



TAKE THE LEAD

B. Braun Wound Care.

Skin Care

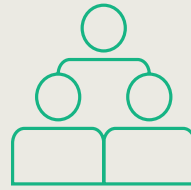
Did you know?



MOISTURE

Moisture Associated Skin Damage (MASD) Causes swelling & disruption of the stratum corneum⁽⁷⁾

Prolonged exposure to various sources of moisture cause the skin to become hyperhydrated, macerated or excoriated, increasing the susceptibility to physical damage from friction, shearing forces and adhesive injuries.



SCARS

100 million patients develop scars⁽¹⁰⁾

A total of 100 million patients develop scars in the developed world alone each year as a result of 55 million elective operations and 25 million operations after trauma.



ABNORMAL SCARRING

40% to 70% hypertrophic scarring⁽¹⁰⁾

Incidence rates of hypertrophic scarring vary from 40% to 70% following surgery depending on the depth of the wound.

Linovera®

Solution of hyperoxygenated fatty acids

Indication

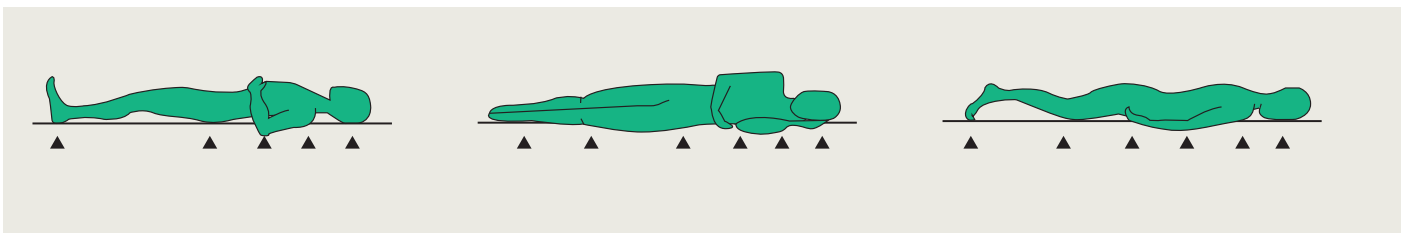
- Prevention and treatment of stage I pressure injuries

How To Apply

- Apply Linovera® 2 - 3 times a day on the affected area and gently massage in to evenly distribute the product until it is fully absorbed



Areas at Risk of Pressure Injuries



Composition

- Hyperoxygenated essential fatty acids (linoleic acid)
- Tocopherols (Vitamin E)
- Aloe Vera
- Centella asiatica
- Natural aroma of rosemary which has a calming effect

Advantages

The plant extracts – aloe vera and *Centella asiatica* – have major protecting effects on the skin:

- Restores capillary circulation (1)
- Stimulates the synthesis of collagen (1)
- Improves hydration and elasticity and helps prevent skin breakdown
- Skin is more resistant to aggressive effects like shearing and friction
- Calms inflammation
- Stimulates cell growth

Special note

Use in combination with Askina® Heel for optimal protection for non broken skin of the heel area against pressure injuries



Linovera® Emulsion

Emulsion of hyperoxygenated fatty acids (HOFA)

Indication

- **Linovera® Emulsion** is indicated for:
- Prevention and treatment of lower limb ulcers (vascular and diabetic foot)
- Prevention and treatment of stage I pressure injuries

How To Apply

Clean the at risk skin area or ulcer. Apply Linovera® Emulsion on the cleaned surface and massage with the fingertips gently to ensure even distribution and absorption. Apply Linovera® Emulsion 2 to 3 times daily, according to the treatment plan developed by the health personnel.



Composition

- Hyperoxygenated essential fatty acids (linoleic acid)⁴
- *Aloe Vera*
- *Centella asiatica*
- *Gingko biloba*
- Rosemary essence

Advantages

- Contains HOFA, which facilitate epidermal cell renewal.¹
- Prevents skin dehydration.
- Contains *Aloe vera*, *centella asiatica* and *Gingko biloba* which act together with HOFA as a skin conditioner.⁵



Ally® Barrier Film

Breathable skin barrier

The barrier film range provides a rapid drying, transparent, breathable, alcohol free skin barrier used for the protection of intact or damaged skin from urine, faeces, adhesive trauma sensitivity and friction. It is completely sting free.

Advantages

- Rapid drying < 30 seconds
- Transparent: allows visual control
- Shiny: assists with re-application guidelines
- Cost effective: offers 3 days protection
- Easily removed with Ally® Adhesive remover or a commonly used medical adhesive remover
- Improves the adhesiveness of dressings and fixation tapes
- Eliminates adhesive sensitivity issues
- Improves the effectiveness of continence aids
- Improves the adhesiveness of ostomy devices
- On average, Ally Barrier Film Spray will last for 140 pumps, which equates to one months usage.

How to apply

Ally® Barrier Film:

- Holding the spray nozzle 10–15 cm from the skin, press the spray nozzle and apply a smooth coating of film over the necessary area
- Allow the film to dry for 30 seconds

Indication

- Can be used on intact or damaged skin
- Prevention against skin breakdown caused by friction or moisture
- Protection of the skin at risk from hyperhydration maceration and/or excoriation
- Protection of newly formed skin against secondary breakdown



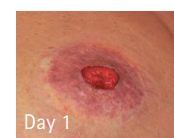
Easy, economic and safe to use

Acts as a protective barrier:

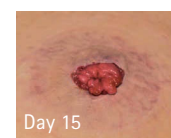
- Against irritation from bodily fluids
- For sensitive and fragile skin
- Under adhesive dressings on periwound area to reduce disruption to newly healing tissue
- For damaged skin
- For skin tears with skin flap intact or category 1a, 1b, 2a, 2b
- To protect periwound and peristomal areas
- For small cuts and tears
- At fixation sites for drainage tubes and external catheters.

Peristomal Skin

After 15 days of treatment with Ally® Barrier Film, an improvement of the peristomal skin is evident.



Significant irritation of peristomal skin at day 1.



Signs of irritation have been almost entirely resolved at day 15.

Patient's main benefit in stomacare:

- Secure adhesion of pouch
- Less pain during pouch removal

When to use Ally® Barrier Film



Peri-wound skin maceration



Tube insertion site



Skin at risk: incontinent patient



Incontinence dermatitis with skin breakdown

Askina® Barrier Cream

Protectant and moisture barrier

Askina® Barrier Cream is a white concentrated cream which forms a protective layer when applied to the skin.

Askina® Barrier Cream acts as a lasting protective barrier on the skin of people living with incontinence. When applied, it is quickly absorbed, providing an invisible, breathable, moisturising and water repellent layer, resistant to washing off. It efficiently moisturises dry skin. It can also be used for skin protection whenever there is a risk of skin breakdown due to prolonged contact with body fluids.

Indication

Askina® Barrier Cream is indicated for use on intact skin and acts as a protectant / moisture barrier:

- Against hyperhydration or maceration caused by incontinence or body fluids.
- To protect sensitive, fragile and severely dry skin, including periwound areas.
- To prevent skin irritation.

How to Apply

Askina® Barrier Cream

- Dry the skin thoroughly before application
- Spread Askina® Barrier Cream thinly to cover the affected area
- On frequently cleansed skin, daily reapplication may be required
- Re-application of barrier creams are recommended after every wash



- Effective prevention of skin breakdown associated with incontinence
- Highly concentrated: small amounts will cover a large surface
- Does not reduce the absorbency of incontinent pads
- Does not reduce the adherence of fixation tapes and dressings
- Temporarily resists wash-off
- Can be used under Askina® Barrier Film for when moisture plus additional protection is required

Ally® Adhesive Remover

Silicone based adhesive remover

Indication

Helps to remove your medical adhesives and barrier film without pain.



Advantages

- Silicone based spray
- Very simple to use
- No pain with its skin friendly formula
- Spray application provides perfectly measured application
- 2 in 1 product: stoma pouch removal and residue removal
- Sting free
- No odour
- No CFC's
- Dries in seconds
- Does not affect adhesion of future dressings
- No waste thanks to the integrated cap

Askina® Scar Repair

Soft silicone dressing for scar management

Askina® Scar Repair is designed to prevent abnormal scarring and to treat existing scars.

The proper care from the very beginning of the scarring process contributes to normalisation of the scarring process and helps to obtain a satisfying aesthetic result.

Scar maturation process is influenced by many factors: the depth, size and position of the scar on the body can affect the appearance of a scar, as well as age or complexion.

Indications

Askina® Scar Repair is indicated for:

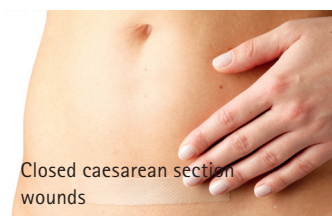
- Management and prevention of hypertrophic or keloid scarring after surgery on closed wounds
- Management of scar resulting from:
 - Closed surgical wounds
 - Closed traumatology wound
 - Caesarean section
 - Burns following reepithelisation



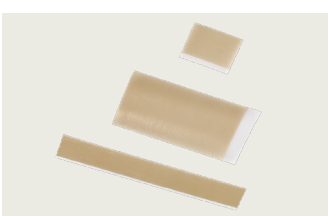
Closed surgical wounds



Closed traumatology wounds



Closed caesarean section wounds



Advantages

The benefits of soft silicone self-adhesive and occlusive sheets such as

Askina® Scar Repair are:

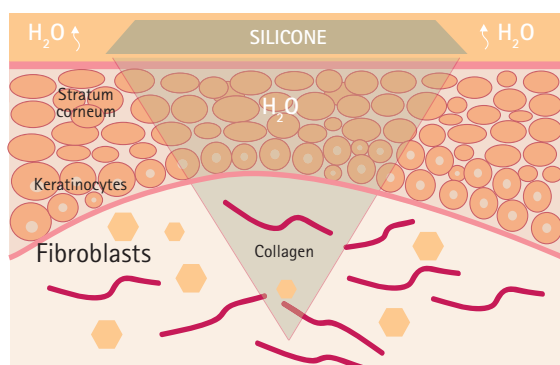
- To prevent the formation of excessive scar tissues: proven to be the most efficient non-invasive scar treatment. ⁽³⁾
- To reduce redness, itchiness, feeling of tension. ⁽⁴⁾
- Easy to use:
 - Thin and comfortable
 - Can be used on various anatomical locations/ on various parts of the body
- Affordable: no need for extra fixation
- Can be worn while showering or can be removed for showering if preferred and then re-applied.

- Did you know that there is about 50% risk to develop a hypertrophic or keloid scar following a surgery? ⁽¹¹⁾
- Did you know that the scar remodeling process can last for up to 2 years? ⁽¹¹⁾
- Did you know that there is a simple scar management procedure to prevent the abnormal scar formation and improve the final aspect of the scar? ⁽¹¹⁾

How does it work?

The occlusive properties of Askina® Scar Repair enhance good skin and scar tissue hydration.

This in turn influences the correct remodelling process beneath the skin surface and prevents the formation of excessive scar tissue. ⁽⁶⁾



Ordering Information

Prevention

Linovera®	Size	Pcs/Pack	Reference
Spray Bottle	30 ml	20	467933
Emulsion	50 g	1	492801

Askina® Heel

Askina® Heel Dressing	Size	Pcs/Pack	Reference
Dressing	225 cm	5	WIN7240105

Protection

Ally® Barrier Film	Size	Pcs/Pack	Reference
Spray Bottle	28 ml	1	5036
Askina® Barrier Film Swab			
Foam Swab	1 ml	25	5037
Askina® Barrier Cream			
Tube	92 g	24	5038
Ally® Adhesive Remover			
Spray	50 ml	1	2005-1

Scar Management

Askina® Scar Repair	Size	Pcs/Pack	Reference
Occlusive Sheets	5 x 7.5 cm	5	WIN5695705
Occlusive Sheets	2 x 14cm	15	WIN5691403
Occlusive Sheets	4 x 30 cm	5	WIN5694305
Occlusive Sheets	10 x 18 cm	5	WIN5691805

- Cravotto G. et al. An evaluation of the potential of 1000 plants. *Journal of Clinical Pharmacy and Therapeutics*, 2010 35:1:11-48
- M. De Pera, Evic Hispania (Barcelona, Spain), Assessment of moisturizing effect in humans, Study report n°05- 0144/1/05.0137, 22 Mar 2005
- Monstrey S., et al, Updated scar management practical guidelines: Non-invasive and invasive measures, *J Plast Reconstruct Aesthet Surg.*, 2014; 67: 1017-1025
- Majan JI 2006, Evaluation of a self-adherent soft silicone dressing for the treatment of hypertrophic postoperative scars
- IFU Askina® Scar Repair
- Mustoe T., Gurjala A., The role of the epidermis and the mechanism of action of occlusive dressings in scarring, *Wound Repair Regen.*, 2011; 19(01):s16-s21
Choi J., et al., Regulation of transforming growth factor β1, platelet-derived growth factor, and basic fibroblast growth factor by silicone gel sheeting in early-stage scarring, *Arch Plast Surg*, 2015; 42: 20-27
- D Beekman et al. Proceedings of the Global IAD Expert Panel. Incontinence associated dermatitis: moving prevention forward. *Wounds International* 2015.
Available to download from www.woundsinternational.com
- K Ousey et al. The identification and management of moisture lesions. *Wounds UK*, 2012; Moisture Lesions Supplement. *Wounds UK*, London
- All Party Parliamentary Group on Skin. Report on the Enquiry into Skin Diseases in Elderly People. 2000; Associate Parliamentary Group on Skin, London
*Healing process is influenced by many individual factors. It is difficult to predict the result of scarring process.
- G Gauglitz et al. Hypertrophic Scarring and Keloids: Pathomechanisms and Current and Emerging Treatment Strategies. *Molecular Medicine*, 2011; 17(1-2):113-125
- McCarty M, Del Rosso J., An evaluation of evidence regarding application of silicone gel sheeting for the management of hypertrophic scars and keloids, *J Clin Aesthet Dermatol.*, 2010; 3(11): 39-43

B. Braun Australia Pty Ltd | Norwest Business Park NSW, 2153

Tel. 1800 251 705 | info.au@bbraun.com | bbraun.com.au

B. Braun New Zealand Pty Ltd | Level 8, 139 Quay Street, Auckland, 1010

Tel. 0800 227 286 | info.nz@bbraun.com | bbraun.co.nz