

The many challenges of surgical wound management

Surgical site infections (SSI)

Dressing changes and skin damage increase the risk of infection.

Up to 410/O of orthopedic patients suffer from post-operative blistering¹

Supporting patient mobility

To help reduce the risk of deep vein thrombosis (DVT), patients should be mobilized as soon as possible.

Up to B400 of knee replacement patients are at risk of developing DVT2



Ensuring patient satisfaction

Complications from surgery delay recovery and impact outcomes.

Over

extra days in hospital on average if a patient acquires an SSI³

Managing costs

Complications from surgery drive up healthcare costs.

E6.532 average increase in healthcare costs if a patient acquires an SSI4

Mepilex® Bor

The dressing for surgical wound

Specifically designed for surgical wounds, Mepilex Border Post-Op helps you balance the many demands of surgical wound management and deliver good patient outcomes^{1,5-7}.

Supports early patient mobilization⁵

Unique flex-cut pad stretches in all directions, conforming to the body even as it moves

Clinically shown to minimize dressing-related skin damage and pain^{1,5-7}

Safetac interface adheres gently, maintaining skin integrity



der Post-Op

management without compromises



Preventing complications for a smooth recovery

The absorbent, gently adhesive dressing that prevents dressing-related skin damage and helps reduce the risk of SSIs.

Preventing skin damage^{1,5-7}

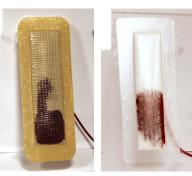
Dressings that adhere aggressively have been shown to cause skin damage such as stripping and blisters, which compromise the skin barrier and increase the risk of infection. 11,12 Thanks to its Safetac interface, Mepilex Border Post-Op minimise risk of skin damage, safeguarding skin integrity. 1,5,6

Two randomised trials^{5,7} One prospective trial⁶ One observational trial¹ No blisters.

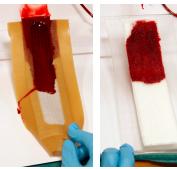
At the end of five separate trials, patients treated with Mepilex **Border Post-Op showed no signs** of blistering.

Reducing the risk of wound contamination

The dressinas have absorbed 20 ml of blood



After 15 min. the dressings are removed



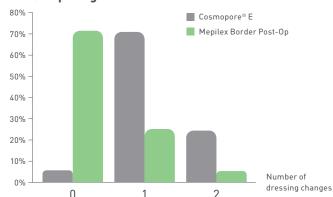
Fiber/ hydrocolloid post-op dressing



Mepilex Border Post-Op effectively wicks fluid away from the wound

Poor absorption can lead to frequent dressing changes, each of which exposes the wound to contamination. Mepilex Border Post-Op supports longer wear times by absorbing more than any current leading post-op dressing.8-10

Comparing wear times



In a recent randomized trial⁷ on open orthopedic surgery patients, Mepilex Border Post-Op outperformed the comparator in number of dressing changes the first week.



Proven choice for a better outcome

Safetac*, pioneered by Mölnlycke Health Care, delivers above and beyond the ordinary. Proven to help optimize the wound healing journey and even prevent wounds, dressings with Safetac are the safe choice for patients and a champion for higher standards in wound care. In fact, we have a wealth of evidence that supports the

clinical and economic benefits of dressings with Safetac, including Mepilex®, Mepitel®, Mepiform® and Mepitac®. To date, these dressings have helped millions of patients worldwide¹³⁻¹⁶.

*A unique proprietary technology exclusive to Mölnlycke Health Care



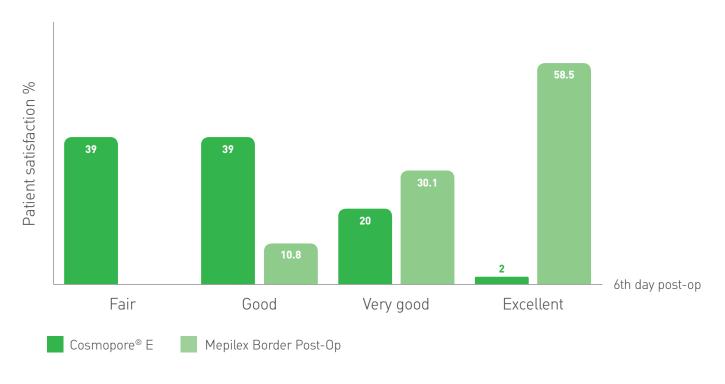
"A surgical wound dressing needs to be flexible, easy to use and easy to apply. It also needs to have good absorption capacity and – most important – not hurt the patient."

Frida Hjulin, OR nurse, Motala Hospital, Sweden





The overall patient experience of comfort and conformability $^{7}\,$

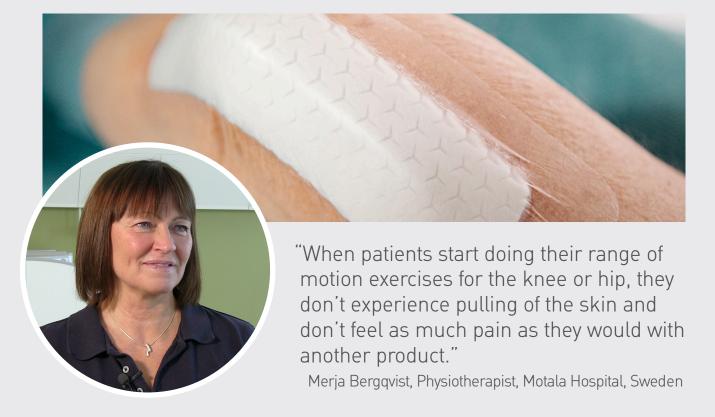


Expand your patients' comfort zones

The uniquely flexible dressing that supports early patient mobilization

Getting patients moving again as soon as possible after surgery is one essential way to reduce the risk of complications – such as deep vein thrombosis – and to keep recovery on track¹⁷. But dressings that are stiff or have an aggressive adhesive can make mobilization more difficult. Mepilex Border Post-Op is the only surgical wound dressing engineered to stretch in all directions, so it conforms to the body's natural curves – even during movement. This, combined with the gentle adhesiveness of the Safetac interface, makes Mepilex Border Post-Op support patient mobilization.

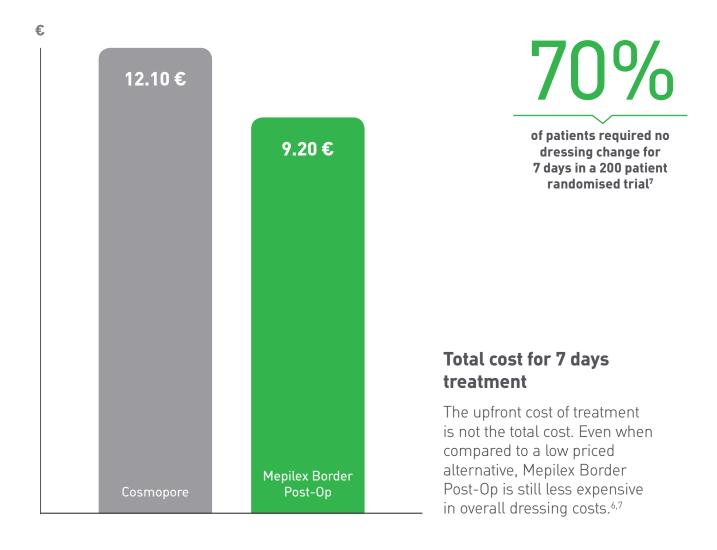
Preventing blisters. Facilitating mobilization.



The value of confidence

The longwearing dressing that reduces costs^{6,7}

Clinicians everywhere are facing the challenge of having to treat more patients while keeping costs down. Mepilex Border Post-Op can help you reduce dressing-related costs because it supports longer wear times and reduces the number of required dressing changes. In fact, in the majority of cases only one dressing will suffice to treat a patient's wound.



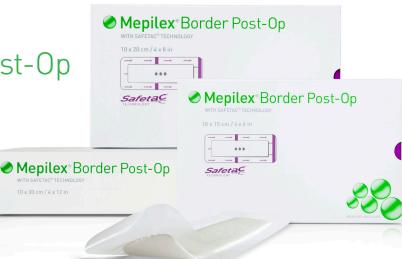


"We chose Mepilex Border Post-Op for its good absorption capacity, which means we don't have to change dressings as often."

Jennifer Sjösten, Ward nurse, Motala Hospital, Sweden

Mepilex® Border Post-Op

- ✓ Helps reduce the risk of SSIs^{1,5-7}
- ✓ Supports early patient mobilization^{1,5-7}
- ✓ Can reduce dressingrelated costs^{6,7}





Save more time in the O.R.

Mepilex Border Post-Op now available in Mölnlycke procedure tray

All the essentials for your hospital's standardized procedures collected into one efficient, customized package. From gowns and gloves to drapes, sutures and dressings. Available exclusively from Mölnlycke.

Mepilex Border Post-Op ordering information

Art. no	Size (cm)	Pcs/shelf	Pcs/transp.
496100	6×8	10	80
496200	9×10	10	70
496300	10×15	10	100
496405	10×20	5	25
496400	10×20	10	120

Art. no	Size (cm)	Pcs/shelf	Pcs/transp.
496455	10×25	5	30
496450	10×25	10	60
496605	10×30	5	25
496600	10×30	10	40
496650	10×35	5	55

REFERENCES: 1. Johansson C. et al. Preventing post-operative blisters following hip and knee arthroplasty. Wounds International, 2012. 2. Dela Valle C. et al. Thromboembolism After Hip and Knee Arthroplasty: Diagnosis and Treatment. Journal of American Academy of Orthopedic Surgeons, 1998. 3. Coello R. et al. Adverse impact of surgical site infections in English hospitals. The Journal of Hospital Infections, 2005. 4. Jenks P. J. et al. Clinical and economic burden of surgical site infection (SSI) and predicted financial consequences of elimination of SSI from an English hospital. The Journal of Hospital Infections, 2014. 5. Van Overschelde, P. et al. A randomised controlled trial comparing two wound dressings used after elective hip and knee arthroplasty. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. 6. Zarghooni K. et al. Effect of a modern dressing compared to standard dressings on outcome after primary hip and knee arthroplasty: a prospective, non-randomised controlled study. E-poster presentation at EWMA, 2015. 7. Bredow, J et al. Randomized clinical trial to evaluate performance of flexible self-adherent absorbent dressing coated with silicone layer after hip, knee or spinal surgery in comparison to standard wound dressing. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. 8. Feiti, F. et al. Fluid handling properties of post-operative wound dressings. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. 10. Feiti F. et al. A laboratory valuation of the fluid retention properties of post-operative absorbent dressings. Poster presentation at 5th Congress of the WUWHS, Florence, Italy, 2016. 10. Feiti F. et al. A laboratory valuation of the fluid retention properties of post-operative rehabilitation and discharge? International Journal of Orthopaedic and Trauma Nursing, 2016. 12. Gupta, S.K. et al. Postoperative wound blistering: is there a link with dressing usage? Journal of Wound Care, 2002. 13. Davies, P., Rippon, M. Evidence review: t

Find out more at www.molnlycke.com

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