautions and safety information exist for these products and therapies. Please consult a clinician and product instructions for use prior to application. This material is intended for healthcare professionals.



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