



URGO CLEAN AG

**11
APR
13:00**



CLEAN AND KILL INFECTION WITH URGO CLEAN AG



PRESENTED BY
BEN HARRISON
URGO PRODUCT SPECIALIST



Infection is a burden for patients and the healthcare system



HIGH PREVALENCE:

Infection is one of the **most frequent complications** of non-healing wounds¹



COMPLICATIONS OF WOUND INFECTION¹:

- Delayed wound healing, patient anxiety, confusion and stress
- Hospitalisation, amputation and potentially death
- Delays in planned surgical interventions

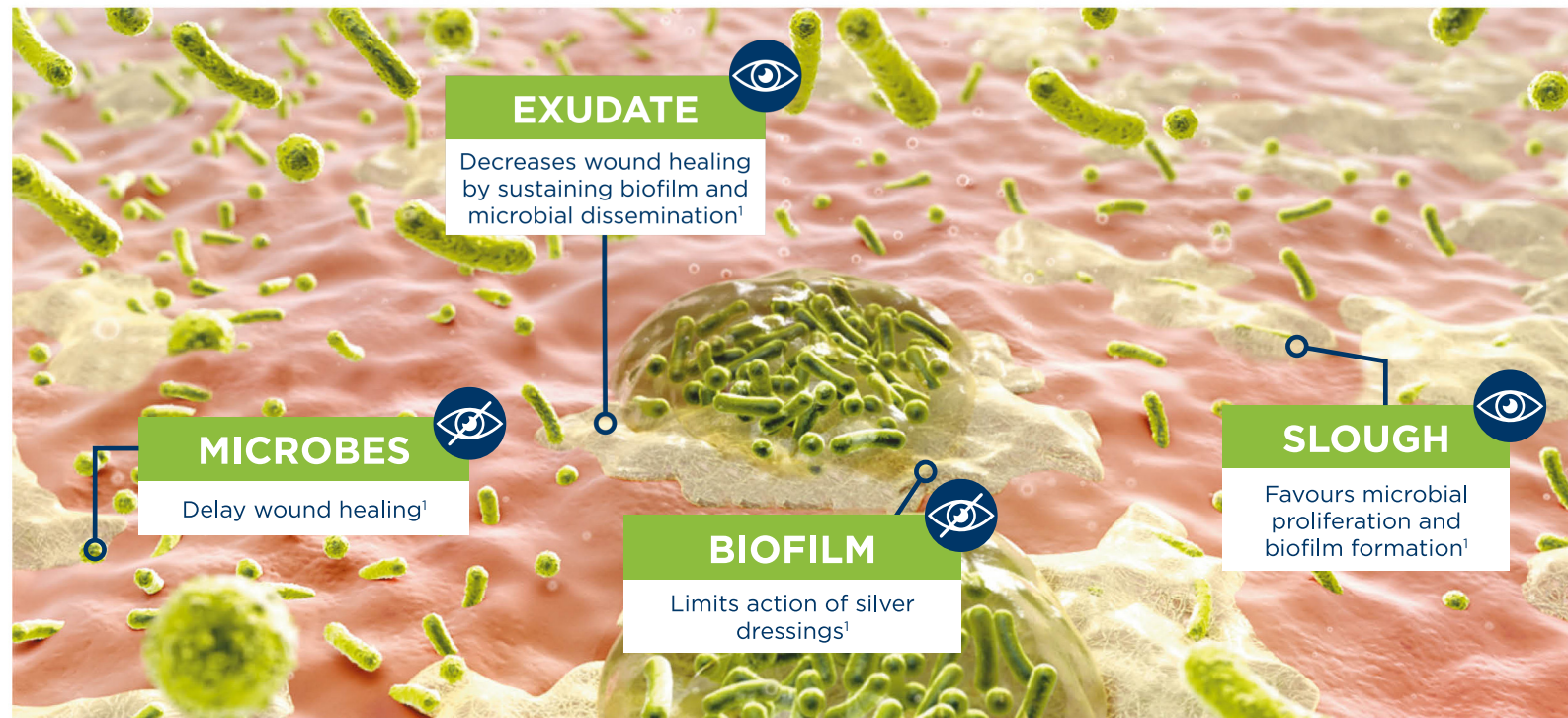


INCREASED WORKLOAD AND EMOTIONALLY DRAINING FOR NHS STAFF

Fighting local infection is a priority and requires a quick and effective treatment from Day 1.

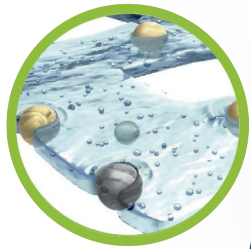


No wound, at risk or with signs of local infection, is a clean wound



To effectively fight against local infection, both the visible and hidden enemies in an infected wound need to be addressed

UrgoClean Ag Fights against both the visible and the hidden enemies in an infected wound



MICROBES

Silver ions in TLC-Ag kill Microbes



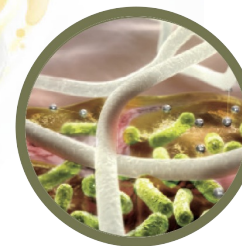
EXUDATE



SLOUGH



Polyabsorbent fibres deliver complete and continuous cleaning action which removes slough and exudate



BIOFILMS



Combined cleaning and antimicrobial action defeats biofilms and prevents their reattachment

UrgoClean Ag Provides complete and continuous cleaning action due to its polyabsorbent fibres



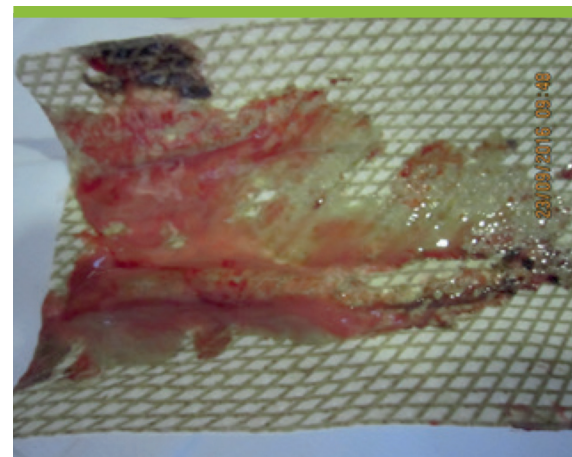
Clinically proven complete cleaning action which removes wound debris such as slough, exudate, microbes and biofilm



CLEANING

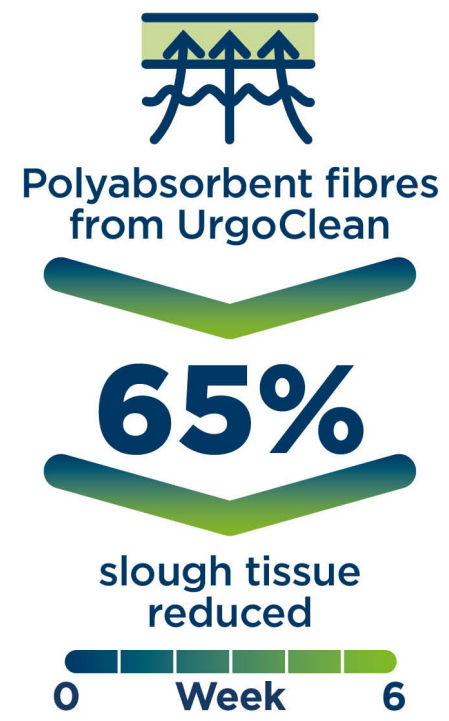
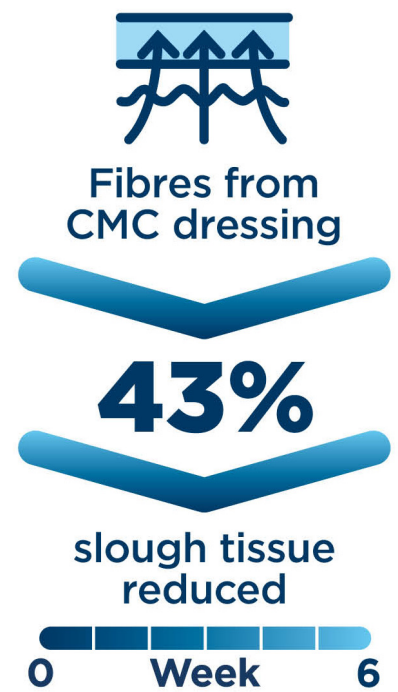
UrgoClean Ag reduces the volume of exudate in infected wounds

- **75%** reduction in patients with heavy exudate¹
- **62.5%** reduction of sloughy tissue and wound debris¹
- Removes all signs of localised infection¹
- Continuous cleaning achieved for up to 7 days¹



UrgoClean Ag Clinically proven cleaning action

Reduction in sloughy tissue %



*p+0.013

Polyabsorbent fibres scored significantly higher than fibres from CMC dressing in reduction in sloughy tissue demonstrating the superior efficacy of the polyabsorbent fibres

UrgoClean Ag

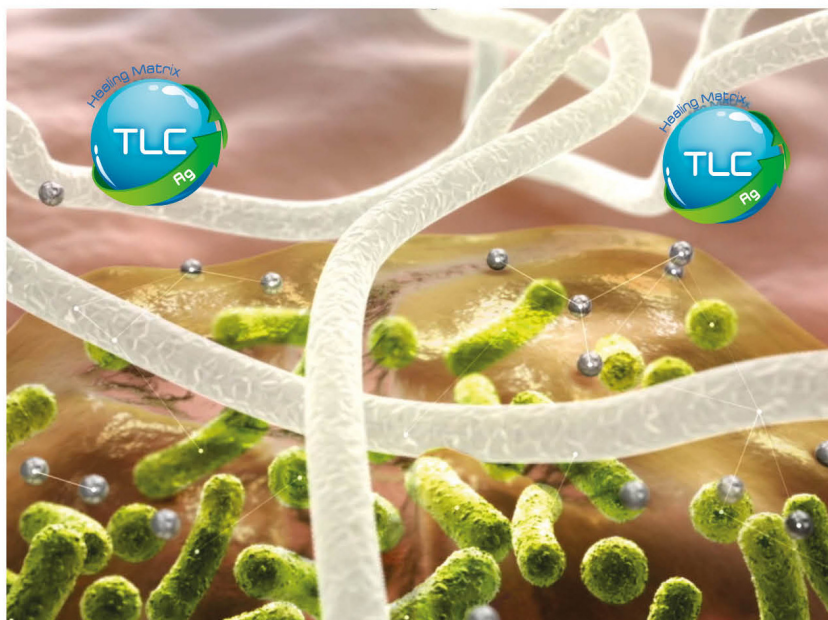
Fast and effective anti-biofilm action



99.99% biofilm population reduction achieved in just 24h¹



Blocks biofilm reattachment for up to **7 days**¹



ANTI-BIOFILM



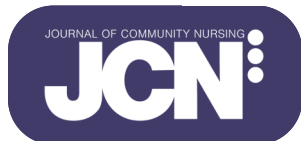
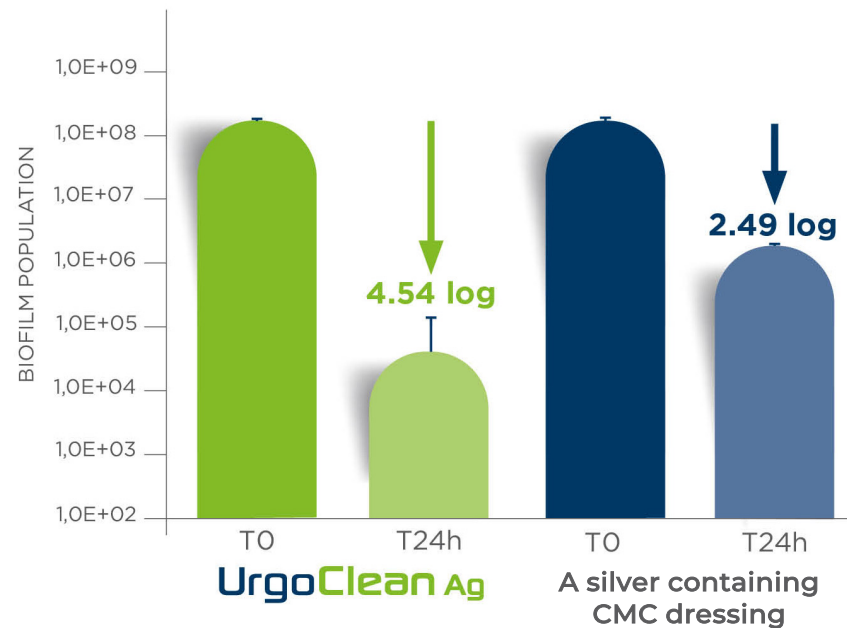
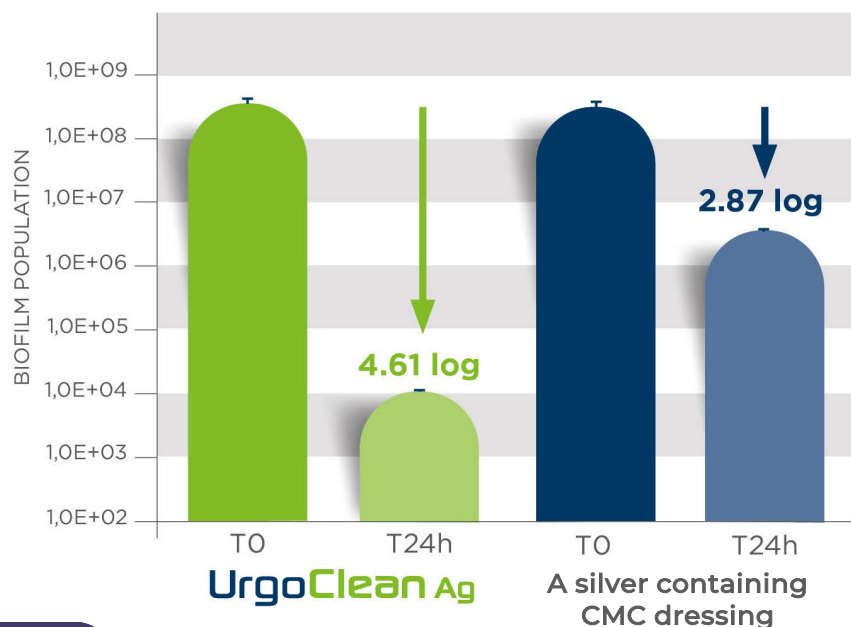
UrgoClean Ag

Superior anti-biofilm efficacy¹ Compared to a silver containing CMC dressing (in vitro)

UrgoClean Ag demonstrated superior anti-biofilm efficacy compared to a silver containing CMC dressing, on both strains after 24h. Biofilm reduction >99.99%

UrgoClean Ag is 50 times stronger on MRSA Mature Biofilm³

UrgoClean Ag is 100 times stronger on P. aeruginosa Mature Biofilm³



1. Desroche N, et al (2017) Comparison of in vitro anti-biofilm activities of a new poly-absorbent dressing with a silver matrix and a silver-containing CMC dressing. Poster EWMA May 2017

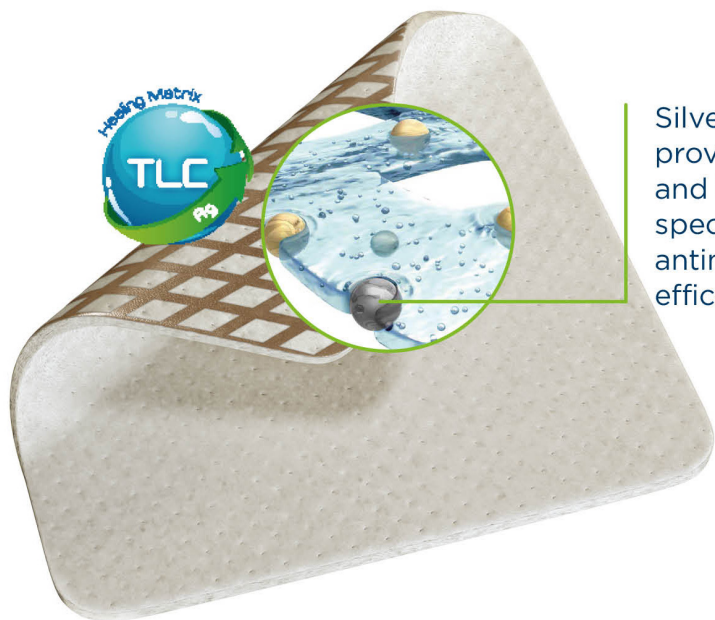


UrgoClean Ag

Proven antimicrobial efficacy you can trust



- **Fast action:** from 30 minutes on main strains¹
- Works against **bacterial strains resistant to antibiotics** (e.g MRSA, VRE)²
- **99.99%** efficacy in just 24h²
- Restores the healing process

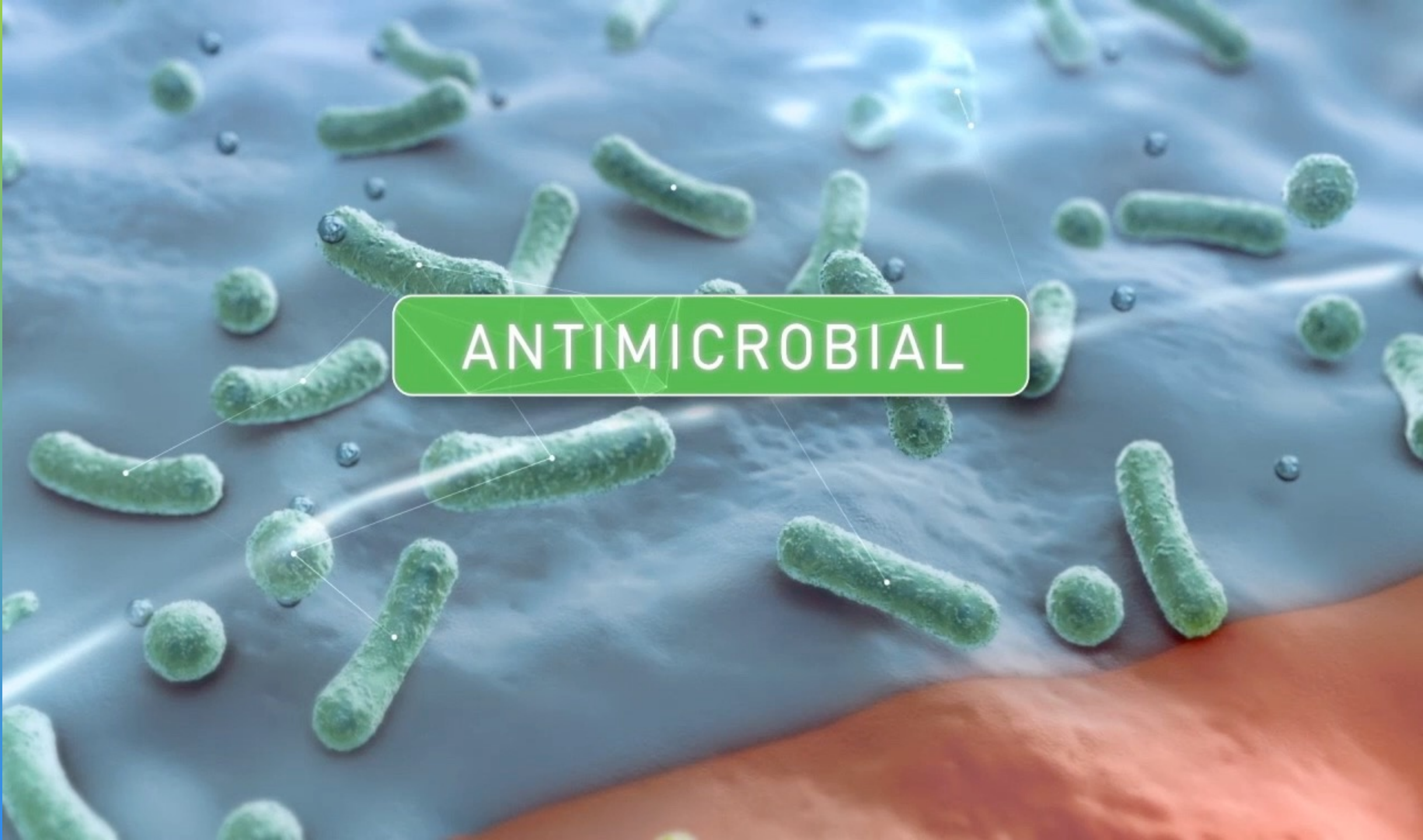


Silver ions provide fast and broad spectrum antimicrobial efficacy

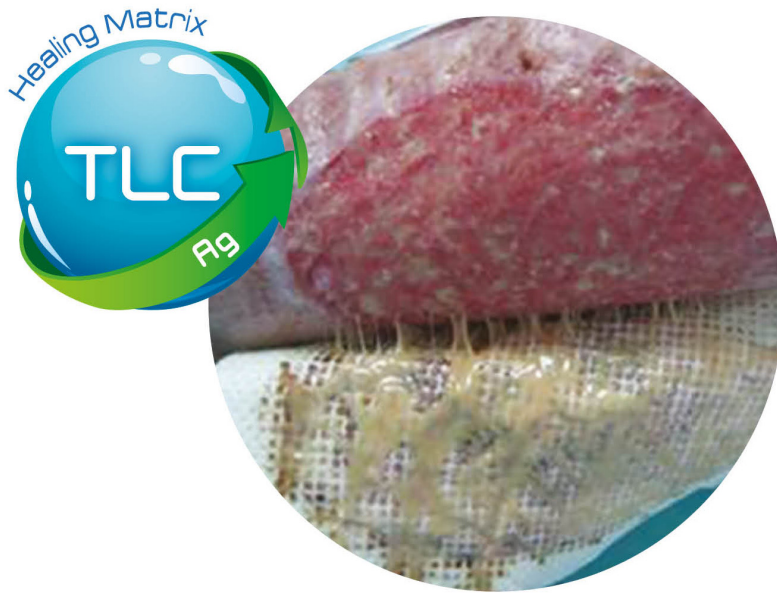


1. UrgoClean Ag. data on file, 20142
2. Desroche N, et al (2017) *Comparison of in vitro anti-biofilm activities of a new poly-absorbent dressing with a silver matrix and a silver-containing CMC dressing*. Poster EWMA May 2017

ANTIMICROBIAL



UrgoClean Ag comes with the unique TLC-Ag technology, which allows atraumatic dressing changes



Polyamide fibres coated with elemental silver dressing



UrgoClean Ag

- ✓ **No pain** at dressing changes¹
- ✓ Will **not damage** newly formed tissue¹
- ✓ **Non-adherence** to the wound bed¹
- ✓ **Protects** the surrounding skin¹

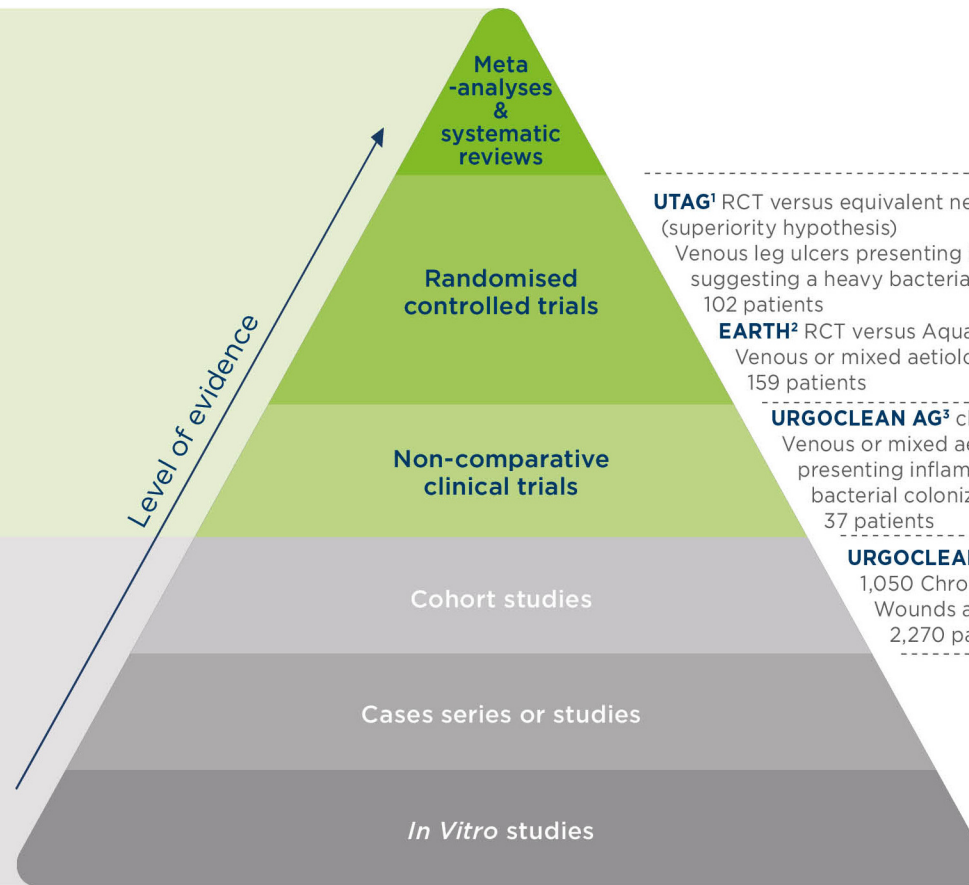
1. Dalac S, Sigal L, Addala A, et al (2016) Clinical evaluation of a dressing with poly-absorbent fibres and a silver matrix for managing chronic wounds at risk of infection: a non comparative trial. *J Wound Care* 25(9): 531-8

UrgoClean Ag

Efficacy proven in clinical trials, confirmed in real-life

Proven in clinical trials...

...confirmed in real life



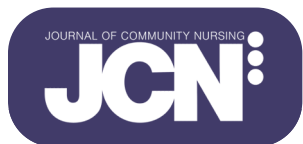
UTAG¹ RCT versus equivalent neutral dressings (superiority hypothesis)
Venous leg ulcers presenting inflammatory signs suggesting a heavy bacterial colonization
102 patients

EARTH² RCT versus Aquacel®
Venous or mixed aetiology leg ulcers
159 patients

URGO CLEAN AG³ clinical study
Venous or mixed aetiology leg ulcers and pressure ulcer presenting inflammatory signs suggesting a heavy bacterial colonization
37 patients

URGO CLEAN AG³ observational study
1,050 Chronic, 876 Acute and 339 Unclassified
Wounds at risk or with signs of local infection
2,270 patients

REFERENCES



ANTIBACTERIAL ACTIVITY TEST⁴
MRSA and *P.aeruginosa* Contact time: 24h

BROAD-SPECTRUM ANTIMICROBIAL TEST⁵
36 bacterial strains and 4 yeast strains Contact time: 30 min and 24h

ANTI-BIOFILM ACTIVITY TEST⁶
Mature 24 hours old biofilm *S. aureus* of Contact time: 1 day, 2 days, 4 days and 7 days without dressing change

COMPARATIVE ANTI-BIOFILM ACTIVITY TEST⁷
vs Aquacel® Ag+Extra Mature 24 hours old biofilm of *S. aureus* and *P. aeruginosa* Contact time: 24h

COMPARATIVE ANTI-BIOFILM ACTIVITY TEST⁸
vs Cutimed® Sorbact® Mature 24 hours old biofilm of *S. aureus* and *P. aeruginosa* Contact time: Day 2



UrgoClean Ag Real Life Clinical Evidence

- ✓ Efficacy proven in real-life study with more than 2000 patients, including 77 patients under the age of 18
- ✓ After only 2 weeks, 90.6% of the wounds treated demonstrated improvement of the healing process
- ✓ High antimicrobial efficacy and good restoration of the healing process regardless the level of slough and exudate in the wound
- ✓ Effective on all types of infected wounds and at risk of infection
- ✓ As reported by clinicians, UrgoClean Ag demonstrated better performance and efficacy compared to a silver containing CMC dressing



Use of a TLC-Ag dressing on 2270 patients with wounds at risk or with signs of local infection: an observational study

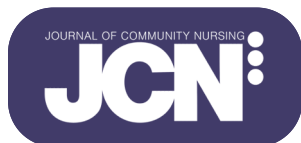
*Joachim Dissemmond,¹ MD; Michael Dietlein,² MD; Ingo Neßeler,³ MD; Lutz Funke,⁴ MD; Oliver Scheuermann,⁵ MD; Elisa Becker,⁶ Laetitia Thomassin,⁷ PhD; Udo Möller,⁸ PhD; Serge Bohbot,⁷ MD; Karl-Christian Münter,⁸ MD

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THE LARGEST OBSERVATIONAL STUDY EVER CONDUCTED FOR A SILVER DRESSING!

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Dissemmond J, Dietlein M, Neßeler I, Funke L, Scheuermann O, Becker E, Thomassin L, Möller U, Bohbot S, Münter KC (2020) Use of a TLC-Ag dressing on 2270 patients with wounds at risk or with signs of local infection: an observational study. *J Wound Care* 29(3): 162-73

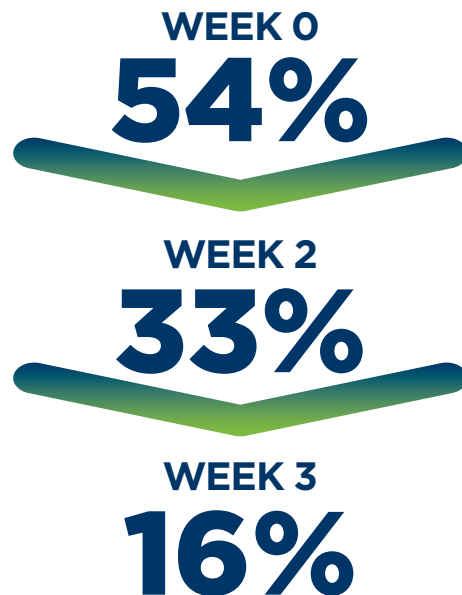


UrgoClean Ag Real life evidence: effectively reduces levels of exudate

Proportion of wounds infected/at risk of infection in caseload with high/moderate level of exudate

Chronic Wounds

(eg. Diabetic foot ulcers, Leg ulcers, pressure ulcers)



Acute Wounds

(eg. Trauma wounds, Burns, Post-op)



UrgoClean Ag effectively reduces the level of exudate (70% reduction), in line with the reduction of clinical signs of infection

UrgoClean Ag Real life evidence: effectively treats infected wounds and clinical signs of local infection

Proportion of diagnosed infected wounds in caseload

Chronic Wounds

(eg. Diabetic foot ulcers, Leg ulcers, pressure ulcers)



Acute Wounds

(eg. Trauma wounds, Burns, Post-op)



UrgoClean Ag demonstrates effectiveness by significantly reducing the number of diagnosed infected wounds and the clinical signs of local infection **after only 2 weeks**

UrgoClean Ag

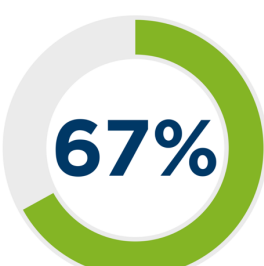
When looking at antimicrobials, which of these criteria are most important to you?

Fighting the visible and invisible enemies



Percentage of nurses who found UrgoClean Ag performed better than a silver containing CMC dressing

Ensuring patient comfort and adherence



Allowing easy integration in your standard of care



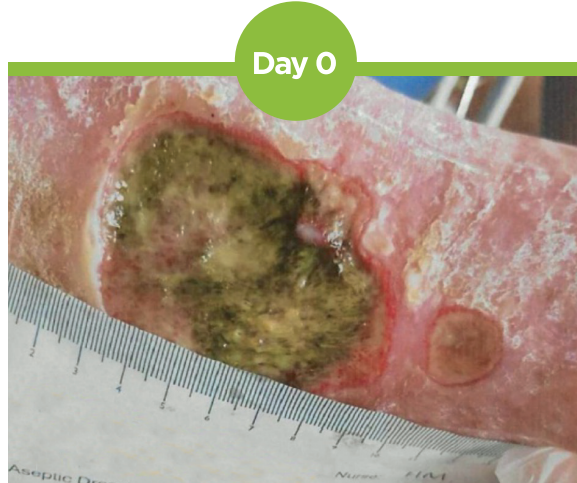
UrgoClean Ag in clinical practice

How long currently does it take to treat your infected wounds/at risk of infection?

LEG
ULCER



VENOUS
LEG
ULCER



UrgoClean Ag in clinical practice

How long currently does it take to treat your infected wounds/at risk of infection?

DIABETIC
FOOT
ULCER



DIABETIC
FOOT
ULCER



UrgoClean Ag in clinical practice

How long currently does it take to treat your infected wounds/at risk of infection?

TRAUMATIC WOUND

Day 0



Day 3



Day 14

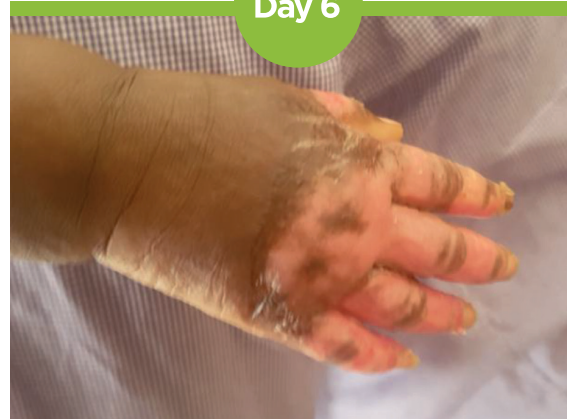


BURN WOUND

Day 2



Day 6



UrgoClean Ag

Easy to integrate into your infection management practice

UrgoClean Ag is suitable for ALL wounds at risk or with signs of local infection

Biofilm

Risk of infection & local infection

UrgoClean Ag

Spreading infection

UrgoClean Ag
+ Systemic Antibiotics

Systemic infection

UrgoClean Ag
+ Systemic Antibiotics



SIZES

6 x 6cm

10 x 10cm

15 x 20cm



Haemostatic



Can be used with a secondary dressing



Can be cut



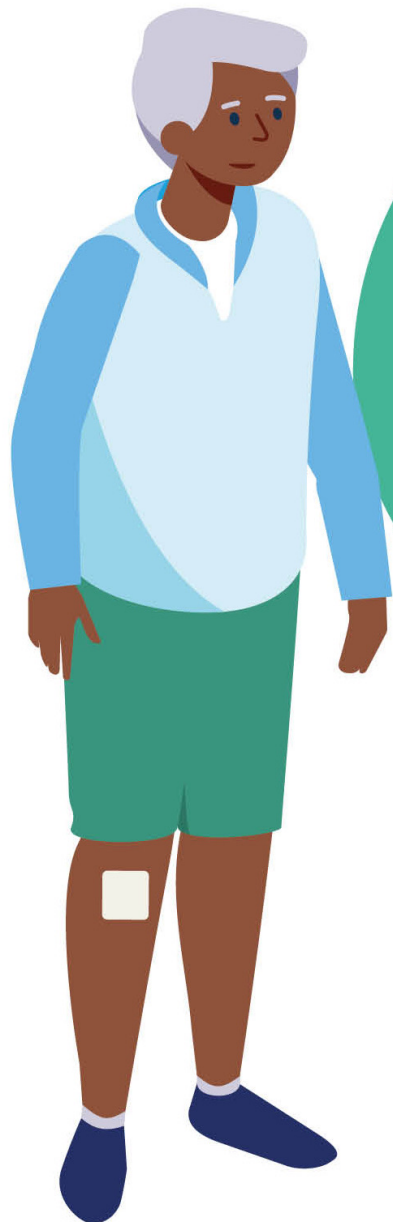
Can be used under compression



Can be used in a cavity wound when cut in a spiral



Atraumatic removal



Return to Healing *with* UrgoCleanAg



SIMPLE

Suitable for patients who self-care: can stay in place for up to 7 days.

SAFE

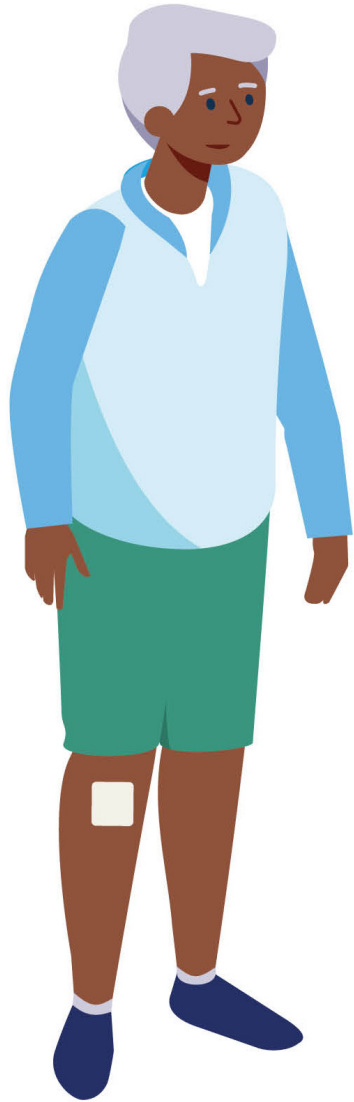
Safe & easy to use with 1-step application process.

No pain at dressing changes.

EFFECTIVE

Fast, effective reduction of local signs of infection

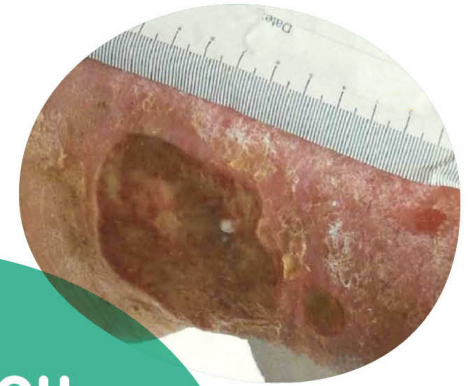
Minimises infection recurrence by complete and continuous cleaning action in the removal of slough, exudate, biofilms and debris from the wound.



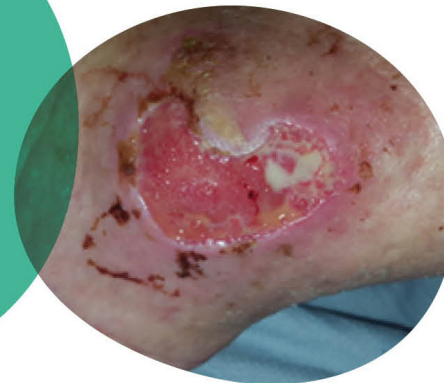
How confident are you that UrgoClean Ag can help you return your patients to healing?



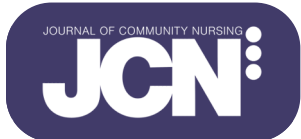
Have you struggled to heal wounds like these in your caseload?



Which of your current patients could benefit from UrgoClean Ag?



UrgoCleanAg



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DOWNLOAD

YOUR

CERTIFICATE



www.jcn-live.co.uk/virtual-lunch-meeting