

Rapid exudate absorption, even under compression

Kliniderm Superabsorbent dressings by **Medeco** are a market leader in terms of cost, clinical effectiveness and patient preference. The four-layer superabsorbent dressings are held together by a unique patented seal, are indicated for moderate-to-highly exuding chronic and acute wounds, and can be used under compression. Susan Mason, a tissue viability nurse and senior clinical adviser for NHS Shared Business Services, explains why she favours the dressing.

Although exudate is a vital part of wound healing, chronic-wound patients often think of it in terms of disgust, channelling it into feelings of self-loathing and low self-esteem. If mismanaged, it can also lead to further physical damage, increased pain and a greater risk of already debilitating wounds becoming infected. As care providers assess, find causes for and act to manage exuding wounds, they need to keep all of this in mind.

“We look at the whole of the patient, not the hole in the patient,” says UK wound care expert Susan Mason. A former manager for tissue viability in a large NHS primary care trust, she now spends two days a week as a tissue viability nurse and the other three as a senior clinical adviser for NHS Shared Business Services. With her range of experience and responsibilities, she’s as well placed as anyone to practice what she preaches.

“It’s all about quality of life for the patient and you can’t equate that with cost because everybody’s so different. It’s about ensuring that the patient’s quality of life is enhanced. To make sure products are of a standard you would accept, you involve patients.”

“It’s all about quality of life for the patient,” Mason continues, “and you can’t equate that with cost because everybody’s so different. It’s about ensuring that the patient’s quality of life is enhanced. To make sure products are of a standard you would accept, you involve patients.”



Patient first

It’s because of patients that Mason wants to speak about Kliniderm Superabsorbent, which she is quick to recommend for managing foot, leg and pressure ulcers, lymphoedema and more. Comprising of a hydrophilic wound contact layer, an absorbent core that can absorb 33 times its own weight, a fluid-repellent backing layer and an ultrasonic seal that removes the risk of reactions to the glue used, all of which are held together with a patented

seal. The product is indicated for moderate-to-highly exuding wounds and is designed to rapidly absorb exudate even under compression, locking exudate and MMP’s into the dressing core. The product is comfortable for the patient over a long wear time, conformable, and easy to

apply and remove. In addition, Kliniderm Superabsorbent dressings are 34–79% cheaper than other superabsorbents.

In her previous management role, Mason tested Kliniderm’s product against the exudate management dressings already in the trust’s formulary. “The product we were using at the time was quite costly, and we were still having issues with suppuration,” she explains. “We did an evaluation with that product and the Kliniderm range and saved

a phenomenal amount of money with no detriment to the patient.”

In fact, patient feedback about Kliniderm dressings’ wearability, conformability and comfort was extremely positive. Clinicians praised the ease with which the product could be applied and removed, as well as how beneficial it was for patients. “It was a no-brainer for us,” Mason laughs. “I wish all our decisions were like that.”

Equally, the Humber Foundation Trust’s 2015 study into superabsorbent dressing reviewed use in the three months before and after the implementation of Kliniderm products, and found costs fell from £61,372.06 to £21,366.77 and 26% fewer dressings needed to be applied. Apparent cost savings can prove to be a false economy if the suitability of wound care products isn’t considered, but, as Mason stresses, these savings were not achieved at the patient’s expense. Indeed, in Humber’s product evaluation, 27 of 30 clinicians rated Kliniderm superabsorbent’s ability to manage exudate as ‘very good’ or ‘excellent’, and 18 rated the improvement

in the wound bed in the same terms. As a result of the study, the Kliniderm dressing was added to the Humber Trust Formulary as the first-line superabsorbent product. Since then, the organisation has been able to reconsider the number of nursing visits required to provide care.

“One size doesn’t fit all,” notes Mason. “I’m patient-led, not product-led. That’s how I work with companies. I will never be product-led because I’m going to be a patient one day. So if it’s a dressing that the patient warrants and it’s beneficial to them, then I will use it, and we’ve had no issues with this product. It’s been used very successfully and effectively.”

Patient throughout

Kliniderm Superabsorbent dressings are also tailored to address the precise problems that impair healing in highly exuding wounds. The product is a powerful protease modulator, restricting matrix metalloproteinases (MMPs) that



Kliniderm Superabsorbent dressings’ best feature is their ease of use.

remove damaging extracellular matrices during normal wound healing, but are often too abundant in chronic wounds, creating a highly destructive wound environment that struggles to repair itself. In fact, in vitro studies have shown that Kliniderm superabsorbent dressings can completely remove MMP-2 within 24 hours and are 74% more effective at restricting MMP-9 activity versus control dressings.

Still, a chronic wound is much more than its biology. “Not all wounds heal,” says Mason grimly. “Some patients don’t want them to.” When she talks about looking at the whole of the patient, this is what she wants to be taken into account. “Everybody thinks that if you

had a wound, you’d want it to heal, but some people don’t because they don’t see anybody apart from their nurses. They just love that connection – love sharing a cup of tea.”

It’s in this context that Mason calls Kliniderm superabsorbent dressings’ ease of application “the biggest plus ever”. It

means patients can sometimes change their dressings themselves, reducing their reliance on nurses and allowing them to achieve a greater degree of autonomy.

“They can take control over their wounds,” Mason explains. “They can go shopping more easily and feel more comfortable. We’re getting younger patients with leg ulcers and this really matters to them. From their perspective, the dressing means they’re in control of the ulcer more than the ulcer is controlling them. In each respect it’s a win-win.” ●

For further information

www.mediq.com