

WHY **SUPRASORB® P SENSITIVE**IS THE FOAM FOR YOUR PATIENTS

11 NOVEMBER 2021 SIMON BARRETT ADAM OCCLESHAW 13:00 - 13:45

Discussing: Suprasorb® P Sensitive





The status quo: today's world and perspective

Wound prevalence continues to concern:

- 3.9 million wounds and 7% of the UK population have an active wound requiring intervention (Guest et al, 2020)
- 71% increase in wound prevalence (Guest et al, 2020)
- 48% increase in resource/costs in wound management (Guest et al, 2020)
- Exudate can range from 0.17g/cm² to 0.86g/cm² over 24 hours (World Union of Wound Healing Societies [WUWHS], 2019)
- 54.4 million healthcare professional/patient wound care visits (Guest et al, 2020).





The status quo: today's world and perspective

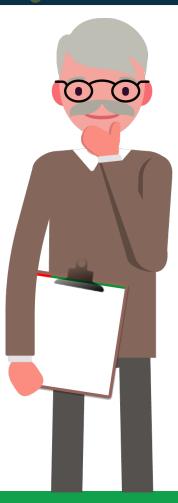
Silicone foam usage in 2020:

- 11.8 million silicone foam dressings used in 2020 versus 7 million superabsorbent dressings (GPrX, 2020)
- £30 million spent on foam dressings versus £16 million on superabsorbent dressings (GPrX, 2020).





The problem with the status quo



Guest data (Guest et al, 2020):

- Wound care prevalence
- Types of wounds
- Range of exudate.

NHS challenges:

- Time/re-dressing
- Patient outcomes.

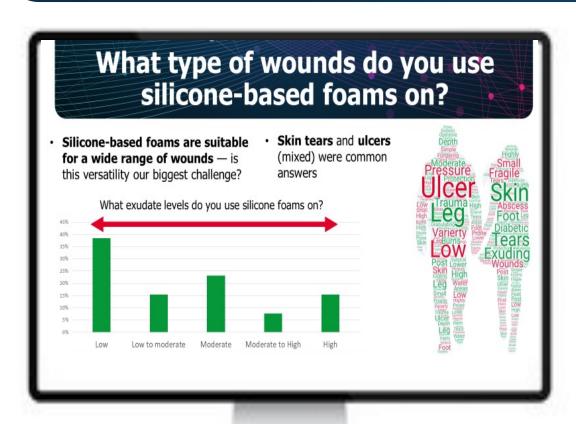
Silicone foam usage:

- Why so popular?
- Where are they meant to be used?





Your responses from our last virtual lunch meeting support this further









The solution





High absorbency³

High MVTR³



Optsil Technology offers soft but effective adherence⁴

> 2 layers of PU foam⁵

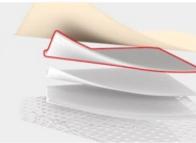


Fluid and bacterial barrier⁶

Designed to prevent lateral shear forces⁵



Patient benefits built into every layer



A full range of shape and sizes for all wound types



With
OptiSil
wound
contact layer
technology



Challenges and temptations

- New products can offer significant improvements to patient outcomes and budget impact
- Time pressures may impact on the ability to accommodate robust evaluations to allow confidence in new products
- Small sample groups may give inflated positives or inflated negatives.

How can industry do more to support the NHS and clinicians to instil confidence in new products?





Building robust evidence

Suprasorb[®] P sensitive: A 51-wound clinical evaluation

KEY WORDS

» Clinical evaluation » Exudate managemen >> Peri-wound skin

of the main challenges in wound for patients who are managing their own wounds care is efficient exudate management. or share care with their clinician, Also, from the products are available to manage exudate, with to remove without causing pain or trauma, and the aim to improve patient outcomes and enhance without leaving a residue on the skin (Dowsett, patients' quality of life (World Union of Wound 2011; Vowden, 2011). Medical adhesive-related fealing Societies [WUWHS], 2019). A dressing's skin injuries (MARSIs) are traumas to the periexcess moisture saturating the wound bed and peri- can increase the risk of infection (Reinke and wound skin is important to avoid breakdown of the Sorg. 2012; Yates et al, 2012), delay healing and epithelium (Dowsett, 2011; Vowden, 2011; Gethin subsequently increase pain and discomfort for the et al. 2014; WUWHS, 2019). If the dressing does patient, and increase financial burden (Fumarola not have good exudate handling properties and the et al, 2020). The prevalence of MARSIs is possibly surrounding skin becomes macerated, this leads under-estimated, but they should be considered a to perceived wound deterioration, increased pain, 'never' event in wound management and avoidable increased risk of malodour and increased risk of Patients can often fear dressing changes due to infection (Gethin et al, 2014; Benbow et al, 2010). thoughts of pain and negative previous experiences A dressing must also be easy to handle, easy to of dressings that adhered to the wound bed apply and remove, and conformable to the body (European Wound Management Association, 2002; tours. These aspects are especially important Berchert and Abraham, 2009; Gardener et al. 2017)

- Primary outcomes to achieve why did we aim to achieve this
- Design range of patients, wounds, and exudate
- Initial results
- End results
- Clinician overall feedback
- Patient overall feedback.

(Barrett et al. 2021)



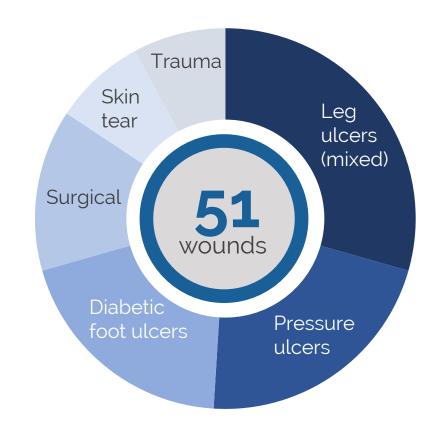




How was the study robust?



Average age – 71 (42–99) 20 Male 30 Female.



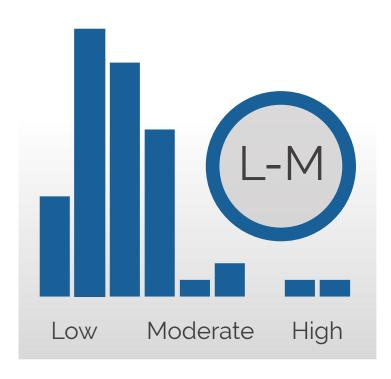


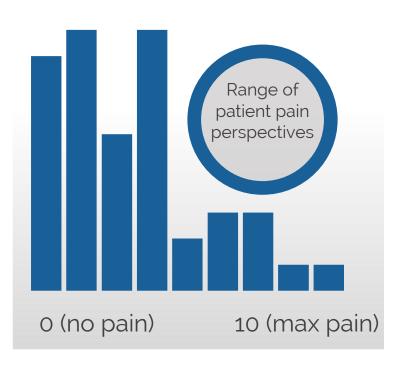
2 weeks

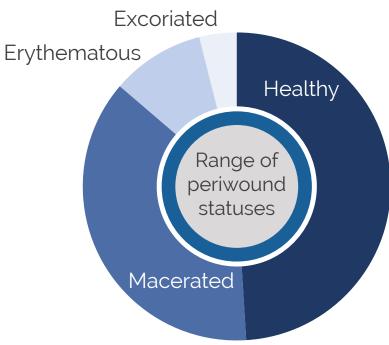




How was the study robust?



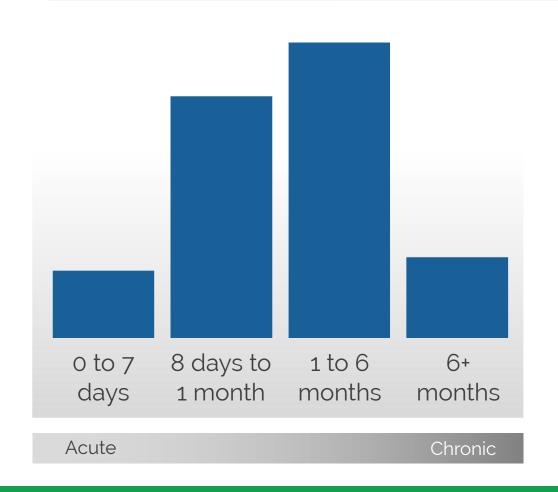


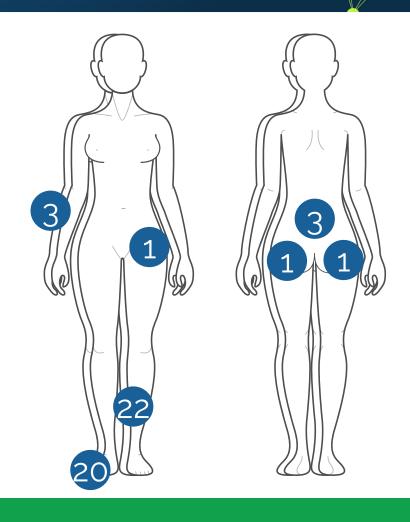






How was the study robust?









Suprasorb® P sensitive was put to the test

The study was wide ranging and representative of general practice:

- ✓ Large number of patients (n=50)
- Range of patients, sex, age and pain thresholds
- Range of wound types
- Range of periwound status
- Range of exudate challenges

- ✓ Range of acute and chronic wounds (n=51)
- Long duration and includes four dressing changes
- ✓ Range of market leading previous foams to compare.

Can Suprasorb® P sensitive deliver

Exudate control?

Atraumatic removal?

Periwound protection?

Clinician preference?

Patient preference?





The results

	Ease of application	Conformability	Patient comfort	Exudate control	Atraumatic removal	Clinician score
First application first impressions	38% Better 62% Same 0% Worse	40% Better 60% Same 0% Worse	36% Better 64% Same 0% Worse	Not recorded as first application		
Post evaluation four changes	33% Excellent 32% Very good 33% Good 1% Poor	37.5% Excellent 27% Very good 35.5% Good 0% Poor	88% (Satisfactory or better)	12% Excellent 37% Very good 43% Good 8% Poor	39% Excellent 27% Very good 32% Good 2% Poor	80% (Satisfactory or better)

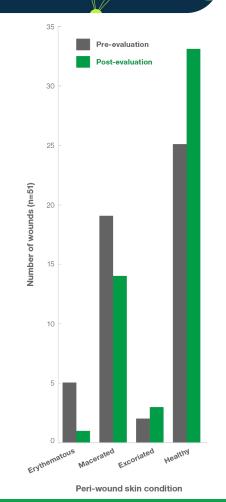




In summary

Suprasorb® P sensitive received consistently high scores.

	Ease of application	Conformability	Patient comfort	Exudate control	Atraumatic removal	Clinician score
First application first impressions	100% (Excellent, very good or good)	100% (Excellent, very good or good)	100% (Excellent, very good or good)	Not recorded as first application		
Post evaluation four changes	99% (Excellent, very good or good)	100% (Excellent, very good or good)	88% (Satisfactory or better)	92 % (Excellent, very good or good)	98% (Excellent, very good or good)	80% (Satisfactory or better)







Case 1: 79-year-old male

- Presented with skin tear on his right elbow for three days
- Treatment to this point included an alternative silicone foam dressing
- Initial wound measurements 3cm x 2.5cm.

Initial assessment of wound:

- 50% granulation, 50% devitalised tissue in wound bed
- Healthy periwound skin
- 1/10 exudate volume (low)
- 1/10 pain level
- Suprasorb® P sensitive planned twice a week.

Initial assessment





Case 1: 79-year-old male

11 days into treatment:

- 'Improving' wound status
- Periwound skin remained 'healthy'
- Exudate volume remained low
- Wound size reduced to 2.2cm x 1.5cm.

Rated 'Excellent' for:

- ease of application,
- absorption,
- patient comfort,
- ease of removal and
- conformability.





Initial assessment

11 days of treatment

Overall clinician score 9/10 Overall patient score 10/10





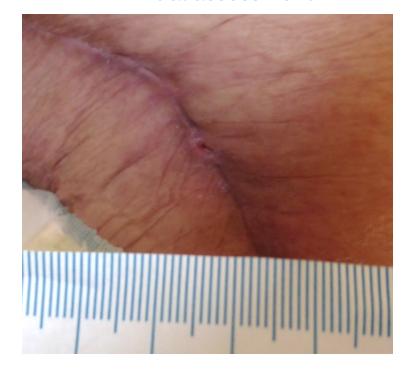
Case 2: 83-year-old female

- Presented with a surgical wound on right hip present for two months
- Wound position along suture line of 1cm depth.

Initial assessment of wound;

- 100% granulating
- Healthy periwound status
- 3/10 exudate volume (moderate)
- 2/10 pain level with itch.

Initial assessment





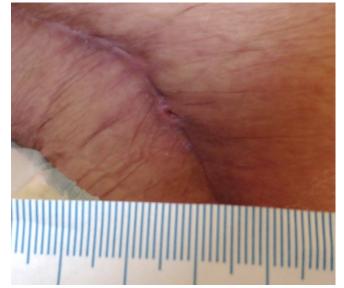
Case 2: 83-year-old female

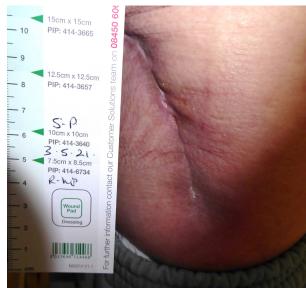
14 days into treatment;

- 'Static' wound status
- 'Healthy' periwound status
- Reducing exudate volume.

Rated 'Excellent' for:

- patient comfort,
- ease of removal,
- conformability and
- 'very good' for ease of application and
- absorption.





Initial assessment

14 days of treatment

Overall clinician score 9/10 Overall patient score 10/10





Suprasorb® P sensitive technology









Protective backing:

- Breathable with high moisture vapour transmission rate (MVTR)³
- Clear to allow monitoring of exudate without removal³
- Smooth and conformable 10
- Fluid and bacterial barrier⁴

Super-absorbent core*

- Super-absorbent polymer fibres³
- Effective absorption capacity 1
- Reduces the risk of maceration⁹

Non-woven layer:

Effective distribution of exudate maximising absorption efficiency³

Absorbent PU foam:

- Efficient exudate management⁸
- Provides comfort and a cushioning effect⁷

OptiSil silicone wound contact layer:

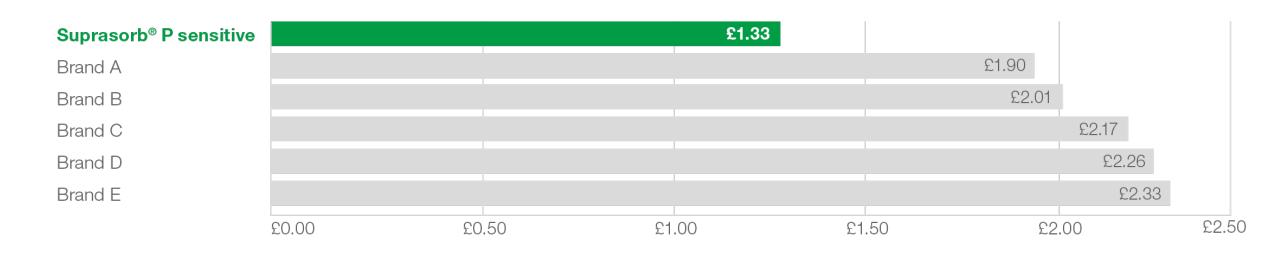
- Allows effective absorption of exudate into the dressing⁶
- Soft and low adherent silicone allows atraumatic dressing removal⁵





Gentle on patients, gentle on budgets

FP10 Drug Tariff



Prices taken from Drug Tariff September 2021, Sizes 10x10 or closest alternative





Choose Suprasorb® P sensitive for your patients

- Request a sample pack and download the paper after this session
- Suprasorb® P sensitive is available on FP10, SBS and on NHS Supply Chain in November
- L&R are at hand to support throughout the process get in touch today.













References

- Barrett S, King B, Welch D, Scales A, Nockels S (2021) A 51-patient clinical evaluation of Suprasorb P Sensitive. Wounds UK 17(3)
- Guest JF, Fuller GW, Vowden P (2020) Cohort study evaluating the burden of wounds to the UK's National Health Service in 2017/2018: update from 2012/2013. *BMJ Open* **10:**e045253
- World Union of Wound Healing Societies (WUWHS) (2019) Consensus Document. Wound exudate: effective assessment and management. Wounds International, London
- GPrX data (2020)





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