Venous Leg Ulcers (VLUs) and Compression Therapy

Combating venous insufficiency to promote healing, improve comfort, reduce costs and elevate health-related quality of life



people worldwide¹

Afflicts 3 million



\$1.9-3.5 billion Annual cost of VLU treatment in the United States¹



17-20% of patients

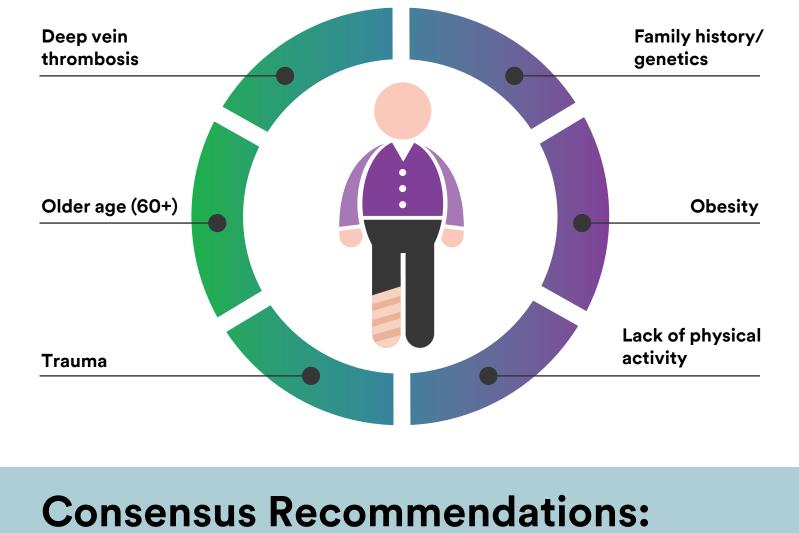


experience a recurrence within 12 months²



Risk Factors





Simplifying Venous Leg Ulcer Management Funded by an unrestricted 3M educational grant SIMPLIFYING VENOUS LEG Involvement from 13 international experts in leg **ULCER MANAGEMENT** ulcers and venous disease



- Calls for a simplified approach to compression therapy treatment for VLUs
- Click here to download the VLU consensus document

The ABCs of VLU Management

REGULAR REASSESSMEN, Assessment and Diagnosis



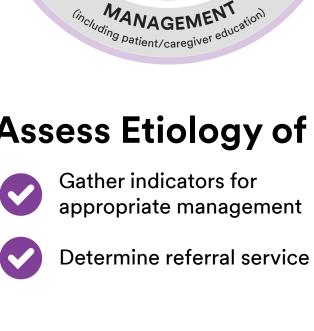


Categorize wound

Determine prognosis

Best Practice VLU

Management





Step 1: Protect Skin and adhesive trauma



Step 3:

Manage Exudate



3M™ Tegaderm™ Silicone Foam **Non-Bordered Dressing** 3M™ Tegaderm™ Superabsorber Dressing Multiple options for managing low to high exudate

Provides antimicrobial effectiveness

3M™ Tegaderm™ Ag Mesh Dressing with Silver 3M™ Tegaderm™ Alginate Ag Silver Dressing



Select bandaging



Consider compression

hosiery for prevention

Compression Therapy Implementation

Refer to a vascular

surgeon for possible

revascularization

Encourage patient

mobility

3M™ Coban™ 2 Two-Layer Compression System

Delivers comfortable, effective therapeutic

compression, supported by clinical evidence

Why compression therapy? Consider the giraffe. • The distance between a giraffe's heart and feet is twice

that of humans.

Refer to specialist

if mixed etiology

ulcer presents

and minimal ankle joint movement.



Yet giraffes do not suffer from edema. Why? Because their skin is extremely tough, fibrous and non-elastic.

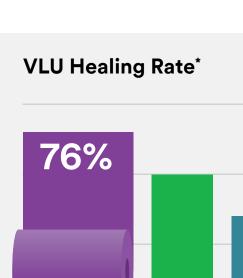
It creates a rigid sleeve that optimizes venous return.^{3,4}

Giraffes also have smaller calf muscles, no moving toes

Venous Leg Ulcers (VLUs) in the UK.5 The study's objective was to explore outcomes and costeffectiveness of three different types of compression therapy

Clinical Outcomes and Cost-Effectiveness of Three

Different Compression Systems in Newly Diagnosed



3M[™] Coban[™] 2

Compression System

Two-Layer

70%

Urgo KTwo

Urgo KTwo (Two-layer compression system)

60%

0%

64%

PROFORE™

3M™ Coban™ 2 Two-Layer Compression System (Two-layer compression system)

■ Smith & Nephew PROFORE™ Multi-Layer Compression Bandage System (Four-layer compression system)

Quality of Life Quality-adjusted life years (QALYs) 2 Two-Layer Compression System

*Once compression has been initiated

The study specifically explored the following:5 VLU healing rates Quality of life Time to healing Management costs

systems and their impact in treating newly-diagnosed VLUs.

80% 3M[™] Coban[™] 2 Two-Layer Compression System 1.6 Months 70% **Urgo KTwo**

2 Months

PROFORE™

2.1 Months

p<0.003

3M[™] Coban[™] 2

Two-Layer

Compression System

£3045

Management Costs

Urgo KTwo

£3842

PROFORE™

£4480

more than

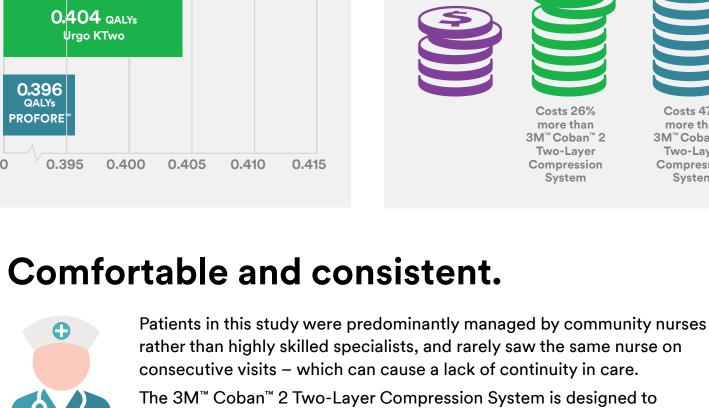
3M[™] Coban[™] 2

Two-Layer

Compression

System

Time to Healing



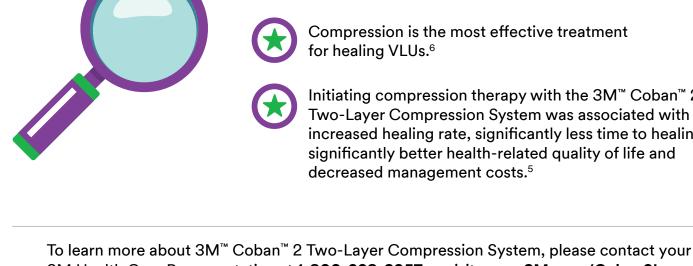
more than 3M[™] Coban[™] 2 Two-Layer Compression System

be applied at full stretch, reducing application variability and ensuring consistent compression - regardless of which practitioner a patient sees.

VLUs are a major problem and the most common type of chronic wound.6

Compression is the most effective treatment for healing VLUs.6

Study Conclusions



REFERENCES:



Download the full study at 3M.com/Coban2Layer

Initiating compression therapy with the 3M™ Coban™ 2 Two-Layer Compression System was associated with increased healing rate, significantly less time to healing,

significantly better health-related quality of life and



decreased management costs.5

Roos KP, Neumann HA. Recurrence of venous leg ulceration. Reviews in Vascular Medicine. 2013;1:63-65. 3) Hargens AR, Millard RW, Pettersson K, Johansen K. Gravitational haemodynamics and oedema prevention in the giraffe. Nature. 1987;329(6134):59-60. 4) Pedley TJ. Haemodynamics: How giraffes prevent oedema. Nature 1987;329(6134):13-14. 5) Guest, J. F., Fuller, G. W., & Vowden, P. (2017). Clinical outcomes and cost-effectiveness of three different compression systems in newly diagnosed venous leg ulcers in the UK. Journal



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1) Bergan JJ, Schmid-Schöbein GW, Coleridge Smith PD, et al. Chronic venous disease. N Engl J Med. 2006;355(5):488-498. 2) Reeder SWI, Eggen C, Maessen-Visch MB, de

of Wound Care, 26(5). 6) Nelson EA, Bell-Syer SEM. Compression for preventing recurrence

of venous ulcers. Cochrane Database Syst Rev. 2014;9:CD002303.