

# Development of the 3M™ Coban™ 2 Layer Compression system



Compression therapy remains the cornerstone of the management of leg ulceration. Over the last two decades research has shown how effective it is in promoting healing as well as demonstrating its cost effectiveness when used within an effective leg ulcer service. Compression also dramatically improves the quality of life for the patient particularly by reducing pain and improving mobility.

Despite these advances, clinicians face many outstanding problems when using compression therapy. Patients with chronic, often recurrent bouts of ulceration develop changes in the contour of the limb and increased vulnerability from pressure damage as a result of this. Effective compression requires a system that can address these issues by correcting the shape distortion and providing protection to vulnerable areas. Another major challenge is preventing bandage slippage.

The new *Coban 2 Layer Compression System* is a welcome technological advance in compression therapy. It has been carefully developed with clinicians and is currently being evaluated in research trials, an important requirement to demonstrate its effectiveness. While some investment has occurred in compression therapy over the last decade little attempt has been made until now to examine the use of new types of materials. This new system is novel and allows the correction of even extreme shape distortion with the foam layer. The two layers laminate together to form a consistent and flexible compression system that is capable of applying high, sustained compression - a requisite for ulcer healing.

I feel very privileged to have been involved in the development and evaluation of this new and exciting therapy, most recently as the principal investigator for an International Randomised Control Multi Centred Trial looking to evaluate the performance of the *Coban 2 Layer Compression System* for the treatment of venous leg ulcers. I am convinced that this new therapy will provide meaningful, safe solutions to some of the complex clinical challenges we see in practice.

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