NON-ADHESIVE & ADHESIVE FOAM



activheal

ACTIVHEAL® FOAM CONTACT



This dressing has been developed to offer excellent absorption properties alongside security and protection on moderate to heavily exuding chronic and acute wounds. The perforated wound contact layer minimises trauma during dressing changes, whilst the continuous adhesive coverage securely positions the dressing in place. This reduces the risk of leakage whilst the foam pad provides increased fluid handling when required. That's a combination that will give confidence to the clinician and the patient.



CLINICAL BENEFITS

All the benefits of our ActivHeal® Foam Adhesive dressing with the addition of:

- ✓ Perforated wound contact ✓ Bevelled edges to ensure layer minimising trauma during dressing changes
- ✓ A continuous adhesive coverage providing extra security when required
- the dressing stays in place, preventing accidental removal by shear between clothes and bedding
- √ Enhanced fluid handling properties







SIZES AND CODES

SIZE (CM)	DRESSINGS PER CARTON	PRODUCT CODE	NHS SUPPLY CHAIN CODE	DT PIP CODE
7.5 x 7.5	10	10011147	ELA597	377-9949
10 x 10	10	10011148	ELA598	377-9931
12.5 x 12.5	10	10011149	ELA599	377-9923
10 x 20 NEW	10	10011150	ELA600	377-9915
15 x 15	10	10011151	ELA601	377-9907
20 x 20	10	10011152	ELA602	377-9899
18 x 18.5 Sacral NEW	10	10011153	ELA603	377-9881

CASE STUDY

Patient S was a 72 year old man who was seen in a wound care clinic. He attended as an outpatient with an ulcer to the lateral side of his right foot. He had history of ischaemic heart disease, chronic obstructive pulmonary disease, and Type 2 diabetes. He also was a cigarette smoker and had a history of alcohol abuse.





Day 22

After a full

assessment.

autolytically

now 100%

the wound had

granulating tissue

The exudate levels

had reduced and

reduced in size.

no signs of

continued to

3 days.

manage exudate

and the dressing



Day 1

On initial assessment the wound was diagnosed as a neuroischaemic ulcer and had been present for 16 weeks. The wound and the wound had remained intact. bed was 100% sloughy and exudate levels were moderate. Following the initial assessment, the priority was to manage the exudate decided that levels of the wound, ActivHeal® Foam patient's own foot therefore ActivHeal® Contact would be wear and allowed Foam Contact dressing was applied.

Day 36

During his final visit the wound was reassessed. The wound now had debrided, there was 100% epithelial tissue present and the peri wound skin The clinician noted the ActivHeal® Foam Contact dressing the peri wound skin conformed well to remained intact with the wound and staved in place. It maceration. It was allowed the dressing to be worn with the him to carry on with normal activities of daily living. was changed every

ACTIVHEAL® FOAM ADHESIVE

ActivHeal® Foam Adhesive is a 2 layer dressing consisting of a polyurethane bacterial barrier membrane with a centrally located hydrophilic foam pad and an acrylic adhesive border.

Indicated for moderate to heavily exuding wounds the dressing offers a pressure sensitive acrylic adhesive border ensuring the dressing remains in place allowing the patient to continue everyday activities confidently. The dressing conforms to the contours of the body which reduces the risk of rucking or catching on clothing and bedding.



CLINICAL BENEFITS

- ✓ Waterproof and bacterial barrier
- ✓ Soft and conformable
- ✓ Effective absorption properties
- ✓ Maintains a moist wound healing environment
- ✓ Reduces the risk of maceration







SIZES AND CODES

SIZE (CM)	DRESSINGS PER CARTON	PRODUCT CODE	NHS SUPPLY CHAIN CODE	DT PIP CODE
7.5 x 7.5	10	10010232	ELM161	358-3390
10 x 10	10	10009109	ELA210	304-3767
12.5 x 12.5	10	10009110	ELA211	317-0495
15 x 15	10	10009111	ELA212	304-3775
20 x 20	10	10009112	ELA213	314-6065

CASE STUDY

Patient H was an 82 year old lady resident in a nursing home. The patient had a grade 3 moderately exuding pressure ulcer situated over the coccyx which had been present for 6 months.



Day 1

The wound

presented healthy

granulation tissue

however it had

the wound was

complaints of

levels remained

moderate. The

every 2 days.

previous dressing

hydrated, healthy



Day 9





The wound continued to improve with good epithelial growth. become inert. The The patient's tissue surrounding discomfort levels remained low and and there were no of peri ulcer skin reactions. The discomfort. Exudate dressing was easy to apply, remove and was atraumatic for the patient. was being changed

Day 24

The wound had continued to progress through the wound healing continuum with increasing amounts of epithelial tissue there were no signs visible and a slight reduction in size.

ACTIVHEAL® FOAM NON-ADHESIVE

ActivHeal® Foam Non-Adhesive is a versatile dressing developed to offer protection and absorbency on moderate to heavily exuding wounds. Its 3 layer construction offers a low friction backing, soft highly absorbent foam and a perforated wound contact layer. This non-adhesive dressing is ideal when reducing trauma is a key part of the wound dressing regime; and its soft and flexible properties mean patients can wear it underneath clothing with comfort and confidence.

The ActivHeal® Foam Non-Adhesive range offers a variety of shapes and sizes including; the ActivHeal® Foam Heel dressing, a soft pre-moulded dressing, specifically designed to apply easily to the heel and other anatomical areas. The ActivHeal® Foam Tracheostomy dressing which features a versatile fenestration, allowing it to fit neatly around a tracheostomy tube, intubation tube, cannula insertion, external bone fixators and appropriately sized wound drainage tubes.



CLINICAL BENEFITS

- ✓ Waterproof and bacterial barrier
- ✓ Soft and conformable
- ✓ Effective absorption properties
- ✓ Maintains a moist wound healing environment
- ✓ Reduces the risk of maceration
- ✓ Low friction backing
- ✓ Low adherent wound contact layer minimising trauma to the wound during dressing changes



Patient A was admitted to the unit with a fresh, sizeable skin tear to her left shin. The skin on her right leg was in danger of further breakdown. Her past medical history included left hemiparesis due to cerebral infarct, osteoarthritis, hypertension, shingles and low mood.



Day 1

The skin tear and flap measured 7cm at the widest point. The dermis and the epidermis had been pulled apart, however the flap was almost intact proximally. Distally the epidermal flap was lost, leaving a small area of dermal tissue exposed. The wound was assessed and found and contains both to have no necrosis or slough, moderate and epithelial tissue. levels of exudate and no sign of infection. Additionally the flap was also viable.



Day 12

The wound continues to show improvement following the use of ActivHeal® Non-Adhesive Foam. Proximal wound margins now apposed. No signs of maceration or breakdown of surrounding skin. The wound area has reduced in size granulation tissue



Day 32

The wound showed a good level of healing and, as a result, the patient was discharged from the unit back into the community. The District Nurses were requested to moisturise both legs, then continue with ActivHeal® Non-Adhesive Foam, held in place with a tubular bandage to protect the delicate, newly healed tissue and prevent tissue breakdown.







SIZES AND CODES

SIZE (CM)	DRESSINGS PER CARTON	PRODUCT CODE	NHS SUPPLY CHAIN CODE	DT PIP CODE		
5 x 5	10	10009113	ELA214	314-6073		
7.5 x 7.5	10	10009114	ELA245	NA		
10 x 10	10	10009115	ELA216	304-3791		
10 x 20	10	10011265	ELA246	317-0503		
20 x 20	10	10009117	ELA218	314-6081		
FOAM HEEL						
18 x 12	5	10010227	ELM160	356-1131		
FOAM TRACHEOSTOMY						
10 x 10	10	10009118	ELA335	NA		

