PROMISES study data suggests 3M™ Prevena™ Therapy can help advance the standard of care

Promising new data from a randomized controlled trial further affirms that Prevena Therapy significantly reduces the risk of 90-day surgical site complications (SSCs) and postop readmissions.
**The PROMISES (Post-market, Randomized, Open-Label, Multicenter Study to evaluate Effectiveness) Trial**

**The Effectiveness of Closed Incision Negative Pressure Therapy versus Silver-Impregnated Dressings in Mitigating Surgical Site Complications in High-Risk Patients After Revision Knee Arthroplasty.**


**Study Design**
Post-market, randomized, open-label, multicenter study.

**Study Purpose**
• Evaluate the effectiveness of closed incision negative pressure therapy (ciNPT) versus standard of care (SOC) dressings in reducing surgical site complications (SSCs).

**Methods**
• A total of 294 revision total knee arthroplasty (rTKA) patients (15 centers) at high-risk for wound complications were randomized to ciNPT or SOC (n=146 each) and stratified by revision type (aseptic vs. septic).

Demographics, comorbidities, causes of revision and duration of treatment were similar between cohorts (p>0.05).

• 242 patients with incisions completed follow-up, including 124 patients treated with 3M™ Prevena™ Therapy (ciNPT) and 118 patients treated with an antimicrobial silver-impregnated dressing (SOC).

• Primary outcome was the 90-day incidence of SSCs with stratification in accordance with revision type. Secondary outcomes were the 90-day health care utilization parameters (readmission, reoperation, dressing changes, and visits) and patient-reported outcomes (PRO). Treatment-related adverse events were compared and stratified as severe and non-severe.

**Results**
• Compared to SOC, patients in the Prevena Therapy group demonstrated:
  - Significantly decreased rates of surgical site complications (ciNPT 3.4% vs. SOC 14.3%, \( p=0.0013^* \))
  - Significantly lower readmission rates (ciNPT 3.4% vs. SOC 10.2%, \( p=0.0208^* \))
  - Reduced dressing changes (ciNPT 1.1+0.29 vs. SOC 1.3 +0.96, \( p=0.0003^* \))

**Conclusions**
• Prevena Therapy significantly mitigated 90-day surgical site complications, readmission rates, and reduced frequency of dressing changes compared with the standard of care among high-risk rTKA patients.
  - Treatment-related adverse effects were similar between both cohorts.
  - The benefit of ciNPT on specific SSCs and post-rTKA patient-reported outcomes (PRO) was not established and further studies are warranted.

**Patients treated with Prevena Therapy were:**

![4X* LESS LIKELY to experience a post-operative 90-day surgical site complication](image)

![3X* LESS LIKELY to be readmitted compared to the standard of care group](image)

*Calculation(s) are derived based on relative patient group incidence rate reported in this study. *Statistically significant (\( p<0.05 \))