The fiber dressing **you would design**

Easier removal[1] | Superior fluid retention[2]

Exufiber®
WITH HYDROLOCK TECHNOLOGY

MÖLNLYCKE HEALTH CARE

We discovered **that fiber dressings** could perform **even better**

Here at Mölnlycke Health Care, we have carried out a multinational survey involving over 500 clinicians about their day to day challenges when treating wounds with gelling fiber dressings. The results show that current alternatives leave much to be desired.

More than 1 in 3

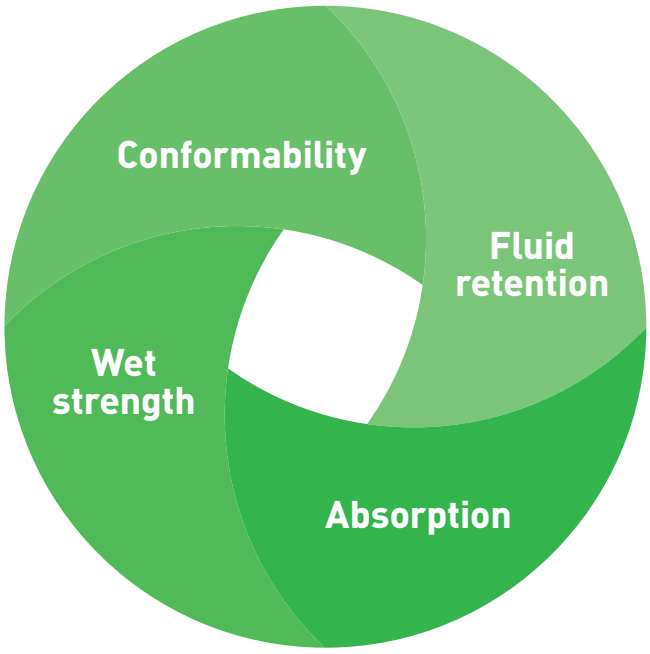
said their current fiber dressing broke up during removal[3]

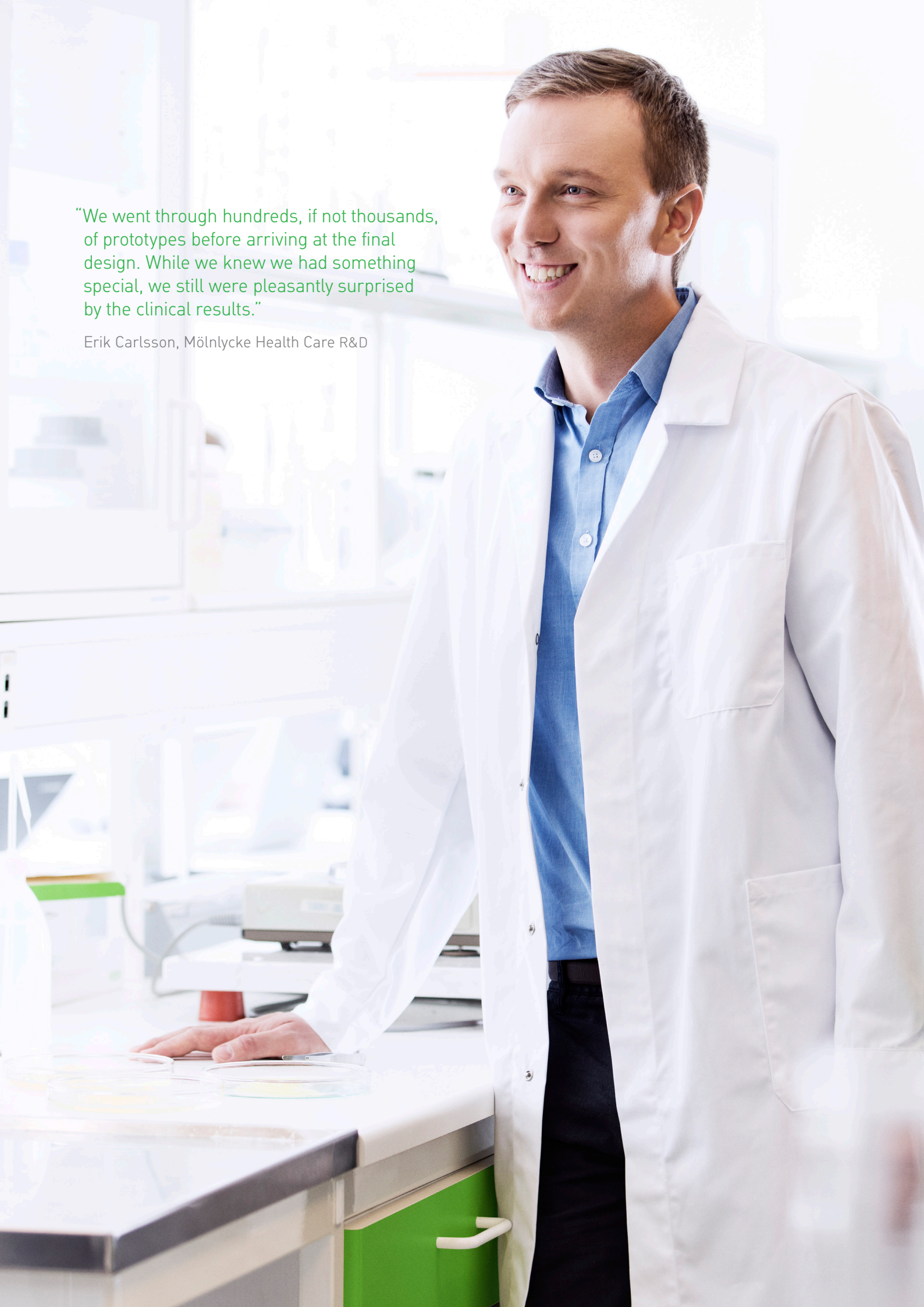
More than half

said that managing leakage and maceration were key challenges[3]

Exudate management is a balancing act

From speaking with our customers, we understand how much a fiber dressing that can balance four equally important demands can help you and your patients.





"We went through hundreds, if not thousands, of prototypes before arriving at the final design. While we knew we had something special, we still were pleasantly surprised by the clinical results."

Erik Carlsson, Mölnlycke Health Care R&D

Exufiber® The fiber dre

Imagine your ideal fiber dressing. What qualities would it

Exufiber® is the highly absorbent gelling fiber dressing you and your patients deserve. It is used to manage moderately to highly exuding wounds such as:

- Leg and foot ulcers
- Pressure ulcers
- Donor sites
- Partial thickness burns
- Surgical wounds
- Malignant wounds

Long wear times
Can be left in place for up to 7 days and up to 14 days on donor sites[4].

Flexible and resizable
Can be folded and cut to suit your exact needs.

ssing you would design

have, and how would it help you provide even better care?

High wet tensile strength for easy removal[1]

Exufiber stays intact on removal, leaving no dressing residue in the wound bed.

Superior retention for less risk of maceration[1-2]

Leakage can lead to skin damage such as maceration. Exufiber's superior retention reduces the risk of leakage, even when the dressing is compressed.

Hydrolock® **Technology**

Fiber dressings, reinvented

To understand just how different Hydrolock® Technology is, you only have to look at the surface of Exufiber. Made of a different synthetic material than you'll normally find in conventional fiber dressings, Exufiber has excellent wet strength and therefore retains its integrity – even as a gel. So you can more easily remove it without disturbing the wound[1].

The patented Hydrolock Technology processing method packs each dressing with fibers, leaving less space for fluid to flow freely. This gives the dressings superior fluid retention[2] and reduces the risk of leakage[1]. For your patients, this means reduced risk of leakage and better protection from skin-damaging maceration.

High wet tensile strength for easy removal[1]

Exufiber's unique structure gives it the strength to stay intact during removal.

Aquacel® Extra

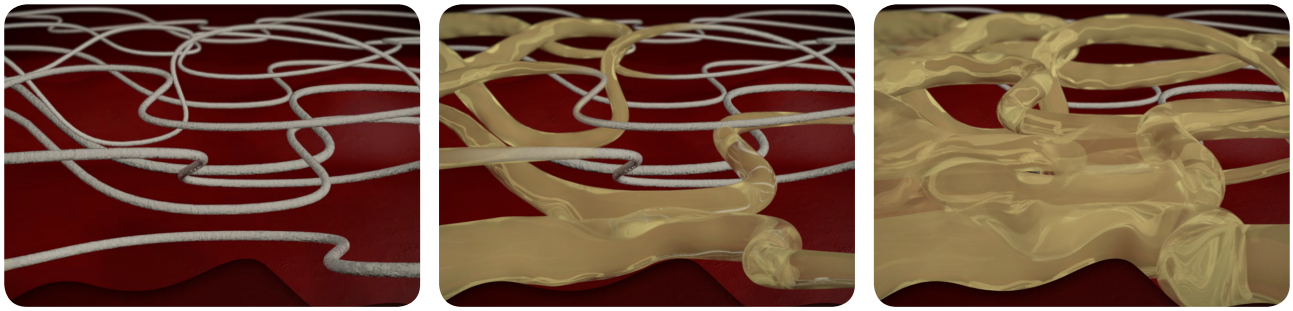
Aquacel®

Durafiber®

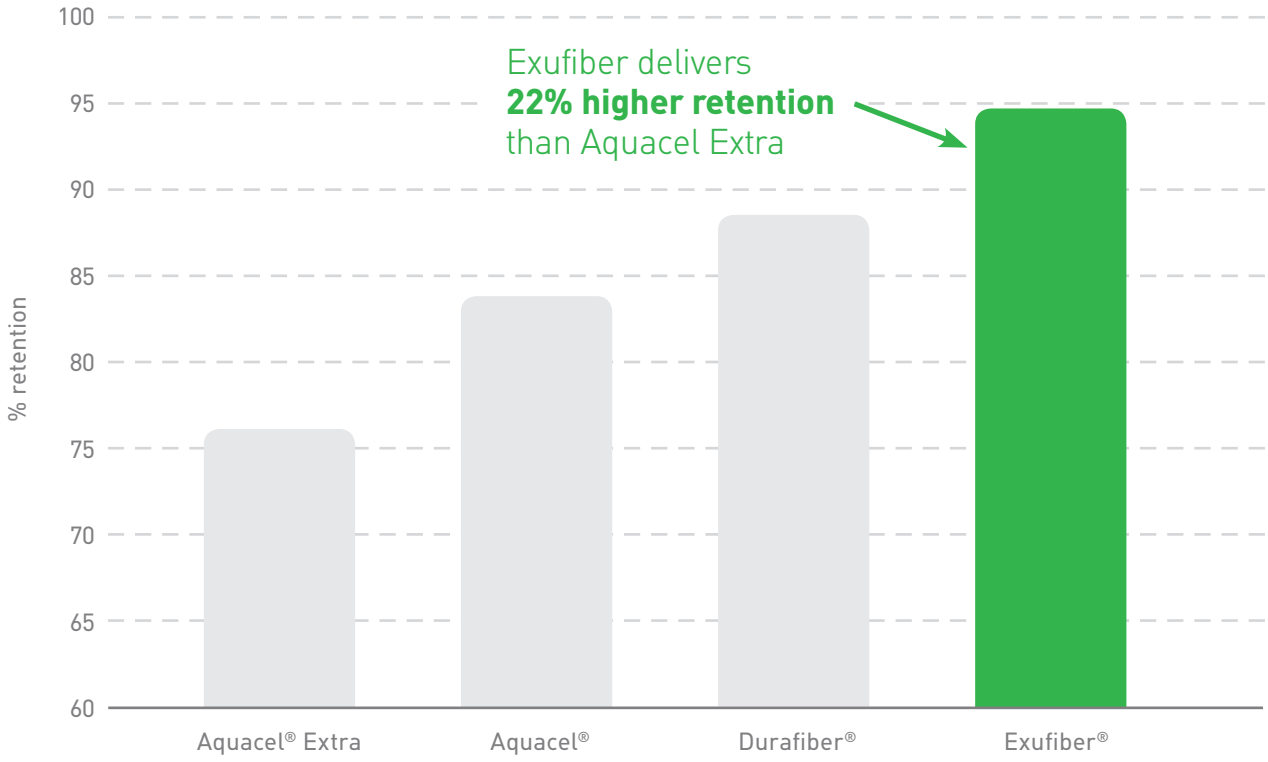
Exufiber®

How the technology works

The mechanically secured fibers are made of a strong synthetic material that swells upon contact with fluid and locks it securely away. This gives Exufiber higher retention compared to many other dressings on the market[2]. High retention is crucial for preventing leakage – a major contributor to skin damage such as maceration.



Superior retention for less risk of maceration[1–2]



Clinical case studies

Treating diabetic foot ulcers

CASE 1 Exufiber was used to treat this 68-year-old patient's diabetic foot ulcer. After twelve weeks of continuous improvement, the wound was fully healed. The patient and clinicians found Exufiber easy to apply and non-traumatic on removal. The patient also commented that the dressing was comfortable during wear.

Baseline: Wound Area: 0.55 cm^2; Depth: 0.4 cm

Week 8: Wound healed

CASE 2 Exufiber was used to treat a 4 month old diabetic foot ulcer, in a 68 year old patient. At baseline, the wound was producing moderate levels of serous wound exudate and the peri-wound skin was unhealthy. The size of the wound steadily reduced during the assessment period. By week 6 the wound bed was composed of 95% epithelial tissue and 5% granulation tissue. At week 8 the wound had healed and the peri-wound skin was healthy and intact. Both investigator and subject evaluations of the dressing were mostly 'very good' or 'good' in terms of a number of in-use dressing characteristics.

Baseline: Wound area 1.38 cm^2; depth 0.8cm

Week 8: 61.69% decrease in wound size, 50% reduction in wound depth

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True conformability

All wounds are unique. Exufiber absorbs and retains a wide variety of exudate types – and conforms well to the wound bed[1] – to support each patient's unique healing journey.

Patient registry study

Managing exudate. Supporting healing.

In a 6-week multicentre study of 72 patients with chronic and acute wounds, wounds treated with Exufiber reduced in size while the proportion of viable tissue increased. Exufiber effectively managed all types of exudate, was associated with minimal pain at dressing change and was observed to be easy to remove[5].

Easy to remove in over

80%

of dressing changes[5]

"Exufiber reduces wound healing time, which increases the patient's quality of life and decreases healthcare costs."

Emi Mateo Marín
Head Nurse, Chronic Wounds and Pressure Ulcers
Hospital Universitario Valle de Hebrón, Spain

Why clinicians **choose Exufiber**

Clinicians tell us that when they hold Exufiber in their hands, they notice that it feels different than other fiber dressings. It's denser. A little heavier. Stronger. They see that it absorbs fluid and does not release it, but retains it. And they notice how much easier it is to remove from wounds.

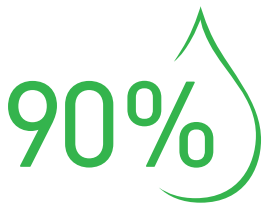
Finally, they realize how much simpler dressing changes have become for them. And how much easier life has become for their patients.

Exufiber evaluations

Scoring high marks

When 37 clinicians evaluated the performance of Exufiber[6], they noted that it retained exudate well and was easy to apply and remove. In particular, they observed no residue in the wound on removal and that patient pain was minimal.

89% **rated Exufiber as 'easy' or 'very easy' to remove in one piece**



90% **rated Exufiber's ability to retain exudate as 'good' or 'very good'**

Exufiber®

with Hydrolock® Technology

The fiber dressing you would design

- ✓ Superior retention[2]
- ✓ Easy removal[1]
- ✓ High absorption[1]
- ✓ Excellent conformability[1]

Get the Safetac® advantage

Use Exufiber with Mepilex® Border

Mepilex Border with Safetac is a good choice for a secondary dressing. It is proven to minimize skin stripping during dressing changes[7] and the risk of maceration[8] that can delay healing. Like all dressings with Safetac, Mepilex Border is clinically proven to minimize pain on removal[9].

Exufiber Ordering information

Art. no	Size cm	Pcs/ shelf cont.	Pcs/ transp cont.
603300	5 x 5	10	40
603301	10 x 10	10	60
603302	15 x 15	10	60
603305	4,5 x 10	10	40
603306	4,5 x 20	10	50
603307	4,5 x 30	10	60
603303	20 x 30	5	20
603308	2 x 45	5	20

Mepilex Border Ordering information Sterile packed

Art. no	Size cm	Pcs/ shelf cont.	Pcs/ transp cont.
295200	7,5 x 7,5	5	70
295300	10 x 10	5	50
295400	15 x 15	5	50
295600	15 x 20	5	45
SURGICAL SIZES			
295800	10 x 20	5	35
295850	10 x 25	5	35
295900	10 x 30	5	25
MEPILEX BORDER SACRUM			
282000	18 x 18	5	40
282400	23 x 23	5	25

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1. Chadwick P, McCardle J. Exudate management using a gelling fibre dressing. The Diabetic Foot Journal 2015; 18(1): 43-48. **2.** Data-on-file report 20140806-001 Mölnlycke Health Care. **3.** Mölnlycke Health Care data: Veeva Survey undertaken in UK, Sweden, Denmark, Finland, Norway and Latvia between September 2014 and July 2015. **4.** Exufiber instructions for use. **5.** Molnlycke Health Care data on file. Exufiber. Gesellschaft für Versorgungskonzepte in der Wundbehandlung (GVW) mbH (Stuttgart, Germany) report 2015; December. **6.** Molnlycke Health Care Technical Performance Assessment – Exufiber (unpublished report, 2016). **7.** Zillmer, R., Agren, M.S., Gottrup, F., Karlsmark, T. Biophysical effects of repetitive removal of adhesive dressings on peri-ulcer skin. Journal of Wound Care 2006;15(5):187-191. **8.** Meaume, S., Van De Looverbosch, D., Heyman, H., Romanelli, M., Ciangherotti, A., Charpin, S. A study to compare a new self-adherent soft silicone dressing with a self-adherent polymer dressing in stage II pressure ulcers. Ostomy Wound Management 2003;49(9):44-51. **9.** Woo, K.Y., Coutts, P.M., Price, P., Harding, K., Sibbald, R.G. A randomized crossover investigation of pain at dressing change comparing 2 foam dressings. Advances in Skin and Wound Care 2009;22(7):304-310.

Find out more at www.molnlycke.com

Mölnlycke Health Care AB, Box 13080, SE-402 52 Göteborg, Sweden. Phone + 46 31 722 30 00.

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