Prepare to progress

Remove barriers to wound healing with IODOSORB^{\$}

Smith-Nephew

Helping you get **CLOSER TO ZERO**^o delay in wound healing

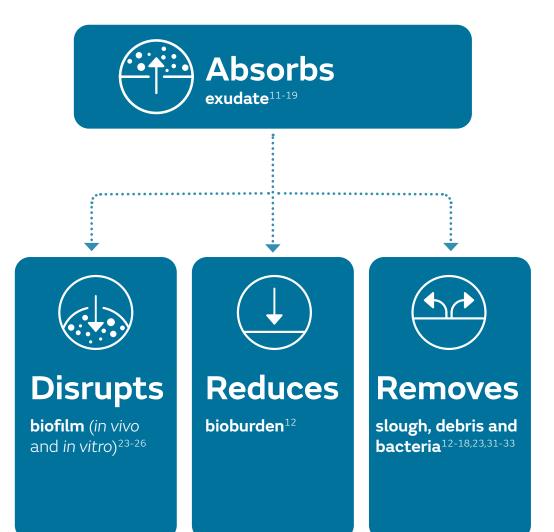
The burden of managing chronic wounds is increasing^{1,2} When wound healing stalls, patients experience lower quality of life and healthcare system costs increase¹



IODOSORB^{\early} helps remove barriers to effective wound healing

Prepare the wound to progress to closure

IODOSORB is indicated for use in chronic and infected wounds where bioburden is a barrier to healing.



Removing barriers to healing through smart bead technology

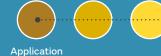
IODOSORB⁶ is a dual-action wound management product that offers the benefits of a broad-spectrum, sustained-activity antimicrobial agent^{29,30,34} in combination with desloughing and fluid-handling properties,¹² making it effective against biofilm in vitro and in vivo.^{8,24-26}



IODOSORB is a unique antimicrobial agent made of cadexomer 'smart' micro-beads: spherical starch structures loaded with 0.9% elemental iodine.

The iodine is physically bound to the bead and provides sustained release when the bead comes into contact with wound fluid. $^{\rm 35-37}$

IODOSORB changes from brown to yellow / white as the iodine is exhausted ³⁸⁻⁴⁰



Dressing change required



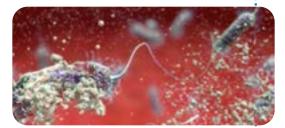
IODOSORB beads absorb exudate^{17,20-22}



Beads swell and absorb slough and debris^{12-17,31,32} including bacteria^{23,33}



Bonds break internally and iodine bound to bead is released in sustained manner³⁵⁻³⁷



IODOSORB provides rapid and sustained, broad spectrum antimicrobial efficacy, including **MRSA**^{29,30}

Anti-biofilm mode of action **Dual-action wound management disrupts biofilm and kills bacteria with exposed iodine**^{23,24,26}

Once the cadexomer beads are able to breach the biofilmspecific matrix, the iodine can subsequently kill the exposed bacteria within the biofilm community.²³



As cadexomer iodine beads swell they can dehydrate and disrupt biofilm matrix²³ and absorb bacteria^{23,33} and debris.^{12-17,31,32}

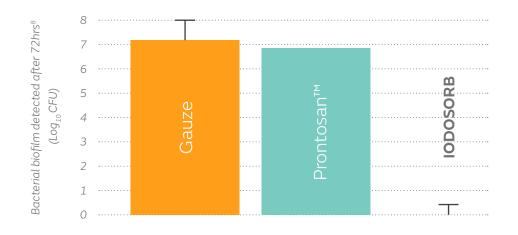


Proven to remove barriers to healing Clinically relevant effectiveness against biofilm

Superior effect of IODOSORB[◊] against *in vitro* and in animal biofilm models compared to Aquacel[™] Ag+^{24,41,42}



Verified to disrupt mature biofilm at 72 hrs compared to Prontosan[™] wound cleanser⁸



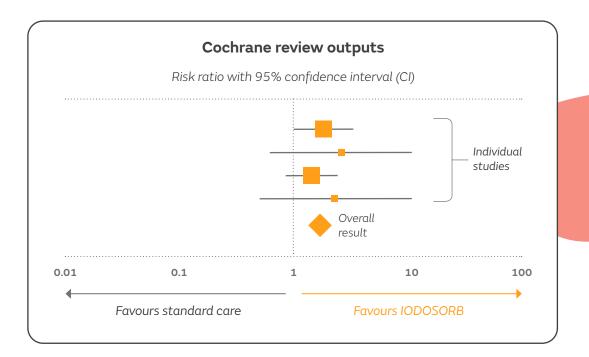
Biofilm reduction in 65% of patients

IODOSORB shown in vivo to clinically reduce biofilm bacteria in non-healing DFUs²⁶

ignificant reduction in biofilm numbers in 11/17 FU patients compared to baseline (p=0.02)²⁶

Prepare to progress

IODOSORB⁶ generates higher healing rates than standard care in venous leg ulcers.⁴³



A meta-analysis of RCT's highlights the faster healing outcomes using **IODOSORB** compared to standard care.⁴³ IODOSORB was the only topical preparation included in this analysis that demonstrated evidence supporting its use in the treatment of VLUs.⁴³

Helping to reduce healthcare costs⁴⁴

Estimated total costs per patient per year of using IODOSORB in addition to standard care versus standard care alone⁴⁴



\$643usd

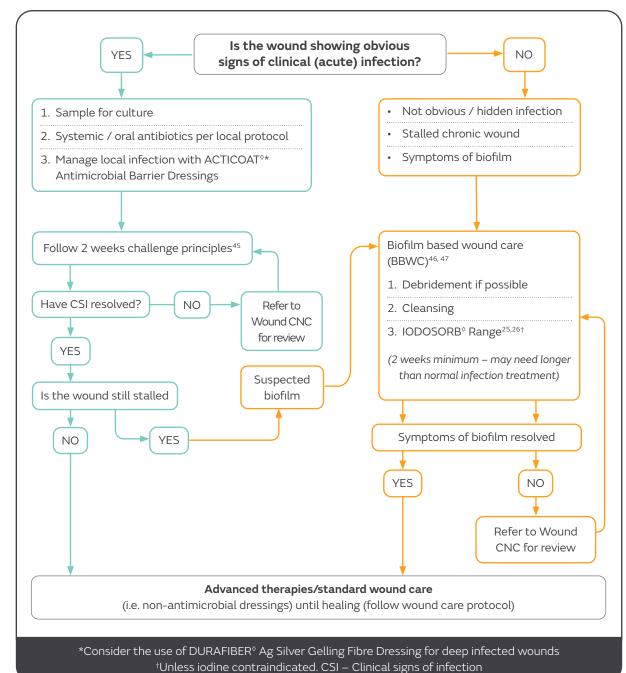
Estimated cost saving per patient per year

Reduce healthcare costs through effective decision making

We understand your priority is to identify and manage barriers to healing, allowing the wound to progress to closure.

> The International Consensus 2012 recommends using antimicrobial dressings for two weeks initially before re-assessment and a decision to stop or continue use.⁴⁵

A pathway to guide appropriate treatment of local infection and biofilm



Effective decision-making, early intervention and appropriate use of antimicrobials are essential to address infection and biofilms reducing healthcare costs.⁴⁵⁻⁴⁷

Prepare to progress⁴⁸

Non-surgical management of a deep DFU with persistent chronic infection

Week 1

Step 1: Patient and wound assessment

- Full medical history and visual observations were performed (Image A)
- Patient was provided with lower limb compression therapy on the left leg and a postoperative shoe

Step 2: Identification

- Tissue biopsy identified MRSA
- SEM of tissue punch biopsy confirmed biofilm presence (Image B)

Step 3: T.I.M.E. - Tissue

 Aggressive scalpel debridement to remove non-viable infected tissue twice weekly at the HRFS and once weekly by community nursing

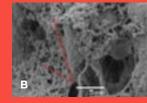
Step 4: T.I.M.E. - Infection

- Wound cleansing immediately after debridement: 15 min with chlorhexidine and cetrimide
- IODOSORB^o Ointment was left in place for up to 2 days during each application
- Oral antibiotics were continued

Step 5: T.I.M.E. - Moisture balance

 ALLEVYN^o NON-ADHESIVE Dressing was applied as a secondary dressing to control excess exudate

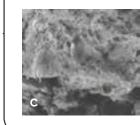




Week 2

Wound monitoring and reassessment

- Clinical signs of biofilm infection were improving and SEM confirmed biofilm reduction (Image C)



- Ongoing aggressive treatment was still required
 Continued Week 1 wound
- Continued Week I wound care regime with two debridements at the HRFS, cleansing with chlorhexidine and cetrimide and application of IODOSORB Ointment

Week 6

Step 6: T.I.M.E. - Edge of wound

 Observation and tissue biopsy showed improvements in wound bed:



- Ongoing aggressive treatment
 was still required
- Continued Week 1 wound care regime with two debridements at the HRFS, cleansing with chlorhexidine and cetrimide and application of IODOSORB Ointment

Week 12

Wound monitoring and reassessment



- DFU was epithelialising and close to closure (Image E)
- ALLEVYN NON-ADHESIVE Dressing was used in combination with compression garments for oedema control

Week 14

Wound monitoring and reassessment

DFU had healed

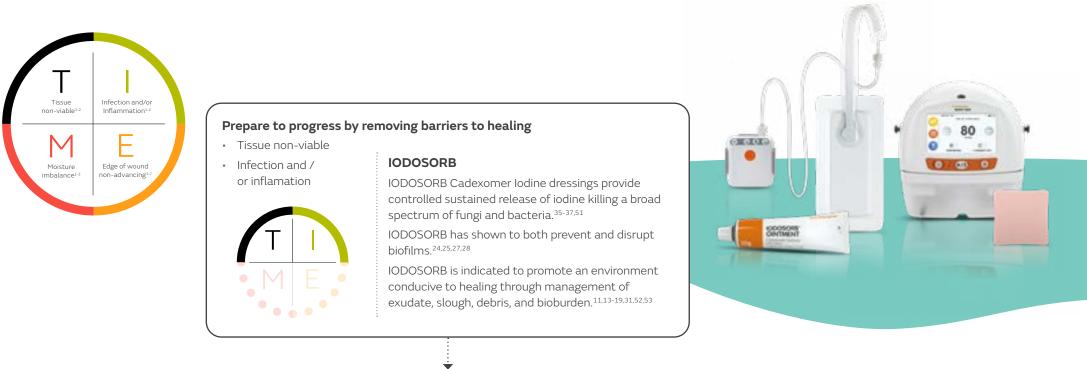
Visit our website to find out more

Abbreviations: HRFS = high risk foot service; SEM = scanning electron microscopy.

All images provided courtesy of Dr. Matthew Malone and Ms. Saskia Schwarzer.

A multi-therapy approach using our T.I.M.E portfolio

Using IODOSORB^o within a biofilm based approach, which follows the T.I.M.E. continuum, may improve patient outcomes.^{26,48}



Progress to closure once barriers to healing have been removed

Moisture Imbalance

Edge of wound



PICO°

PICO Single Use Negative Pressure Wound Therapy

or

RENASYS[°]

RENASYS Negative Pressure Wound Therapy

ALLEVYN^o

Consider stepping down to ALLEVYN Foam Dressing when wound healing has reached an appropriate stage.

Preventing biofilm reforming⁵⁴ ACTICOAT[°]

ACTICOAT is a range of silver antimicrobial barrier dressings that rapidly kills bacteria in as little as 30 minutes. The silver ions released are extremely effective at killing planktonic bacteria, therefore can help to prevent biofilm re-forming.⁵⁴

IODOSORB^{\lambda} is available in a variety of formats and sizes

Туре		Size	Code	Qty
SOODLOWE +	IODOSORB Ointment	10g	66051240	4 Tubes
		20g	66051230*	2 Tubes
	IODOSORB Sheet Dressing	5g (6cm x 4cm)	66051330	5 Sheets
		10g (8cm x 6cm)	66051340*	3 Sheets
		17g (10cm x 8cm)	66051360*	2 Sheets
-	IODOSORB Powder	Зg	66051070*	7 Sachets

*Not available in New Zealand







IODOSORB with cadexomer smart bead technology is highly effective in the treatment of wounds with infection and biofilm^{12,26} IODOSORB is a dual-action wound management product that offers the benefits of a broadspectrum, sustained-release antimicrobial agent^{29,30} in combination with desloughing and fluid-handling properties.¹² IODOSORB anti-biofilm efficacy has been verified by independent data from the laboratory to the clinic^{.8,26,41,42} Its efficacy, resulting in a fast rate of healing, is also supported by a positive Cochrane review.⁴³

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