



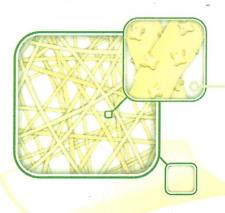
Medical Device Reg NO: GD6610921-59294 Medical Device Name: Activheal Aquafiber AG

D.D.L. Medical Supplies (121957) Ground Floor, Lot 348, Lorong 7A, Jalan Ang Cheng Ho, 93100 Kuching, Sarawak, Malaysia Tel: 019-6641255 High Silver Content // Fast initial Elution of Silver lons // Sustained Silver Release // High Wet Strength //

AQUAFIBER M INDICATED FOR THE MANAGEMENT OF INFECTED WOUNDS OR WOUNDS THAT ARE AT RISK OF INFECTION.

ActivHeal Aquafiber® Ag Antimicrobial wound dressing is a sterile, non-woven pad consisting of a high M (mannuronic acid) calcium alginate and carboxymethylcellulose (CMC).

Silver ions are released in the presence of wound fluid. As fluid is absorbed, the alginate forms a soft gel which assists in maintaining a moist environment for optimum wound healing and allows intact removal. Silver ions released in the presence of wound exudate are an effective antimicrobial agent for up to 7 days, based on in-vitro testing, against a broad spectrum of microorganisms frequently associated with bacterial colonisation and infection of wounds.



PERFORMANCE

Silver salts are attached to the fibres and ionic silver is released in the presence of wound exudate

Absorbency 1

Higher absorbency can result in reduced dressing change frequency, minimising clinician time and disruption to the patient.

15.26

AQUAFIBER AG 16.43

g/100cm2

Fast initial and sustained anti-microbial activity²

	A	QUAFIBER A	AG	AQUACEL AG		
BACTERIA	7 DAYS	14 DAYS	21 DAYS	7 DAYS	14 DAYS	21 DAYS
MRSE	~	~	~	~	~	×
MRSA	~	~	~	~	~	×
VRE	~	~	~	~	~	×
S.pyogenes	~	~	~	~	~	×
S.epidermidis	~	~	~	~	~	×
E.Coli	~	~	~	V .	V .	~
C.Albicans	~	~	~	~	~	×
P.aeruginosa	/	~	~	_	~	_

CASE STUDY

Patient MB, is a 55 year old lady who was seen following an Incision and drainage of an abscess and presented to the Tissue viability team with a cavity wound to the left groin.







- Wound measured 11.2cm by 2.2cm and had a depth of 10.4cm
 - Wound presented as 5% necrotic, 45% slough and 50% granulating tissue
 - Wound showed clinical signs of infection erythema, heat, odeama, increased level of exudate and abnormal discharge
 - ActivHeal Aquafiber® Ag ribbon applied and covered with secondary dressing
 - Dressing was changed daily due to excessive exudates level

DAY 3 • All necrotic tissue removed

- Granulation tissue increased to 60%
- Infection and exudates levels reduced (bacterial burden reduction)

DAY 7 90% granulation tissue

- Wound depth reduced to 9.9cm
- Exudation levels reduced
- The dressing was discontinued and TNP initiated

ActivHeal Aquafiber® Ag dressing aided the reduction of bacterial bio-burden and the autolytic debridement of devitalised tissue.

INDICATIONS

ActivHeal Aquafiber® Ag Antimicrobial wound dressing is indicated for the following moderately to heavily exuding, partial to full thickness wounds:

- Post operative wounds
- Trauma wounds (dermal lesions, trauma injuries or incisions)
- Leg ulcers
- Pressure ulcers
- Diabetic ulcers
- Superficial and partial thickness burns
- Graft and donor sites
- Cavity wounds





Sloughy



SIZES AND CODES ACTIVHEAL AQUAFIBER® AG

SIZE (CM)	QTY PER CARTON	QTY PER CASE	PRODUCT CODE	DT PIP CODE	NHS SUPPLY CODE
5x5	10	10	9023236	405-6172	ELY778
10x10	10	10	9023243	405-6180	ELY779
15x15	5	10	9023267	405-6206	ELY780
2.7x32 Ribbon	5	10	9023281	405-6222	ELY781

ActivHeal Aquafiber® Ag is available through Drug Tariff and NHS Supply Chain.

Advanced Medical Solutions Ltd

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EFFECTIVENESS OF ADVANCED DRESSING IN BKA STUMP

COMPLICATION MANAGEMENT IN YOUNG

Klinik Rasah Prima Seremban

DR Ananthi Tharmarajan

DIABETIC PATIENTS: A CASE STUDY

Professor Dato' Dr. Harikrishna K.R. NairDMIJ S.I.S KMNMD FRCPI FRCPE FCWCS MSC WHTR PHD

Head, Wound Care Unit, Dept of Internal Medicine, Hospital Kuala Lumpur

INTRODUCTION:

Major non-traumatic LEAs (Lower Extremity Amputations) are highly prevalent in diabetic patients and 50 to 70% of LEAs are associated with diabetes. Foot ulceration in diabetes is the leading cause of non-traumatic LEAs. A diabetic patient has a lifetime risk of 15-25% of developing a foot ulcer (Chin JWS 2013). Infection associated with foot ulceration leads to gangrene and ultimately necessitates nontraumatic LEAs.

In a septic presentation, major LEAs, such as BKA (below-knee amputation) serve as life-saving procedures in young patients. The incidence of BKA stump complication is as high as 8 to 18%. Management of BKA stump complication includes antibiotics, and local wound care to need for more proximal amputation at above knee level. The conversion of BKA to AKA for stump complication is around 12-51% (Balan N et al, 2023)

METHOD:

- · A retrospective single case analysis where a patient with an infected BKA stump and dehiscence was chosen from Klinik Rasah Prima, Seremban.
- · TIME concept of wound assessment was used throughout the healing journey for documentation purposes. Holistic care was given to the patient. The patient was treated as per the standard of care of wound infection management (Wounds UK 2021).
- · The wound was cleansed using superoxidized hypochlorous acid (HOCL). Conservative sharp wound debridement was performed at the bedside, using sterile sharp instruments such as scalpels, forceps, and scissors whenever
- · Aquafibre Ag Silver Alginate was used as a primary dressing. For the initial highly exudate period, nonadhesive polyurethane foam was used as a secondary dressing for absorption.
- Daily dressing was done for an initial 3 days to facilitate conservative sharp debridement. Then dressing frequency was reduced to EOD for 3/52, then 2 times a week till complete healing.
- The patient's blood sugar is monitored closely, and the insulin dose is adjusted and stabilized accordingly. Diet habits reviewed weekly for better adherence
- Tab cefuroxime 500mg OD was given for the first 3/52. Cap L-Arginine plus L-Citrulline 250/250mg OD was given for 2 months

CASE REPORT:

MRS A, a 43 years old Indian lady, married, nulliparous, K/C/O DM, HPT, IHD, presented to our clinic on 26th March 2023 with an infected stump wound with wound dehiscence post below knee amputation. Upon presentation, her vital signs are stable with Dxt: 16 and pain score: 6/10

The patient underwent a BKA in Hospital PD(HPD) on 04.02.2023, as she presented in a septic state after failed wound management in a GP clinic.

The patient underwent RT BKA on 04.02.2023. After discharge, the patient went to KK for regular dressing. The patient noticed increased soaking of dressing with discharge, so came to a private clinic for a second opinion.

3 Wounds noted largest in the lateral aspect approximately measuring 8 x 6cm in size, middle one 3cm x 1.5cm in size, medial one 3cm x 3cm in size.

TIME CONCEPT



- FBC: Hb 8.5g/dl Swab C&S done on 26.03,2023. Pseudomonas aeruginosa, sensitive to cefuroxime.
- WBC: 23.8 x 10^9/L, with neutrophil prominent . Diagnosis: Infected right BKA stump, Texas stage 28

RESULTS:







DAY 46 Wound healing was evidenced by the reduction in wound size, reduction in infection and pain, and improved granulation

and epithelialization. Complete epithelialization was achieved on day 46

DISCUSSION:

- . When the patient presented, she was in a spreading infection state, as there were clear signs of local infection such as the presence of pus upon milking in addition to fever and leucocytosis. So oral antibiotics were given for an initial 3 weeks.
- · Aquafibre Ag dressing is a non-woven pad composed of calcium alginate, carboxymethylcellulose (CMC), and ionic silver.
- · Calcium ions present within the alginate fibre, exchange with sodium ions found in wound exudate. The donation of calcium activates the wound-healing process by stimulating cytokines and controlling minor bleeding.
- · Silver dressings are indicated for local, spreading, and systemic infections; however, systemic antibiotics need to be combined for spreading and systemic infection (adapted from Wounds International 2021).
- Silver in its elemental form is unreactive, it loses an electron and becomes positively charged silver ions (Ag+) to become bactericidal. Elemental silver ionizes more readily when exposed to wound exudate.
- · Silver ions act at different levels, they bind to bacterial cell walls, preventing nutrients and oxygen to entering the cell. They prevent the cell from producing energy, once they enter the cell. They have the capacity to change the sequence of DNA, preventing its replication.
- · Silver ions are active against a broad range of bacteria, fungi and viruses, several antibioticresistant strains such as methicilin-resistant Staphylococcus aureus (MRSA) and Vancomycinresistant Enteroccoci (VRE) (Wounds International, 2021).
- · High gelling fibre technology in Aquafibre Ag was chosen for exudate management. Aquafibre has the ability to absorb exudates, creating a gel for ease of removal without damaging the wound bed. It facilitates autolytic debridement, by creating moist environment as they form gel when they contact with wound exudate.
- . The wound is reviewed every 2 weeks and the management approach was continued as there was considerable progress.

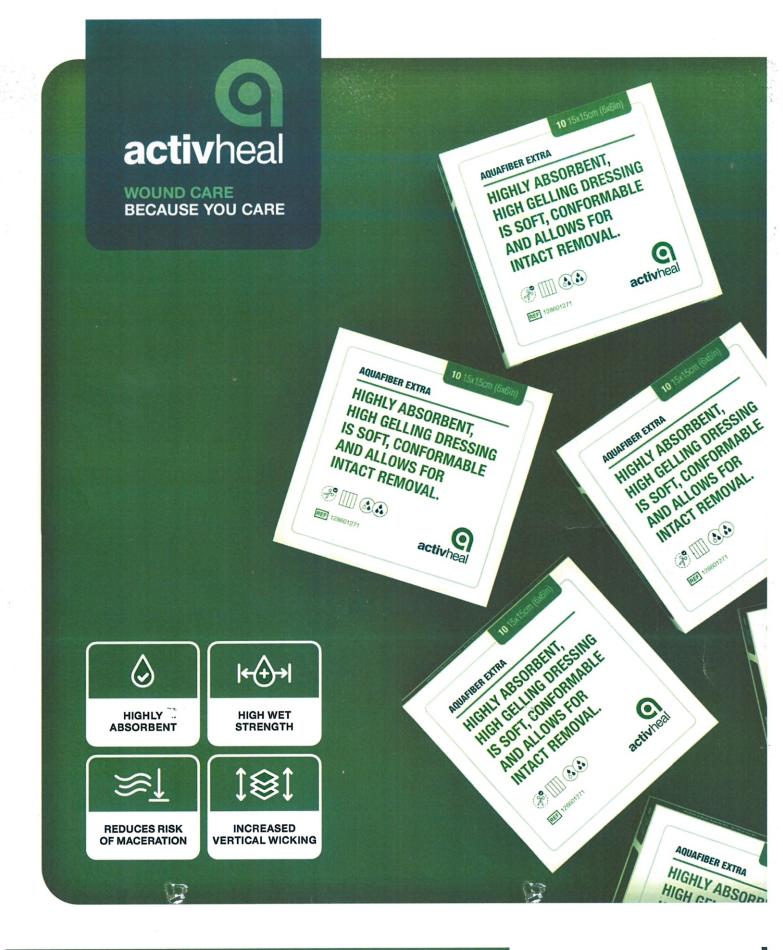
Conclusion

- Early commencement of drug therapy in young patients diagnosed with DM is important to prevent complications of diabetes. Target HbA1c is individualized: \$6.5% for those young. uncomplicated, with short duration of disease; while <7.0% would be appropriate for most other adult T2DM individuals. Achieving HbA1c target early, from diagnosis and maintaining glucose control for as long as possible, will result in persistent benefits and reduction of complications in the long-term (Metabolic memory). (adapted from Malaysian CPG, Management of Type 2
- Proper treatment of foot ulcers can reduce the infectious complications leading to amputation.
- Successfully managing major BKA stump complications is imperative in preventing more proxin amputation and restoring ambulatory status for patients (Balan N et al, 2023). Once a BKA has healed the chance of requiring an ipsilateral AKA is only 4% (Leaper et al, 2011)

	BKA	AKA
Energy required for walking is increased by	60%	120%
Grade III-V mobility	40%	80%
30-day mortality	12%	17%

Reference

- Chin JW, Teague L, McLaren AM, Mahoney JL. Non traumatic lower extremity amputations in younger patients: an 11-year retrospective study. Int Wound J. 2013 Feb;10(1):73-8. doi: 10.1111/j.1742-481X.2012.00945.x Epub 2012 Feb 13. PMID: 22329536; PMCID: PMC7950727.
- Ballan N, Qi X, Keeley J, Neville A. A Novel Strategy to Manage Below-Knee-Amputation (BKA) Stump Complications for Early Wound Healing and BKA Salvage. The American Surgent. 2023;0(0). doi:10.1177/00031348231175504
- Adams CT, Lakra A. Below-Knee Amputation. [Updated 2023 May 7]. In: stat Pearls [Internet]. Treasure Island (FL): Stat Pearls
- Publishing: 2023 Ian- Available from: https://www.ncbi.nlm.nin.gov/pooks/NBKS34773/
 Leaper, David, and Iain Whitaker (eds), "Complications of amputation", in David Leaper, and Iain Whitaker (eds), Post-operative Complications, 2 edn, Oxford Specialist Handbooks (Oxford, 2010, online edn, Oxford Academic, 1 Oct. 2011). https://doi.org/10.1093/med/9780199546268.003.17, accessed 24 Aug. 2023.
- Leaper, D. J. (2006). Silver dressings: Their role in wound management. International Wound Journal, 3(4), 282-294.
- Malaysian Clinical practice guidelines, Management of Type 2 Diabetes mellitus (6th Edition)
- Harikrishna K.R Nair, 2017, Diabetic foot, The Asian perspective, 2nd edition, Malaysia, U
- Overview of wound infection management, Wounds UK 2021



AQUAFIBER EXTRA

Medical Device Reg NO: GD5416223-129591 Medical Device Name: Activheal Aquafiber Extra

D.D.L. Medical Supplies (121957) Ground Floor, Lot 348, Lorong 7A, Jalan Ang Cheng Ho, 93100 Kuching, Sarawak, Malaysia Tel: 019-6641255 Highly absorbent // High gelling // The dressing can remain *in situ* for up to 7 days // Reduces risk of maceration // Maintains a moist wound healing environment // Aids autolytic debridement // High wet tensile strength //

ACTIVHEAL® AQUAFIBER EXTRA CREATES A MOIST WOUND HEALING ENVIRONMENT FOR MODERATE TO HEAVILY EXUDING WOUNDS.

ActivHeal® Aquafiber Extra is an innovative combination of two proven wound care technologies based on CMC & alginate fibres. A hidden integrity layer in the dressing supports the tensile performance.

ActivHeal® Aquafiber Extra is a soft, conformable, highly absorbent and non-woven dressing which turns into a soft, cohesive gel when in contact with wound exudate. Thus it helps with autolytic debridement and maintains a moist wound healing environment following the principles of advanced wound care. ActivHeal® Aquafiber Extra effectively addresses the key challenges of improved exudate management, gelling & tensile performance.

HIGH ABSORBENCY1 HIGH WET TENSILE STRENGTH1



PERFORMANCE

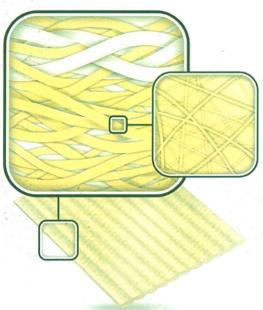
High absorbency

The unique design & fibre engineering of ActivHeal® Aquafiber Extra allows the dressing to absorb exudate & transform into a cohesive gel.

High wet tensile strength
The quilting pattern of ActivHeal® Aquafiber
Extra is supported by a hidden integrity layer
allows for intact removal of the dressing.







Low lateral wicking

In-house analysis¹ has confirmed that the vertical wicking of the ActivHeal® Aquafiber Extra can be potentially helpful in the prevention of maceration within the peri-wound skin.

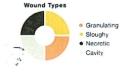
INDICATIONS

ActivHeal® Aquafiber Extra is indicated for the management of the following moderately to heavily exuding acute and chronic wounds:

- Pressure ulcers
- Venous leg ulcers
- Arterial leg ulcers
- Diabetic ulcers
- Graft and donor sites
- Post-operative surgical wounds
- Cavity wounds
- Superficial and partial thickness burns

Moderate > Heavy Exudate





SIZES AND CODES

ACTIVHEAL® AQUAFIBER EXTRA

SIZE (CM)	QTY PER CARTON	QTY PER CASE	PRODUCT CODE	NHS SUPPLY CHAIN CODE	DT CODE
5x5	10	10	9023625	ELY795	407-5339
10x10	10	10	9023632	ELY796	407-5347
15x15	5	10	9023649	ELY797	407-5628
20x30	5	10	9023656	ELY798	407-5321
2.5x30.5 Ribbon	5	10	9023663	ELY799	407-5602
2x46 Ribbon	5	10	9023670	ELY800	407-5610

ActivHeal® Aquafiber Extra is available through the NHS Supply Chain and Drug Tariff

Advanced Medical Solutions Ltd

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HIGHLY **ABSORBENT**



HIGH WET STRENGTH



HIGH SILVER



LOW LATERAL WICKING





PERFORMANCE³



Highly effective against a broad spectrum of bacteria and yeast.

DISCOVER WHY

ActivHeal® AquaFiber™ Extra Ag contains silver, effectively managing and supressing colinisation and proliferation of bacteria and yeast within the dressing for up to 7 days, based on in-vitro testing.

ActivHeal® AquaFiber™ Extra Ag is designed to minimise the risk of maceration and damage to newly formed tissue.

In-vitro testing shows effectiveness against the following challenge organisms.3



GRAM POSITIVE BACTERIA	GRAM NEGATIVE BACTERIA	YEAST
VRE Streptococcus mutans Staphylococcus aureus	Enterobacter cloacae Klebsiella peumoniae Serratia marcescens	Candida albicans

HIGHER ABSORBENCY⁴

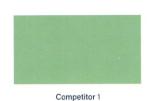
ActivHeal® AquaFiber™ Extra Ag has higher absorbency compared to market leader (competitor 1) and other competitor dressings.

DISCOVER WHY

- ▶ Improved exudate management for moderate to heavily exuding wounds
- ▶ Potentially reduce the number of dressing changes required
- ▶ Helps to prevent possible leakage
- Assists with maintaining a moist wound environment
- ▶ Can remain in situ for up to 7 days*









Competitor 2

^{*} Dressing change frequency will depend on patient condition and level of exudate

EVEN STRONGER WHEN WET⁴



The patented quilting technology and the hidden integrity layer of ActivHeal® AquaFiber™ Extra Ag results in a 49% stronger dressing than the market leader (competitor 1).

DISCOVER WHY

The benefits of a stronger dressing:

- ▶ Allows intact removal on dressing change
- ▶ Can be used in cavity wounds
- ▶ Can be used for awkward areas tunneling/undermining
- ▶ May help with minimising trauma* as can be removed in one piece²





* Based on customer satisfaction score. please see reference 2.



Competitor 2

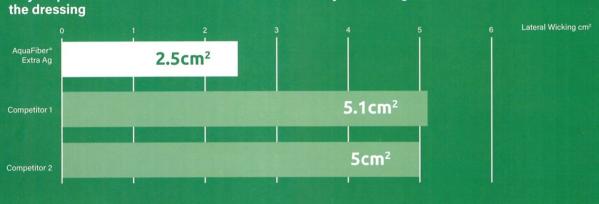
LATERAL WICKING⁴

Good lateral wicking contains the liquid/exudate within the point of application and prevents spread within the dressing. For this test a lower value for lateral wicking is better.

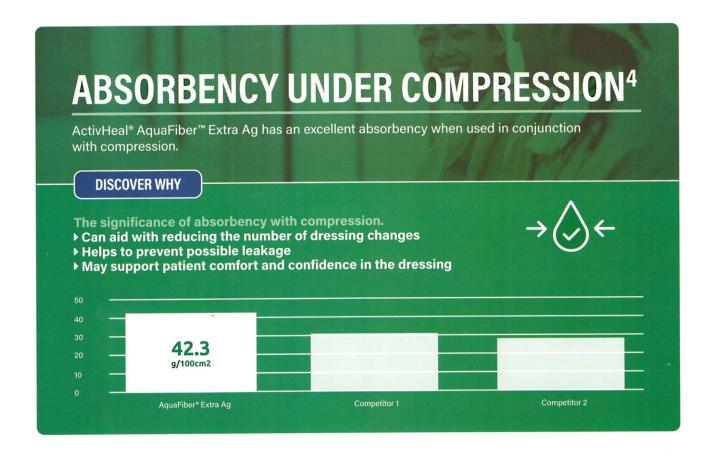
DISCOVER WHY

The importance of Lateral Wicking:

- Assists in the prevention of maceration and aid in protection of the wound edges and surrounding skin
- May help to reduce the risk of cross contamination by containing exudate within



Wet Strength N/cm



INDICATIONS

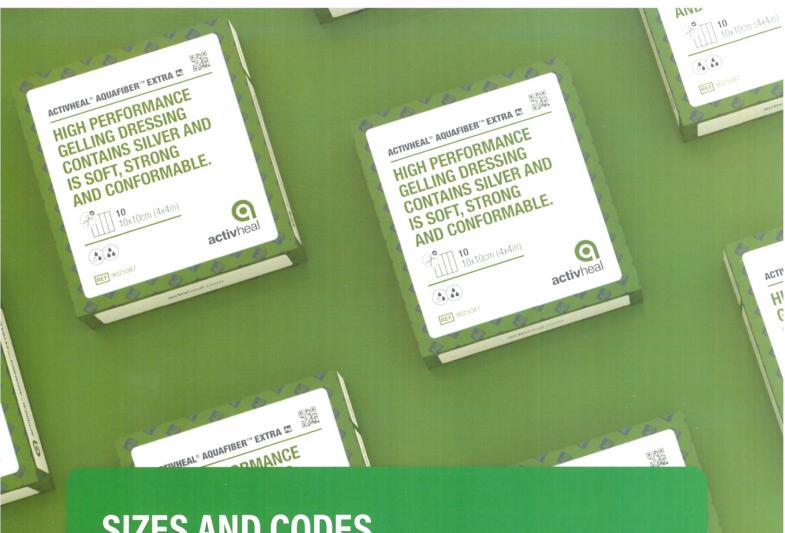
ActivHeal® AquaFiber™ Extra Ag antibacterial dressing can be used in the management of moderate to heavily exuding chronic and acute wounds. The dressing is indicated for use on the following wounds:

- Pressure ulcers (partial and full thickness)
- Leg ulcers (venous stasis ulcers, arterial ulcers and leg ulcers of mixed etiology)
- Diabetic foot ulcers
- Surgical wounds that heal by primary intent such as dermatological and surgical incisions
- Surgical wounds left to heal by secondary intention such as dehisced surgical incisions and donor sites
- Traumatic wounds





Website: www.drdevicelab.com



SIZES AND CODES

ACTIVHEAL® AQUAFIBER™ EXTRA Ag					
SIZE (CM)	SIZE (INCHES)	QTY	PRODUCT CODE		
5x5	2x2	10	9025070		
10x10	4x4	10	9025087		
10x12	4x4.7	10	9025506		
15x15	6x6	5	9025094		
20x30	8x12	5	9025100		
2.5x30.5 Ribbon	1x12	5	9025117		
2x46 Ribbon	0.75x18	5	9025124		

Advanced Medical Solutions Ltd

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References 1: Nazarko L (2018) Choosing the correct wound care dressing: an overview. Journal of Community Nursing 32(5): 42–52
2: S.Barrett, R.Forder, R.Burns: Evaluation of ActivHeal* Aquafiber* Extra dressings performance and acceptability in clinical practice. Wounds UK | Vol 16 | No 2 | 2020
3. AMS Data on file P3525
4. AMS Data on file LD149-16; LD041-18
ActivHeal* AquaFiber* Extra is a registered trade mark of Advanced Medical Solutions Limited.
ActivHeal, its logo and the Advanced Medical Solutions logos are trade marks of Advanced Medical Solutions Ltd.

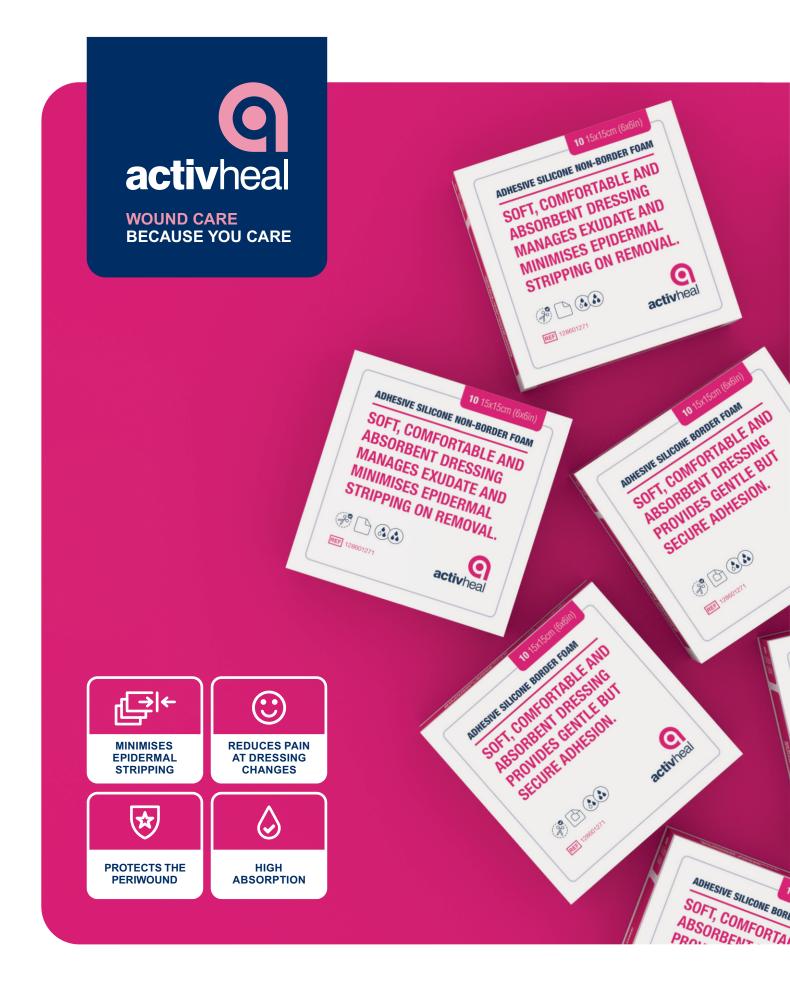
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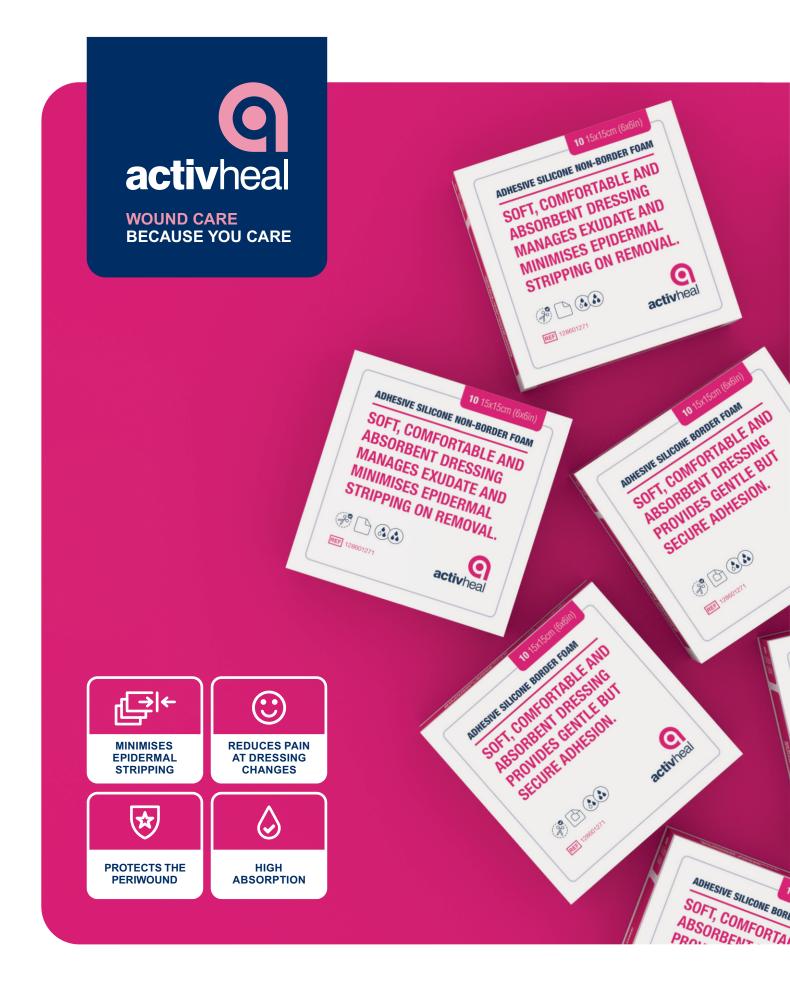
ING MABLE.

4x4in)









Highly conformable // High absorption of exudate // Can remain in situ for up to 7 days // Minimises epidermal stripping // Promotes healing through a moist wound environment // Prevents pain at dressing changes // Protects the periwound // For moderately to heavily exuding wounds //

ACTIVHEAL® SILICONE FOAM DRESSINGS HAVE A GENTLE BUT SECURE ADHESION WITH MINIMAL EPIDERMAL STRIPPING OR PAIN ON REMOVAL

ActivHeal® Silicone Foam Border and Non-Border dressings are constructed from a low friction waterproof polyurethane film, with a highly absorbing polyurethane central pad and a superior silicone adhesive wound contact layer.

ActivHeal® Silicone Border and Non-Border Foam dressings are for use when adherence to the wound is a potential problem due to fragile skin. The perforated silicone coated wound contact later prevents the dressing from sticking to the wound and reduces pain during dressing changes. The perforations allow the uptake of exudate and prevents excess fluid causing maceration to healthy skin. ActivHeal® Silicone Border and Non-Border Foam dressings maintain a moist wound environment and aids the wound healing process.



PERFORMANCE

Total Fluid Handling Performance ¹ Be confident this foam can handle wound exudate.





Peel adhesion 2

Secure but with pain free removal.

ActivHeal®
Silicone Foam
Non Border
1.5 (N/2.5cm)

Allevyn Gentle Non Border 1.1 (N/2.5cm)

CASE STUDY

Patient X, is a 72 year old female presented with pressure damage following the removal of a full leg cast to the right leg having fractured the right patella. She had a history of diabetes, hypothyroidism and cirrhosis and the patient was also very immobile. Following a full wound assessment from the TVN, the wound was categorised as having a full thickness tissue loss and had granulating tissue with areas of slough. A category 3 pressure ulcer was diagnosed.







- 1. Day 1 The levels of exudate were high. The surrounding skin had areas of erythema, but no maceration or excoriation. ActivHeal Silicone Non border dressings were applied to assist in the management of exudate, prevent adherence and trauma at dressing changes along with providing a moist wound environment to aid wound healing. A honey dressing was applied underneath the foam and a bandage was used to secure the dressings.
- Day 3 At the 2nd dressing change the wound was showing signs of improvement with a reduction in erythema. There were no signs of maceration or excoriation indicating that the exudate was being managed well by the dressings. The dressing regime continued.
- 3. Day 13 The wound continued to progress and reduce in size, with areas of new epithelial tissue being seen. There continued to be no signs of maceration or excoriation to the surrounding skin demonstrating that exudate was continually managed. The ActivHed Silicone Foam Non-Border was easy to remove and was atraumatic for the patient.

SIZES AND CODES

ACTIVHE	AL	SILICONE FOAM BORDER			SILIC	NON-BORDI	
SIZE (CM)	QTY	PRODUCT CODE	DT PIP CODE	NHS SUPPL CHAIN	YPRODUCT CODE	DT PIP CODE	NHS SUPPI CHAIN
5x5	10				9001548	402-5383	ELA847
7.5x7.5	10	9001470	402-5318	ELA843	9001555	402-5391	ELA834
10x10	10	9001487	402-5326	ELA838	9001562	402-5417	ELA844
12.5x12.5	10	9001494	402-5334	ELA840			
10x20	10	9001500	402-5342	ELA839	9001579	402-5441	ELA833
15x15	10	9001517	402-5359	ELA841	9001449	402-5425	ELA845
20x20	10	9001524	402-5367	ELA842	9001586	402-5433	ELA846
Sacral	10	9001531	402-5375	ELA848			

INDICATIONS

ActivHeal Silicone Border and Non-Border Foam dressings are indicated for use on moderately to heavily exuding chronic and acute wounds. The dressing may be used throughout the healing process on:

- Venous and arterial leg ulcers
- Diabetic ulcers
- Post Operative Surgical Wounds
- Trauma wounds
- Pressure ulcers
- Superficialand partial-thickness-burns
- Skin Abrasions
- Use as a secondary dressing on cavity wounds

Moderate > Heavy Exudate

0 A

Fungating Cavity Granulating Sloughy Necrotic

Wound Types

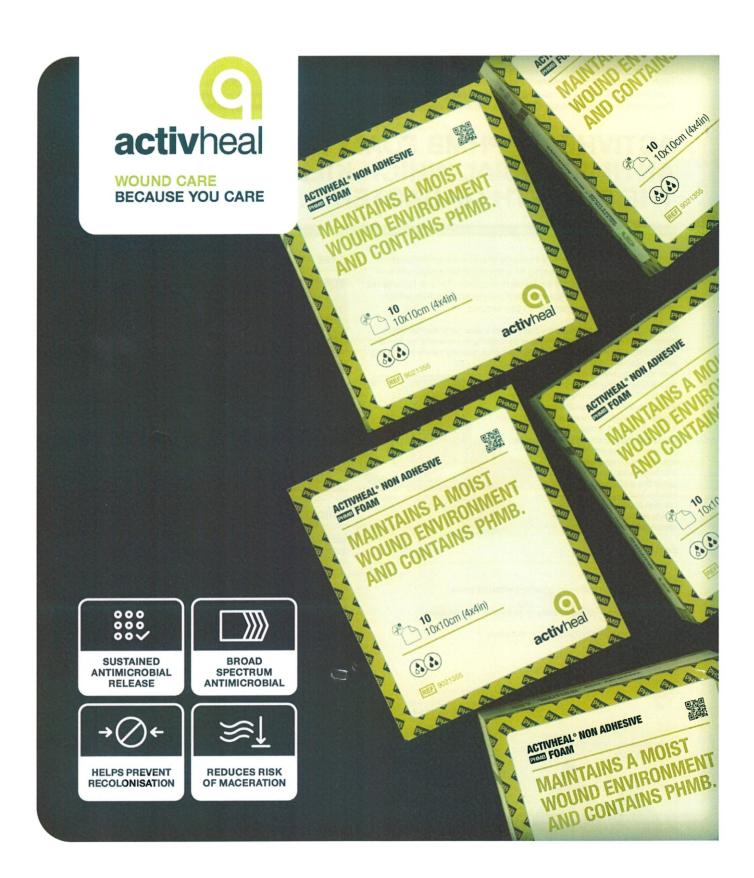
Fungating Cavity Granulating Sloughy Necrotic

ActivHeal® Silicone Foam is available through a variety of channels and via Drug Tariff. suitable for use under compression bandaging.

Advanced Medical Solutions Ltd

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Medical Device Reg NO: GC3220023-129589

Medical Device Name: Activheal Non-Adhesive PHMB Foam

D.D.L. Medical Supplies (121957) Ground Floor, Lot 348, Lorong 7A, Jalan Ang Cheng Ho, 93100 Kuching, Sarawak, Malaysia Tel: 019-6641255 WOUND CARE BECAUSE YOU CARE

FEATURES

High absorbency of exudate // Promotes healing through a moist wound environment // Reduces the risk of maceration // Sustained antimicrobial release and effectiveness for up to 7 days // Broad spectrum antimicrobial action on MRSA, VRE, Pseudomonas aeruginosa, Candida albicans // Helps prevent recolonisation // Conformable // Waterproof and Bacterial barrier //

ACTIVHEAL® PHMB FOAM CONTAINS AN **ANTIMICROBIAL WHICH KILLS & INHIBITS** THE GROWTH OF BACTERIA.

ActivHeal® PHMB Foam dressings are sterile antimicrobial wound dressings, consisting of a hydrophilic polyurethane foam which is designed to absorb exudate. This is laminated to a pink, low friction, waterproof polyurethane film which provides a bacterial barrier to the wound.

The wound contact layer side of the dressing has a clear perforated film which protects the wound bed from adhering to the dressing by preventing the formation of granulation tissue into the pores of the foam, thus reducing trauma on dressing

removal. The perforations in the wound contact laver allow the uptake of exudate and prevent excess fluid causing maceration to healthy skin. ActivHeal® PHMB Foam dressings contain the antimicrobial substance polyhexamethylene biquanide (PHMB, polihexanide), which kills and inhibits the growth of bacteria. The PHMB is released in the presence of wound exudate and is an effective antimicrobial agent against a broad spectrum of microorganisms (gram+, gram-, and yeast) that are frequently associated with the bacterial colonisation and infection of wounds. The PHMB activity is effective for up to seven days, based on in-vitro testing.

CASE STUDY





A 54 year old male with poorly controlled type 2 diabetes presented with a right foot plantar superficial neuropathic ulceration. The ulcer was 23mm x 20mm and 4.6cm² presenting with 10% slough and 90% granulation to base, macerated callus to margins extending to 1st and 2nd toe cleft and moderate exudate levels. The foot showed signs of infection including heat, erythema and patient had a raised temperature. Week 1. ActivHeal® PHMB Foam (with systemic antibiotics) was selected to assist in reducing wound bioburden and signs and symptoms of infection and manage exudate levels. Week 5. Following multiple treatments, the wound showed considerable improvement. The area of the ulcer measured 1.7cm², which was 53% reduction in size since the first application. The interdigital area had dried out and was intact. The dressing was able to provide effective exudate handling, whilst maintaining a moist wound environment and delivering antimicrobial efficacy. For further information on this and other ActivHeal® case studies visit www.activheal.com

INDICATIONS

ActivHeal® PHMB Foam dressings are indicated for moderate to heavily exuding chronic and acute wounds that are infected or are at risk of infection. The dressings may be used during the management of:

- Pressure ulcers Leg and foot ulcers
- Diabetic ulcers
- Surgical wounds

ActivHeal® PHMB Foam is suitable for use under compression bandaging.

Contra-indications

- Dry or lightly exuding wounds
- Surgical implantation
- Individuals with a known sensitivity to polyurethane films, foams, acrylic adhesive or PHMB





Epithelialising Granulating Sloughy

SIZES AND CODES

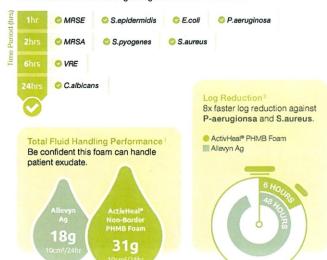
ACTIVHEAL®		PHMB FOAM NON-ADHESIVE			
SIZE (CM)	QTY	PRODUCT CODE	DT PIP CODE	NHS SUPPLY CODE	
5x5	10	9027517	404-2024	ELA788	
7.5x7.5	10	9027524	404-2032	ELA789	
10x10	10	9027531	404-2040	ELA790	
10x20	10	9027548	404-2057	ELA791	
15x15	10	9027555	404-2065	ELA792	
20x20	10	9027562	404-2073	ELA793	

ActivHeal® PHMB Foam is available through a variety of channels.

PERFORMANCE

Challenge Organism

Total eradication of challenged organisms within 24 hours.



Advanced Medical Solutions Ltd

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SUSTAINED ANTIMICROBIAL RELEASE



HELPS PREVENT RECOLONISATION



BROAD SPECTRUM ANTIMICROBIAL



OF MACERATION



BARRIER TO BACTERIAL PENETRATION



NON TRAUMATIC REMOVAL



HELPS PREVENT COLONISATION AND



GENTLE SILICONE ADHESIVE

ACTIVHEAL® PHMB FOAM SILICONE BORDER



ACTIVHEAL® PHMB FOAM RANGE

activheal.com

PHMB IS A HIGHLY EFFECTIVE ANTIMICROBIAL WITH A BROAD SPECTRUM CAPABILITY.4

Wound care products that incorporate PHMB (polyhexamethylene biguanide) exhibit the following positive effects on wound healing¹:



MODE OF ACTION

The ActivHeal PHMB Foam Range dressings are effective against gram negative, gram positive bacteria and yeast.

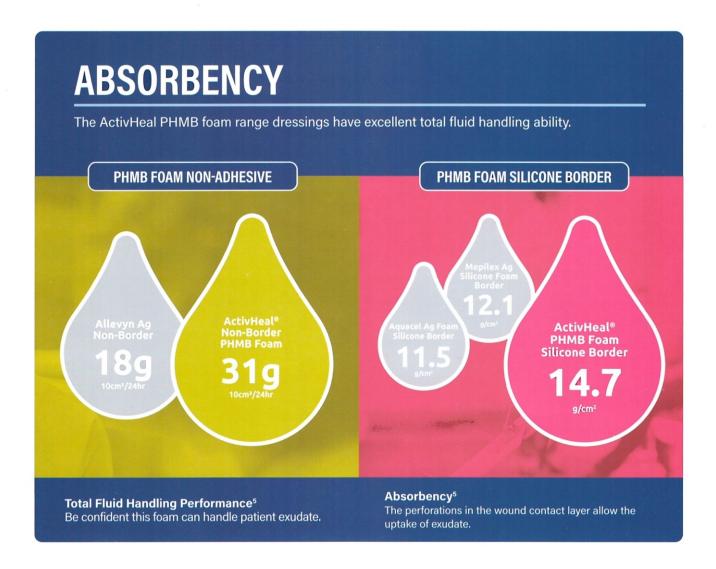
- PHMB binds to the negatively charged cell membrane
- Disrupts cell membrane and the cell integrity
- Ultimately causing the membrane to rupture.
- The bacterial debris is lifted into the foam dressing with the exudate.
- Onset of actions within 30 minutes*

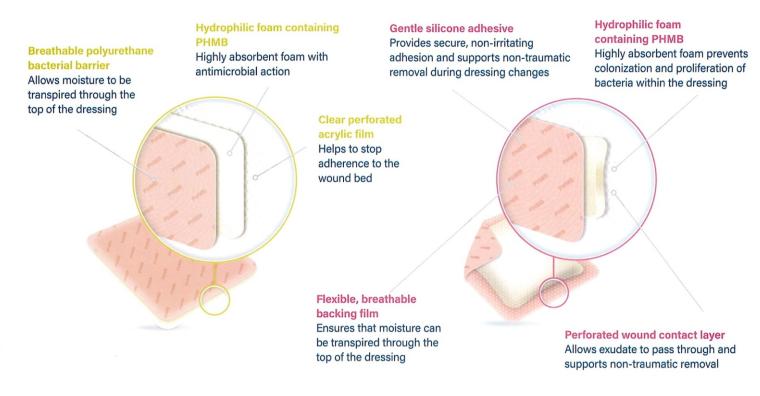


Want to find out more about ActivHeal PHMB Dressings? To watch our video, simply scan the QR Code with your mobile phone.

*PHMB agent based on in-vitro data.







FEATURES

The ActivHeal* PHMB Foam Range provides versatile, conformable dressings for moderate to heavy exuding wounds.

High absorbency of exudate - that lessens the risk of leakage and can reduces the number of dressing changes

Reduces the risk of maceration – helps to protect the wound edges surrounding skin

Promotes healing through a moist wound environment – assists with wound healing progression

Sustained antimicrobial release and effectiveness for up to 7 days - helps prevent recolonisation

Effective against MRSA, VRE, Pseudomonas aeruginosa, Candida albicans* – helps to reduce local infection caused by these organisms

Conformable – adaptable to awkward areas

High absorbency - that lessens the risk of leakage and can reduces the number of dressing changes Soft, flexible and conformable - comfortable to wear and can to adjust to difficult anatomical areas Waterproof and bacterial barrier - can shower with the dressing in situ

Perforated wound contact layer with a gentle silicone adhesive perforated film - protects the wound bed from adhering to the dressing

Supports non traumatic removal – assists with minimising trauma at dressing change Effective against gram negative, gram positive and yeast - prevents colonization and proliferation of bacteria

Promotes a moist wound environment - assists with wound healing progression

INDICATIONS

The ActivHeal® PHMB Foam Range is indicated for moderately to heavily exuding wounds, for use in the management of:

PHMB FOAM NON-ADHESIVE

- Pressure ulcers
- Diabetic ulcer:
- Leg and foot ulcers
- Surgical wounds

The ActivHeal* PHMB Foam Hange can be used under compression

PHMB FOAM SILICONE BORDER



- Post-surgical incisions
- Pressure sores
- Venous stasis ulcers
- Diabetic ulcers
- Donor sites
- 1st and 2nd degree burns
 Dermatologic disorders
- Other wounds inflicted by trauma
- As a secondary dressing or cover dressing for packed wounds
- Lacerations

The ActivHeal* PHMB Foam Range can be used under compression

GRANULATING

SLOUGHY

EPITHELIALSING

INFECTED

NECROTIC

FUNGATING

CAVITY



PERFORMANCE

ActivHeal® PHMB foam range has a fast, effective antimicrobial action.

Time Period (hrs)

PHMB FOAM NON-ADHESIVE



Log Reduction¹

8X faster log reduction against P-aerugionsa and Saureus than silver foams.

ActivHeal* PHMB Foam Non Adhesive

Allevyn Ag 138 Foam Non Adhesive

Challenge Organism²

Total eradication of challenged organisms within 24 hours.

1hr MRSE S.epidermidis 🛮 E.coli 2hrs MRSA S.pyogenes S.aureus **6**hrs O VRE 24hrs C.albicans

The PHMB activity is effective for up to seven days, based on in-vitro testina.

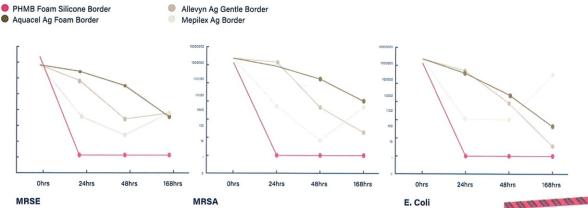
THE PHMB ACTIVITY IS EFFECTIVE FOR UP TO SEVEN DAYS, BASED ON IN-VITRO TESTING.



P.aeruginosa

PHMB FOAM SILICONE BORDER

Fast and powerful - Kills 99.99% of bacteria, yeasts within 24 hours.³



FASTER ACTING COMPARED TO SILVER FOAMS.3





ACTIVHEAL*	PHMB FOAM NON-ADHESIVE
	PRODUCT CODE
	9001630
	9021348
	9021355
	9021362
	9021379
20x20	9021386



ACTIVHEAL*		PHMB FOAM SILICONE BORDER
SIZE (CM)		
8x8	10	9025148
10x10	10	9025155
12.5x12.5	10	9025162
10x20	10	9025179
15x15	10	9025186
20x20	10	9025193
Sacrel 18.5 x 19.5	10	9025209



A MULTI-TIERED WOUND CARE EDUCATION PROGRAMME DESIGNED TO SUPPORT CLINICIANS OF ALL LEVELS WITH EASILY ACCESSIBLE, ONLINE EDUCATION RESOURCES.



Advanced Medical Solutions Ltd

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References 1.AMS Data on File P2999R. 2.AMS Data on File P327R. 3.Lab data 6317, Lab data 7541. 4.Brenda King, Simon Barrett: PHMB Made Easy, Wounds UK, VOL 12 ISSUE 4 NOV 2016 5.AMS data on file LD017-15 & P2339R (P2412). 6.AMS Data on File P2999R.

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