activheal

activheal.com

MINIMISES EPIDERMAL STRIPPING

REDUCES PAIN AT DRESSING CHANGES

PROTECTS THE PERIWOUND

14 DAYS *IN SITU*

10

10

THIS SILICONE WOUND CONTACT LAYER MINIMISES PAIN AT DRESSING CHANGES.

SILICONE

activheal

SILICONE WOUND CONTACT LAYER
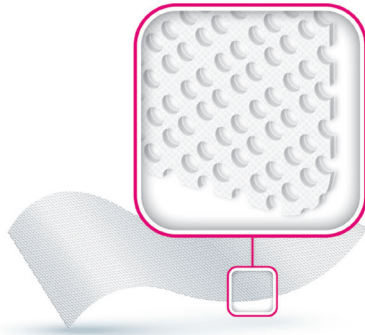
WOUND CARE
BECAUSE YOU CARE

FEATURES

Highly conformable // Allows passage of exudate // Can remain *in situ* for up 14 days // Promotes healing through a moist wound environment // Protective layer on non exuding wounds such as blisters and fragile skin tears // Minimises epidermal stripping // Minimises 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.

ActivHeal® 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 while minimising trauma, pain, or damage 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, during dressing change[1].

PERFORMANCE

ActivHeal® 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]

0.0		
0.3		**+2%**
NA® Ultra	Mepitel®	ActivHeal®

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]

SIZES AND CODES

ActivHeal® Silicone Wound Contact Layer is available through NHS Supply Chain and 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

CASE STUDY

A 88 year old lady was admitted to an Acute Hospital within the UK following a fall where she sustained traumatic wounds to the left upper arm, left leg and head. She had a past medical history of atrial fibrillation and was on Warfarin. The wound measured 10cm in length, 6cm in width and 0.2cm depth and was dressed with ActivHeal Silicone Wound Contact Layer dressing along with a non bordered foam to absorb exudate and a bandage to retain the dressing.
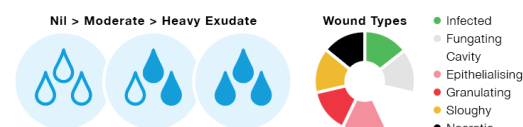

By the fourth and final dressing change prior to discharge of the patient further significant progress had been made. The wound had reduced in size, exudate levels were low and 70% epithelial tissue and 30% granulation tissue was visualised. The patient dressing regime continued and the patient was discharged.

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
- Venous ulcers
- Pressure ulcers
- Arterial ulcers

Nil > Moderate > Heavy Exudate

Wound Types
- Infected
- Fungating
- Cavity
- Epithelialising
- Granulating
- Sloughy
- Necrotic

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 Acelity®