

SILICONE WOUND CONTACT LAYER



FEATURES

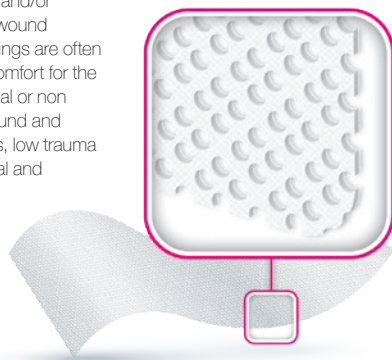
Highly conformable // Allows passage of exudate // Can remain in situ for up to 14 days // Promotes healing through a moist wound environment // Protective layer on non exuding wounds such as blisters and fragile skin tears // Prevents epidermal stripping // Prevents pain at dressing changes // Protects the periwound //

ACTIVHEAL® SILICONE WOUND CONTACT LAYER PREVENTS THE DRESSING FROM STICKING TO THE WOUND AND REDUCES PAIN DURING DRESSING CHANGES.

ActivHeal® Silicone Wound Contact Layer dressing is a sterile wound dressing consisting of a knitted polyester fabric coated with silicone adhesive on both sides.

Activ-Heal® Silicone Wound Contact Layer dressing is a primary dressing for use when adherence to the wound is a potential problem. The dressing allows exudate to pass into an absorbent secondary dressing. The silicone creates a layer between the dressing and the skin surface which allows the dressing to be removed without causing trauma, pain, or damaging the delicate new tissue at the wound margin. On the skin, the dressing will provide secure adhesion with minimal epidermal stripping or pain on removal.

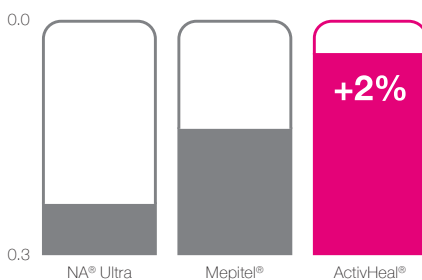
With wound management being increasingly outcome driven, pain is a major issue for patients with wounds of different aetiologies, as many patients experience transient wound related pain when the wound dressing is applied and/or removed. Silicone wound contact layer dressings are often used to increase comfort for the patient, have minimal or non adhesive to the wound and surrounding tissues, low trauma and pain on removal and flexibility.¹



PERFORMANCE

Activ-Heal® Silicone Wound Contact Layer is a primary dressing. A secondary absorbent dressing is required if exudate is present. In comparison with similar contact layers the ActivHeal® Silicone Wound Contact Layer is shown to be more extensible, therefore making it more conformable and subsequently easier to apply to difficult areas to dress.

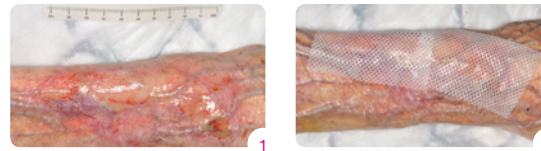
Conformability (kgfcm-1)²



The ActivHeal® Silicone Wound Contact Layer contours to the wound surface which provides an intimate contact layer with the wound bed. This silicone layer prevents the dressing from sticking to the moist wound tissue, but will gently adhere to intact skin. This avoids the disruption of new tissue growth or damage to the peri wound skin at dressing changes.³

CASE STUDY

A 90 year old man with a history of COPD who was admitted following a fall fracturing neck of Femur. On admission he also had a Skin Tear to his right arm.



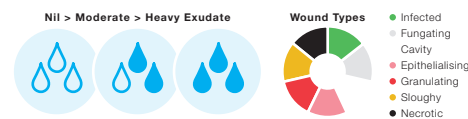
A full wound assessment was undertaken and a category 3 (Star Classification System)⁴ Skin Tear was diagnosed. The wound has areas of slough and had a blue/green exudate typical of *Pseudomonas*. The wound was swabbed. The Skin Tear was dressed with ActivHeal® Silicone Wound Contact Layer. Other dressings used were an iodine based product to assist in reducing the wound bioburden, a dressing pad and a light bandage. The plan was to change the dressing pad and bandage after 3 days, review and reassess.

INDICATIONS

ActivHeal® Silicone Wound Contact Layer dressing is indicated for use on nil to heavily exuding chronic and acute wounds (with appropriate secondary dressing). The dressing may be used throughout the healing process on the following wounds:

- Skin tears
- Partial thickness skin grafts
- Surgical incisions
- Partial thickness burns
- Venous ulcers
- Pressure ulcers
- Arterial ulcers

ActivHeal® Silicone Wound Contact Layer dressings are suitable for use under compression bandaging and can also be used in conjunction with Negative Pressure Wound Therapy (NPWT).



SIZES AND CODES

ActivHeal® Silicone Wound Contact Layer is available through a variety of channels including the Drug Tariff.

SIZE (CM)	QTY	PRODUCT CODE	DT PIP CODE	NHS SUPPLY CHAIN CODE
5x7.5	10	9001241	399-7459	ELA849
10x10	10	9001258	399-7442	ELA835
10x20	10	9001265	399-7467	ELA836
15x15	10	9001272	399-7475	ELA837

References

1. Barrett, S. (2012) BJN 21 (21):1271-7.
 2. Chart reference AMS data on file P2772
 3. Hampton, S. (2010) BJN 19 (6) S30-3.
 4. Carville, K., Lewin, G., Newall, N., Haslehurst, P., Michael, R., Santmaria, N., Roberts, P. (2007) STAR: A Consensus for Skin Classification. Primary Intention. 15(1) 18-28.
- Mepitel® is a trademark of Molnlycke, NA Ultra is a trademark of Acelyty®

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