

# Vliwasorb® Border Meeting the challenge

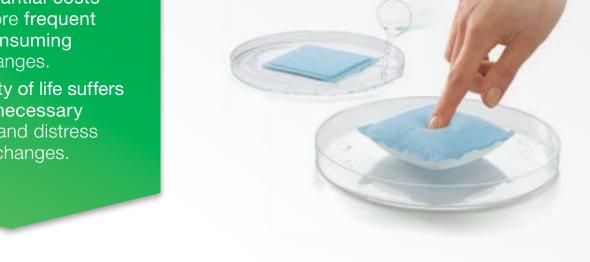


# Managing heavily exuding wounds can be challenging.

## Save time and money with Vliwasorb®

Heavily exuding wounds cause substantial costs requiring more frequent and time consuming dressing changes.

Patient quality of life suffers from the unnecessary discomfort and distress of frequent changes.



Vliwasorb® super absorbent dressings save time and money by reducing dressing changes and promoting wound healing through better exudate management. Improved exudate management increases patient comfort, concordance, and improves quality of life.

The Vliwasorb product portfolio consists of a variety of adhesive border and nonadhesive dressings to better manage challenging wounds of all types.

#### Indications

Vliwasorb is indicated for the management of acute and chronic wounds with moderate to high levels of exudate, including:

- diabetic foot ulcers
- venous leg ulcers
- pressure ulcers
- postoperative wounds healing by secondary intention



## **Encourages wound healing**

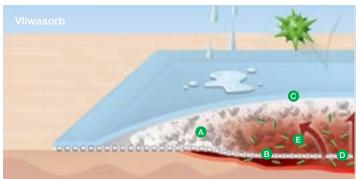
Super absorbent fibers wick away excess moisture to form a conformable gel which locks it away from the wound bed and periwound skin.

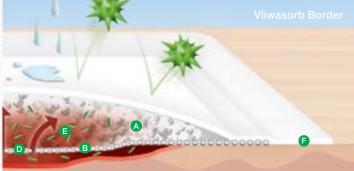
Vliwasorb can absorb 20 times its weight in fluid, effectively removing exudate, matrix metallo-proteinases (MMPs) and other barriers to healing. Exudate binding gel protects the wound and periwound skin from maceration. Fewer dressing changes minimize disturbances to the wound bed, providing more time for healing.1



### Saves time and money

Optimal exudate management extends dressing wear time, reducing dressing and resource costs. Additionally, Vliwasorb protects costly bandaging systems, clothing, and bedding.





A

Super absorbent fiber core forms a moist, conformable gel, maintaining the optimal moisture level for wound healing. B

Distribution layer rapidly wicks exudate away and distributes it evenly over the absorbent core. 0

Blue non-woven protective outer layer prevents strikethrough, extending wear time and protecting bandages, clothing, and bedding. O

Thin and flexible wound contact layer conforms to body contours and will not adhere to fragile wound tissue.

0

Reduces the microbial burden by binding the bacteria within the dressing.

**a** 

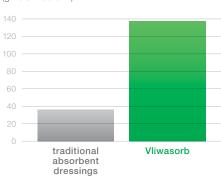
Bidirectional stretch film with skin-friendly adhesive allows for expansion of the fiber core, moves with the skin, and stays in place.

## High exudate management capacity

In vitro testing documents Vliwasorb dressing absorption and retention capacity. Absorbency of Vliwasorb was more than twice that of traditional absorbent dressings without super absorbers? High absorption capacity lowers the frequency of dressing changes, providing more time for wound healing. The super absorbent dressing can stay in place up to 7 days.

## Absorption capacity of wound dressings<sup>2</sup>

absorbent core (g NaCl/100 cm²)

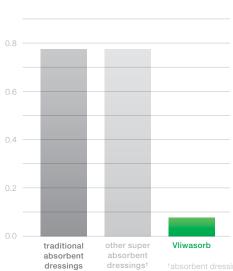


#### Locks exudate away

The super absorbent fibers form a gel on contact with wound exudate, locking fluid in the absorbent core and away from the wound bed and periwound skin, preventing moisture associated damage and maceration.

#### Rewet of wound dressings<sup>2</sup>

rewet wound side (g blood substitute solution/dressing 10 cm  $\times$  20 cm)



#### Comfortable and dependable

The wound contact layer is extensible and conformable and is non-adherent to prevent trauma and pain on removal.

The outer layer protects the wound from external contaminants and fluids while ensuring that absorbed exudate remains locked in the dressing, away from bandages, clothing, or bedding.

Thin, flat, and flexible, the dressing conforms to body contours and surfaces to maximize patient comfort. The low profile design works well under compression bandages, maintaining the distribution of compression.

You can depend on Vliwasorb to manage exudate and exudate associated factors that delay wound healing.<sup>3,4</sup>

†absorbent dressings with superabsorbers, loose in a core of cellulose fluff

## **Case Study**

## Optimal benefits. Minimal costs.

#### Fewer dressing changes

With the use of Vliwasorb, dressing changes were reduced from once per day to once every 3–4 days.

## Promotes wound cleansing and supports wound healing

By the 4th day of treatment, the wound was visibly cleaner, displaying healthy granulation tissue. Exudate containing cell debris, bacteria, and proteases was securely bound within Vliwasorb's gelling fiber core, removing barriers to wound healing.

#### High patient comfort

Patients appreciated the flexible, skin-friendly, non-adherent wound contact layer. Conformable and comfortable, Vliwasorb contributed to a higher quality of life for the patient.

## Case Study

- Female patient, age 88, long standing venous leg ulcer
- concomitant diseases: diabetes mellitus
- status post trauma

#### Previous treatment

ointment dressing and absorbent dressings with daily dressing change

#### **Treatment**

wound cleansing, antiseptic with primary dressing (Vliwasorb), secondary dressing (Suprasorb® F)

## Outcome after 11 days of treatment

reduction in exudate



#### 1st day treatment:

- cloudy wound bed
- heavy exudate
- pale granulation tissue
- wound pain VAS 5
- wound area 6 cm x 10 cm
- wound depth 0.2 cm



#### 4th day treatment:

- wound cleansing evident
- improved granulation tissue
- reduced exudate
- wound pain VAS 1
- epithelialization at wound edges
- wound size reduced to 5 cm x 9.5 cm



#### 11th day treatment:

- clean wound bed
- healthy granulation tissue
- reduced exudate

<sup>\*</sup> N. Mustafi, Frankfurt am Main, Germany

## **Case Study**

## The smart choice under compression.

#### High absorption and binding capacity

High absorption capacity matches dressing performance to your bandaging change schedule. The product can remain in place with the compression system up to 7 days.

## Conformability and flexibility compatible with compression bandages

The low profile design, conformability and extensibility make Vliwasorb the comfortable choice under compression.

#### Gel formation and binding of exudate

Once locked into the absorbent core, moisture is not released back into the wound, even under compression, protecting both wound and periwound skin from moisture associated damage that could delay the healing process.

#### Visible improvement of the wound bed

The dressing's moisture management provides reduction in wound pain, wound depth, and wound area with a notable improvement in granulation and epithelialization.

## Case 2 Study

- Female patient, age 77, pretibial hematoma with left frontal laceration
- post pulmonary embolism
- HIT II with organ heparin allergy

#### Previous treatment

negative pressure wound therapy

#### **Treatment**

wound cleansing, antiseptic with primary dressing (Vliwasorb), secondary dressing (Suprasorb® F), compression therapy

## Outcome after 13 days of treatment

reduction in exudate



#### 1st day treatment:

- wound bed with slight fibrinous coating
- moderate/heavy exudation
- wound pain VAS 4
- wound area 5 cm x 5 cm
- wound depth 2 cm



#### 9<sup>th</sup> day treatment:

- reduction in wound depth
- improved granulation tissue
- wound pain VAS 1



#### 13th day treatment:

- clean wound bed
- healthy granulation tissue
- minimal exudate
- wound pain VAS 0
- epithelialization evident
- wound area reduced to 3.5 cm x 4 cm

<sup>\*</sup> N. Mustafi, Frankfurt am Main, Germany



## People.Health.Care.



Vliwasorb® super absorbent wound dressing

sterile, individually-sealed

Size	Item No.	HCPCS Code	Shipping Units (per box/case)
10 x 10 cm (4 x 4 in.)	24501	A6196	10/360
10 x 20 cm (4 x 8 in.)	24502	A6197	10/340
20 x 20 cm (8 x 8 in.)	24503	A6198	10/300
20 x 30 cm (8 x 12 in.)	26904	A6198	10/180



Vliwasorb® Border super absorbent wound dressing sterile, individually-sealed

Size	Item No.	HCPCS Code	Shipping Units (per box/case)
12 x 12 cm (5 x 5 in.)	30991	A6196	10/260
15 x 15 cm (6 x 6 in.)	30992	A6196	10/330
15 x 20 cm (6 x 8 in.)	136997	A6197	10/140
15 x 25 cm (6 x 10 in.)	30993	A6197	10/110

#### Sources:

- 1. Faucher N., Safar H., Baret M., Philippe A., Farid R. Superabsorbent dressings for copiously exuding wounds. Br J Nurs. 2012; 21 (12):22 ff.
- 2. Steinlechner E., Rohrer C., Abel M., Absorbent dressing with superabsorbend polymers a new generation of wound dressings. Poster P 374 18th Conference of the European Wound Management Association (EWMA) 14 -16 May 2008, Lisbon, Portugal, EWMA Journal (2008) 8 (2) Suppl.: 290
- 3. Wiegand C., Abel M., Ruth P., Hipler U.-C., Polyacrylate super absorbers bind inflammatory proteases in vitro. Poster Conference of the European Wound Management Association (EWMA) 20 -22 May 2009, Helsinki, Finland, Journal Supplement (2009) 9 (2): 161
- 4. Wiegand C., Abel M., Ruth P., Hipler U.-C., Super absorbent polymer-containing wound dressings have a beneficial effect on wound healing by reducing PMN elastase concentration and inhibiting microbial growth. J Mater Sci Mater Med. (2011) 22 (11): 2583 2590



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