



When surgical debridement is delayed, now you have another choice!

V.A.C. VERAFLOR™ Therapy, using V.A.C. VERAFLOR CLEANSE CHOICE™ Dressing, provides a wound cleansing option that:



Can be used when surgical debridement is delayed



Allows the dressings to be left in place for up to 72 hours*



Can help reduce daily dressing changes**

*In a monitored, non-infected wound, dressing should be changed every 48 to 72 hours, but no less than 3 times per week, with frequency adjusted by the clinician as appropriate. If the wound is infected, it should be monitored and may require more frequent dressing changes.

**Compared to traditional wound dressings that require daily changing.

The 3-layer design of the V.A.C. VERAFLOR CLEANSE CHOICE™ Dressing helps:

- Facilitate removal of thick wound exudates, fibrin, and infectious materials
- Create an environment that promotes wound healing
- Promote granulation tissue formation¹

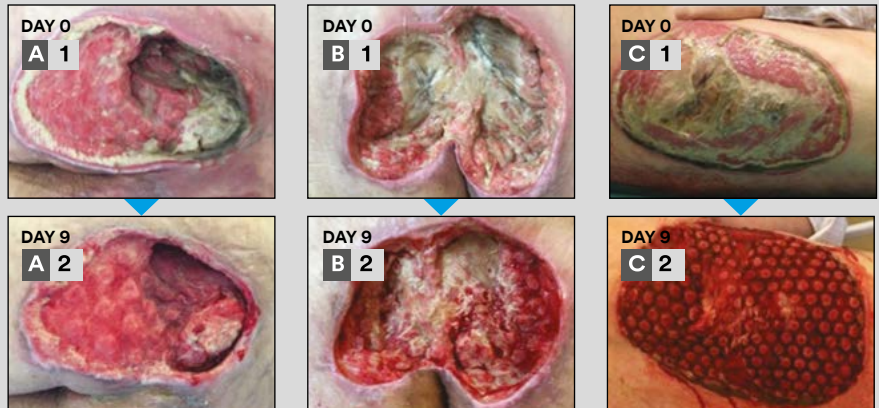


A retrospective study:¹

Novel foam dressing using negative pressure wound therapy with instillation to remove thick exudate.

A retrospective data analysis on 21 patients with 21 large complex wounds that contained substantial areas of devitalized and/or yellow fibrinous slough were treated in one hospital by several surgeons.

V.A.C. VERAFLORTM Therapy (NPWTi-d) was delivered with the following settings:



Solution: Normal saline
Soak time: 10 minutes

V.A.C.[®] Therapy: 3.5 hours
Target pressure: -125mmHg

Mean # of dressing changes: 2.9
Mean duration of NPWTi-d: 8.7 days

Patients:

- 7/21 patients received conventional NPWT prior to NPWTi-d with VERAFLOR CLEANSE CHOICETM Dressing
- 11/21 (52.4%) received surgical debridement prior to NPWTi-d with ROCF-CC.
- 10/21 (47.6%) did not receive surgical debridement prior to NPWTi-d with ROCF-CC (received autolytic debridement, incomplete excisional debridement using a scalpel or curette or no debridement following the application of NPWTi-d with ROCF-CC)
- 15/21 had confirmed and treated bone infection

Results:

- 18/21 (85.7%) wounds had less than 10% surface area with black non-viable tissue remaining after an average of 1-3 dressing applications.
- 12/21 (57.1%) wounds had less than 10% surface area with yellow fibrinous slough remaining after an average of 1-3 dressing applications
- 20/21 (95.2%) wounds displayed rapid granulation tissue formation under the portion of the foam directly in contact with wound bed

As with any case study, the results and outcomes should not be interpreted as a guarantee or warranty of similar results. Individual results may vary depending on the patient's circumstances and condition.

Photos and case study: courtesy of Luc Teot, MD, PhD

V.A.C. VERAFLORTM Therapy potential benefits

The Impact of Negative-Pressure Wound Therapy with Instillation Compared with Standard Negative-Pressure Wound Therapy: A Retrospective, Historical, Cohort, Controlled Study²

An independent retrospective study conducted at MedStar Georgetown University Hospital compared the impact of V.A.C. VERAFLORTM Therapy using PRONTOSAN[®] Wound Irrigation Solution (PHMB/Betaine) initiated after initial debridement at 6-minute and 20-minute dwell times, with V.A.C.[®] Therapy.

Patient population

- Patients with infected wound (ischemic, neuropathic, decubitus, surgical, venous, traumatic)
- Patients requiring hospitalization and more than one surgical debridement
- Patients treated with systemic culture-specific antibiotics

Reduced length of stay



(14.9 vs 11.4 days)
 $p=0.034^*$

Reduced OR visits



(3.0 vs 2.6 visits)
 $p=0.003^*$

20 min dwell time

Reduced time to final surgical procedure



(9.2 vs 7.5 days)
 $p=0.002^*$

Wounds closed at discharge
NPWTi-d 6-min 94% (32/34) vs. NPWT 62% (46/74) $p=0.0004$

What you'll need to initiate therapy.



V.A.C. ULTATM
Therapy Unit



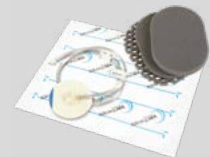
V.A.C. ULTATM
Canister



V.A.C. VERALINKTM
CASSETTE



Topical wound
solution as prescribed
by clinician - e.g. saline



V.A.C. VERAFLOR
CLEANSE CHOICETM
Dressing Kit

For 2019 Negative Pressure Wound Therapy with Instillation International Consensus Guidelines, [click here](#)
For Medical Education Webinars, [click here](#)
For more information, please contact your 3M representative or [visit our website](#).

References: 1. Teot L, Boissiere F, Fluieraru S. Novel foam dressing using negative pressure wound therapy with instillation to remove thick exudate. *Int Wound J.* 2017;14(5):842-848. 2. Kim PJ, Attinger CE, Steinberg JS, et al. The impact of negative-pressure wound therapy with instillation compared with standard negative-pressure wound therapy: A retrospective, historical, cohort, controlled study. *Plast Reconstr Surg.* 2014;133:709-716.

NOTE: Specific indications, contraindications, warnings, precautions, and safety information exists for these products and therapies. Please consult a clinician and product instructions for use prior to application. Rx only. This material is intended for healthcare professionals.

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KCI Medical Australia Pty Ltd
level 7, 15 Orion Rd
Lane Cove West, NSW 2066
Phone 1300 524 822
ABN 47056073468

InterMed Medical Limited
71 Apollo Drive,
Albany, Auckland 0632 New Zealand
Phone 0800 524 222

