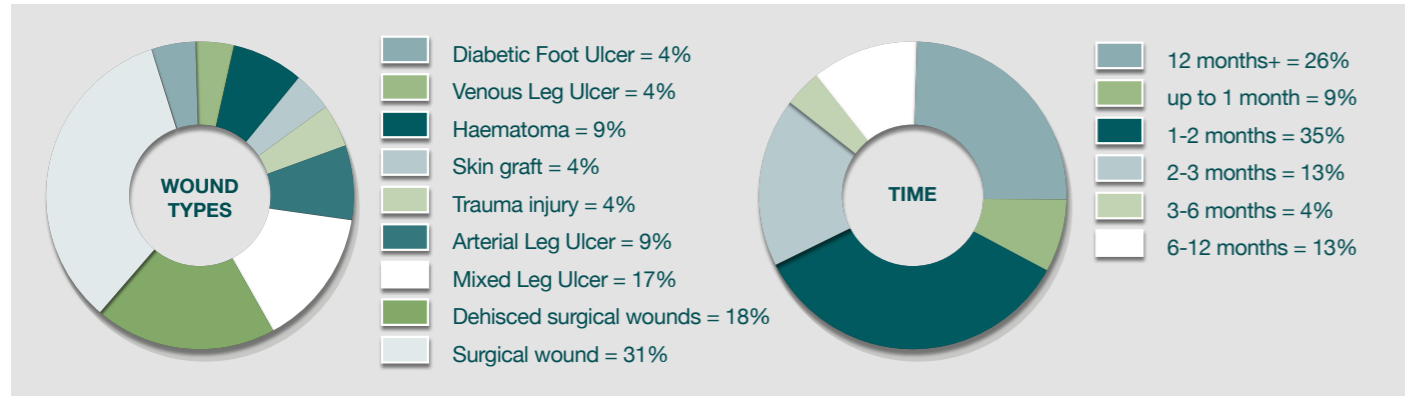


Evidence based care

A 22 patient evaluation was conducted on **Kliniderm Debride** and **Kliniderm Debride Pocket** across 23 wounds in the Skin Integrity Complex Wound Clinic. The evaluation included 23 wounds and was completed over a period of 1 to 11 weeks (average 4 weeks), with the number of debridement's ranging from one debridement to a maximum of 5 over the evaluation period ⁸.



The results of the evaluation showed:

100% satisfaction rate with Kliniderm Debride versus other debridement products.

In 96% of wounds clinicians would recommend the product.

96% of patients rated their experience with the products as 'good' or 'excellent', with only one patient stating their experience was satisfactory.

INDICATIONS:

Kliniderm Debride is suitable for the treatment of superficial wounds (acute and chronic) and the surrounding skin on diabetic foot ulcers, arterial and venous ulcers, pressure ulcers, post-operative wounds (follow local guidelines), lacerations and abrasions, burns and scalds, lymphoedema, and devitalised tissue.



Ordering information

Brand	Size	Pieces per box	Product code	NHSSC code	PIP code
Kliniderm Debride	10cm x 14cm	5	40511800	ELZ1260	421-8764
Kliniderm Debride Pocket	4cm x 8cm	5	40511801	ELZ1268	421-8756

References: 1. Schultz, G., Bjarnsholt, T., James, G.A., Leaper, D.J., McBain, A.J., Malone, M., Stoodley, P., Swanson, T., Tachi, M. and Wolcott, R.D. (2017) Consensus guidelines for the identification and treatment of biofilms in chronic nonhealing wounds. *Wound Repair and Regeneration: official publication of the Wound Healing Society (and) the European Tissue Repair Society*, 25(5), 744-757. 2. Malone, M., Swanson, T. (2017) Biofilm-based wound care: the importance of debridement in biofilm treatment strategies. *British Journal of Community Nursing*, 22(Sup6), S20-S5. 3. Malone, M., Bjarnsholt, T., McBain, A. J., James, G. A., Stoodley, P., Leaper, D., Tachi, M., Schultz, G., Swanson, T., and Wolcott, R. D. (2017) The prevalence of biofilms in chronic wounds: a systematic review and meta-analysis of published data. *Journal of Wound Care*, 26(1), 20-25. 4. Gray, D., Acton, C., Chadwick, P., Fumarola, S., Leaper, D.J., Morris, C., Stang, D., Vowden, K.R., Vowden, P. and Young, T. (2010) Consensus guidance for the use of debridement techniques in the UK. *Wounds UK* 6(4), 77-84. 5. Strohal, R., Dissemmond, J., Jordan O'Brien, J., Piaggese, A., Rimdeika, R., Young, T. and Apelqvist, J. (2013) EWMA document: Debridement. An updated overview and clarification of the principle role of debridement. *Journal of Wound Care*, 22(1), 5. 6. Thomas, H., Westhead, K., French, M., Jones, H., Westgate, S.J. (2022) Removal of mucoid exudate by Kliniderm® Debride and two leading brands using a complex in vitro mucoid biofilm wound model at Wounds UK Conference, 7-9 November, Harrogate. 7. Data on file. 8. Wall, L. and Moore, K (2022) 22-patient clinical evaluation of Kliniderm Debride and Kliniderm Debride Pocket. *Wounds UK*, 18(3), 46-55.

Please scan QR code for more information.



KDEB004-0424

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Kliniderm® Debride



Speed up wound healing it's in your hands

Wound bed preparation. Simple, safe and effective.



at the heart of healthcare

Wound bed Preparation

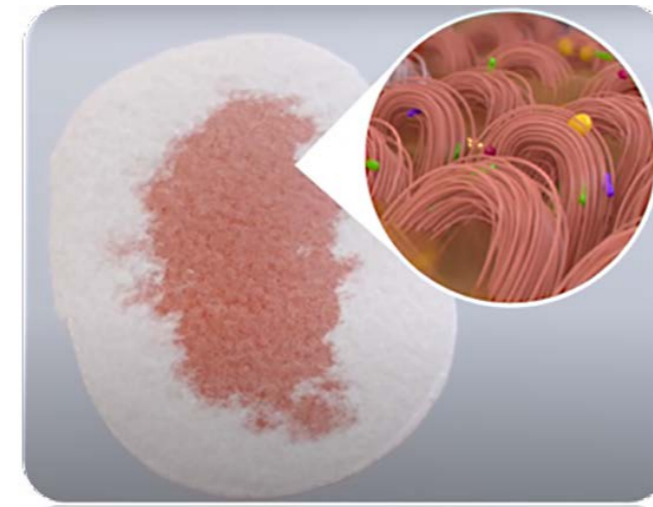
Wound bed preparation and management of the surrounding skin are of paramount importance to ensure optimum wound healing¹. A key element of this is wound debridement as it removes barriers to healing, such as non-viable tissue, infected tissue, foreign material and/or debris and biofilms², which are present in 80% of chronic wounds³. Mechanical debridement is the most common form of debridement as it is quick, safe and effective with no specialist training required.

Why choose Kliniderm® Debride

Use of the Kliniderm Debride products, with their intuitive design, improved handleability and control, double-sided and continuous soft edge, enables clinicians to mechanically debride wounds effectively, gently and efficiently. This can help to reduce odour, reduce excess moisture, limit the risk of inflammation and infection and reduce the potential pain associated with devitalised tissue⁴⁻⁵. The debridement can also stimulate wound edges and epithelisation, aid correct wound assessment, promote a healing trajectory and improve quality of life⁴⁻⁵.

- Manages wound and surrounding tissue in a single procedure due to double sided application area
- Absorbs exudate to enable effective cleansing during debridement
- Conforms with the hand and manages difficult areas due to the continuous soft edge
- Gentle effective debridement proven to lift and trap bacteria and disrupt biofilm formation², provided by soft looped monofilament polyester fibres
- Leakage and fraying is prevented by water-resistant polypropylene film backing and finished edge
- Great handleability and pressure control during use with our intuitive design
- Kliniderm Debride Pocket finger debridement pad for small wounds or when extra control is needed when applying pressure

Evidence based care

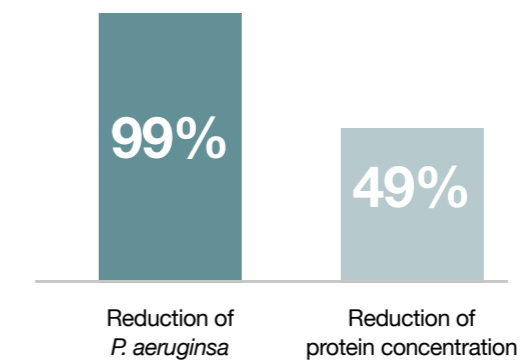


MONOFILAMENT FIBRES

The looped Monofilament fibres gently brush the wound bed lifting bacteria and debris, 'trapping' it within the fibres of the dressing.

LIFTING & RETAINING BACTERIA

Porcine skin samples with preformed *P. aeruginosa* biofilms were treated with Kliniderm Debride. A 2-minute total contact time was tested by rubbing Kliniderm Debride clockwise for 30 seconds, anticlockwise for 30 seconds, clockwise for 30 seconds, and anticlockwise for 30 seconds. Following treatment, the porcine skin samples were tested to assess the reduction in *P. aeruginosa* and protein concentration. The test samples were also analysed, to assess for retention of *P. aeruginosa* and protein concentration⁶.



Kliniderm Debride provides effective debridement after just one use⁸

