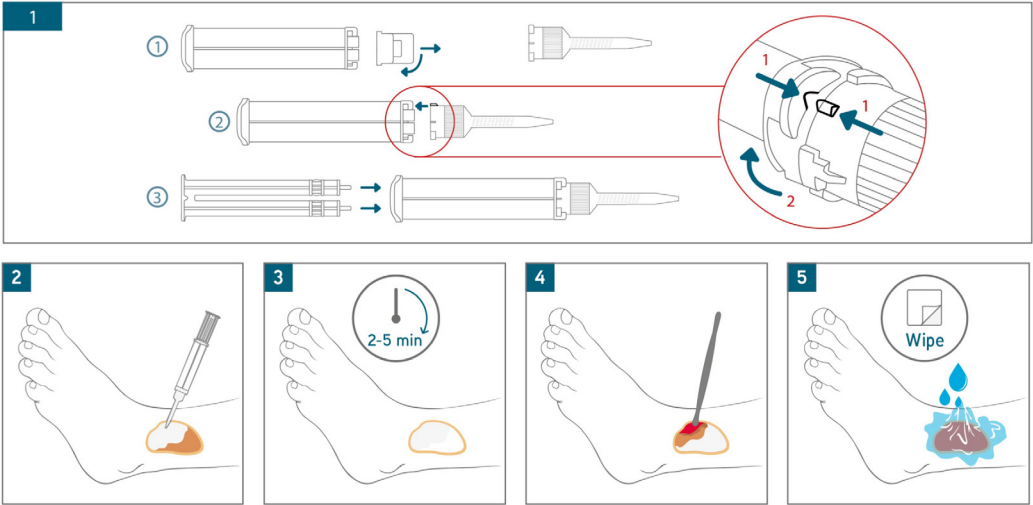


Debridement with ChloraSolv® is beneficial for natural wound healing: Diabetic foot ulcer before ChloraSolv® treatment and after 12-week treatment



ChloraSolv® is convenient and easy to use: application guide

Up to 2 products can be used per patient and treatment. Repeat the procedure 1-2 times/week until no more necrotic tissue is present in the wound. If required, the treatment procedure may be continued for a maximum of 24 weeks.



1. Take the double syringe out of the aluminium pouch. Hold the syringe with the opening upwards and remove the cap. Keep the syringe upright and mount the brown mixer element. Apply the plunger in the two barrels.
2. Press the plunger downwards and apply a thin layer of the mixed gel directly to the wound bed. The gel should cover the wound completely when applied.
3. Leave the gel on the wound for 2-5 minutes.
4. Remove loosened necrotic tissue, using a gentle scraping action with a blunt instrument.
5. Rinse the wound area with water or isotonic saline solution and wipe dry.

End the treatment by repeating steps 2 – 5.

Protect the wound with a bandage or dressing appropriate for the state of the wound.

Ordering information

Article number	Description	Unit packaging
10703	Wound debridement gel	5 x 3 ml

For more information visit www.chlorasolvacademy.se

1. Murphy C, Atkin L, Swanson T, Tachi M, Tan YK, Vega de Ceniga M, Weir D, Wolcott R. International consensus document. Defying hard-to-heal wounds with an early antibiofilm intervention strategy: Wound Hygiene. J Wound Care 2020; 29 (Suppl 3b):S1–28. 2. Eliasson, B., Fagerdahl, A-M., Jönsson, A., Apelqvist, J. Debriding effect of amino acid-buffered hypochlorite on hard-to-heal wounds covered by devitalised tissue: pilot study. Journal of Wound Care (June 2021) 30:6. 3. Strohal R, et al. EWMA document: Debridement. An updated overview and clarification of the principle role of debridement. J Wound Care. 2013;22(1):5. 4. Wilcox JR et al. Frequency of debridements and time to heal: a retrospective cohort study of 312 744 wounds. JAMA Dermatol. 2013;149(9):1050-1058. 5. Instructions For Use. 6. Data on file. RP-00008 Biological Evaluation. 7. Data on file. RP-00087 ChloraSolv Claims Verification. 8. K. Bergqvist, et al, 2016. The role of chloramines in treatment of diabetic foot ulcers: an exploratory multi-centre randomised controlled trial, Clinical Diabetes and Endocrinology (2016) 2:6. 9. Olausson S. Ahlenius M. Fast and complete eradication of biofilm by wound debridement gel. EWMA 2021. 10. Data on file: Ext-RP- 00051. 2020-01-24.



ChloraSolv®

Convenient, effective & gentle debridement of lower leg and diabetic foot ulcers



ChloraSolv®
Wound debridement gel
5 x 3 ml
R.L.S. GLOBAL



RLS GLOBAL
Gentle Methods



ConvaTec

The burden of wound care and the importance of debridement

- Hard-to-heal wounds are a major healthcare problem globally, and prevalence is expected to increase^{1,2}
- COVID-19 has further exacerbated the wound care crisis – HCPs have limited time, resources are stretched and patients avoid seeking medical care
- Debridement is a critical step in the treatment of hard-to-heal wounds³ leading to faster healing, and a significant reduction in healthcare costs⁴

Introducing ChloraSolv®

ChloraSolv® Wound Debridement Gel is a new and unique technology for convenient, effective and gentle wound debridement of patients with hard-to-heal lower leg and diabetic foot ulcers.

- Convenient

 - Easy to use in primary care settings and in patients' homes by all healthcare professionals
 - Makes it easy to mechanically remove devitalised tissue, biofilm, pus and dirt by using a blunt instrument and/or washing and wiping off the wound bed⁵
 - Short application time and fast acting to enable an efficient cleaning procedure²

Effective:

 - Facilitates cleansing and debridement of hard-to-heal wounds⁵, preserving healthy, viable tissue⁶
 - Softens the necrotic tissue of hard-to-heal lower leg and diabetic foot ulcers, for gentler and easier wound debridement^{2,7}
 - Contains sodium hypochlorite - a broad-spectrum anti-microbiological agent that reduces the microbiological load⁹

Gentle:

 - Reduces pain related to debridement in patients with hard-to-heal lower extremities and diabetic foot ulcers²
 - Preserves healthy, granulating and viable tissue during debridement⁶
 - ChloraSolv® is non-irritant⁶

ChloraSolv® has been demonstrated to be convenient, effective and gentle in-vivo^{2,8} and in-vitro⁹

Convenient:

- Overall positive experience: ease of use²

70%

agree that ChloraSolv® makes the debridement easier than earlier experience

26%

rated it as equal

4%

do not agree

98%

rated ChloraSolv® as easy or very easy to handle

Overall experience rated **good** or **very good** by **100%** of the responders

94%

rated it as **easy** or **very easy** to apply

Effective

- Reduction in ulcer/wound size^{2,8}

Weekly relative reduction of ulcer size

19.4%

ChloraSolv® group

11.7%

Standard group

Statistically significant (p<0.0001 for both ChloraSolv® and Standard groups and p=0.083 between groups)

Reduction in wound size (p<0.0001)

After 5 weeks, the median **wound size** reduction was **30.9%**

Faster ulcer/wound size reduction⁸

2 Weeks

ChloraSolv® group

8 Weeks

Standard group

Statistically significant within the ChloraSolv® group after 2 weeks (p=0.026), after 8 weeks in the Standard group (p=0.0023)

3

Improved healing⁸

7 patients in the ChloraSolv® group

1 patient in the Standard group

At 9 weeks. Statistically significant (p=0.039)

Reduction of devitalised tissue (p<0.0001)²

After 5 weeks

72.7%

decrease in devitalised tissue

71.4%

of the subjects showed a decrease in devitalised tissue of ≥50%

At 12 weeks

84.4%

decrease in devitalised tissue

ChloraSolv® effectively eradicates biofilm bacteria in just 2 minutes⁹

ChloraSolv® is rapidly effective against *Staphylococcus aureus* (*S. aureus*) and *Pseudomonas aeruginosa* (*P. aeruginosa*) biofilms^{9,10}

Reduction of biofilm after ChloraSolv® treatment

CFU/ml (Log 10)

Baseline

30 s

2 min

5 min

15 min

Staphylococcus aureus

Pseudomonas aeruginosa

Gentle:

- Overall positive experience: patient comfort²

90%

rated ChloraSolv® as **good** or **very good** with regard to pain during debridement

* In-vitro