

Mepilex® XT

The simple and effective choice for exuding wounds



Mepilex® XT

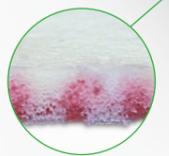


Effective on all exuding wound healing stages⁶

✓ **Polyurethane foam pad**
Good exudate management^{1,2}

✓ **Breathable backing film**
Water resistant³ and maintains a moist wound environment⁶

✓ **Integrated exudate channels**
Handles low to high viscosity exudate,^{1,2} extracting it away from the wound bed into the dressing



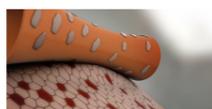
Exudate channels

✓ **Dressings with Safetac minimise pain and skin damage upon dressing removal^{1,4-8}**

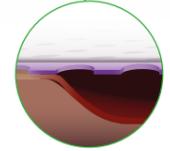
The interface adheres gently to intact skin but not the wound itself, thereby preventing damage to the peri-wound skin (e.g. skin stripping) and the wound bed, as well as minimising associated pain on removal^{1,4-8}



With Safetac



Without Safetac



Safetac TECHNOLOGY

One dressing, many uses

Mepilex® XT is a unique foam dressing designed to handle both normal and viscous exudate and to manage a wide variety of wounds, particularly venous leg ulcers, diabetic foot ulcers and wounds in difficult-to-dress areas.

Effective on all exuding wound healing stages

Exuding wounds can be hard to manage. Mepilex® XT can help. It handles more fluid^{1,2} than other foam dressings.³⁻⁵ It is also proven to manage low to high viscous exudate.^{3,4} Mepilex XT can be used on all exuding wound healing stages,⁶ even under compression.⁵

Lower treatment costs

Mepilex XT has been shown to support longer wear times than other foam dressings⁶ so requires fewer dressing changes, meaning that that it allows for moist wound healing^x while helping to cut costs.⁷

The safe choice

Like all dressings with Safetac®, Mepilex XT protects the skin around the wound,^{8,9} supports faster healing^{10,11} and helps prevent moisture-related complications.⁸

CLINICAL STUDY

Longer wear time

A 6-week multicentre study of 1.062 patients with chronic and acute wounds showed that patients treated with Mepilex® XT required fewer dressing changes than with other foam dressings, potentially improving patient comfort as well as reduction in treatment costs.⁷



Fewer dressing changes

Only 2% of patients treated with Mepilex XT required daily dressing changes (compared to 18% of patients treated with other foam dressings).⁷ Mepilex XT demonstrates longer wear time, good absorption⁸ and retention capacity for moist wound healing.⁸ It can be left in place for up to 7 days.⁸

CLINICAL CASE STUDY

Effective healing

Mepilex XT was used to help treat a 62-year-old patient's venous leg ulcer.

The ulcer measured 7.7cm² when treatment with Mepilex XT was initiated. The peri-wound skin showed signs of redness, maceration and dermatitis. Over the following 12 weeks, there was a constant reduction in wound size, and marked improvement in the condition of the peri-wound skin, ultimately ending with a fully healed wound.



BASELINE VISIT Venous leg ulcer



FINAL VISIT The wound was fully healed after 12 weeks of treatment with Mepilex XT

TESTIMONIAL

“ The patient's wound was very sloughy. (Normally) we would use an alginate... To dissolve the slough we would work with a gel, an absorbent compressing pad and finally fix it with a bandage.

With Mepilex XT we have only one product that we just fix with a bandage.”



Melissa Nowak, Nurse and Wound Manager
GVW Inglostadt, Germany

Mepilex® XT – simple and effective care for exuding wounds

- ✓ Handles both low to high viscous exudate^{3,4}
- ✓ Effective on all exuding wound healing stages, even under compression^{5,6}
- ✓ Requires fewer dressing changes compared to other foam dressings⁷

Mepilex XT assortment (sterile packed)

Art. No.	Size cm	Size inch	Pcs/shelf cont.	Pcs/transp cont.
211015	5x5	2x2	5	40
211100	10x10	4x4	5	70
211200	10x20	4x8	5	45
211300	15x15	6x6	5	25
211400	20x20	8x8	5	20
211500	20x50	8x20	2	12

Note: Not all articles are available in every country. Please contact your local Mölnlycke Health Care representative for information about articles available in your country.



References:

1. SMTL TM-390 & TM-404 Fluid Handling Capacity & Free Swell Absorption Capacity report 20130123-006. 2. SMTL TM-390 & TM-404 Fluid Handling Capacity & Free Swell Absorption Capacity report 20130729-001. 3. Mölnlycke Health Care data on file, report 20130104-004. 4. Mölnlycke Health Care data on file, report 20130515-001. 5. Mölnlycke Health Care data on file, report 20120815-004. 6. Lantin, A., Diegel, C., Scheske, J., Schmitt, C., Bronner, A., Burkhardt, S. Use of a new foam dressing with soft silicone in German specialist wound care centres. E-poster presentation at European Wound Management Association conference, London, UK, 2015. 7. Mölnlycke Health Care, Data on file: MXTCost1115. 8. Meaume, S., Van De Looerbosch, D., Heyman, H., Romaneli, M., Ciangherotti, A., Charpin, S. A study to compare a new self-adherent soft silicone dressing with a self-adherent polymer dressing in stage II pressure ulcers. *Ostomy Wound Management* 2003;49(9):44-51. 9. Zillmer, R., Agren, M.S., Gottrup, F., Karlsmark, T. Biophysical effects of repetitive removal of adhesive dressings on peri-ulcer skin. *Journal of Wound Care* 2006;15(5):187-191. 10. Gee Kee, E.L., Kimble, R.M., Cuttle, L., Khan, A., Stockton, K.A. Randomized controlled trial of three burns dressings for partial thickness burns in children. *Burns* 2015. <http://dx.doi.org/10.1016/j.burns.2014.11.005> [Epub ahead of print]. 11. Bugmann, P., Taylor, S., Gyger, D. A silicone-coated nylon dressing reduces healing time in burned paediatric patients in comparison with standard sulfadiazine treatment: a prospective randomized trial. *Burns* 1998;24(7):609-612. 12. Bond E. Insights into high-viscous exudate – results of an international survey. *Wound International* 2015; 6(2): 11-13. 13. Upton D. et al. The impact of atraumatic vs conventional dressings on pain and stress in patients with chronic wounds. *Journal of Wound Care* 2012 21(5):209-215. 14. White R. Evidence for atraumatic soft silicone wound dressing use. *Wounds UK* 2005 1(3):104-109. 15. Wiberg, A-B., Feili, F., Daun, E-K. Preventing maceration with a soft silicone dressing: in-vitro evaluations. Poster presentation at the 3rd Congress of the World Union of Wound Healing Societies, Toronto, Canada, 2008. 16. Davies, P., Rippon, M. Evidence review: the clinical benefits of Safetac technology in wound care. *Journal of Wound Care* 2008; Supplement:3-31. 17. Santamaria N, Gertz M, Liu W, Rakis S, Sage S, Ng AW, Tudor H, McCann J, Vassiliou T, Morrow F, Smith K, Knott J, Liew D. Clinical effectiveness of a silicone foam dressing for the prevention of heel pressure ulcers in critically ill patients: Border II Trial. *Journal of Wound Care* 2015; 24(8):340-345. 18. Santamaria N, Santamaria H. An estimate of the potential budget impact of using prophylactic dressings to prevent hospital-acquired PUs in Australia. *Journal of Wound Care* 2014; 23(11):583-589.

Find out more at www.molnlycke.com

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