Technology matters clinically

Absorbs and locks in exudate, even under compression, to reduce risk of leaks and maceration[3,4,9]

Efficiently transfers* exudate away from the wound bed to the secondary dressing[1,2]

Promotes autolytic debridement to support a clean wound bed upon dressing removal[4]

Stays intact for clean and easy one-piece removal[3,4,8,9]

With Hydrolock® technology

Unlike traditional gelling fibres, Exufiber® and Exufiber® Ag+ are non-woven polyvinyl alcohol fibre dressings. On contact with exudate they transform into a gel. The tightly packed fibres keep exudate locked in while the capillary action enables transfer of exudate to the secondary dressing[1,2].

*For Exufiber® Ag+, when exposed to a flow rate of 0.6mL/h at 40 mmHg pressure for up to seven days.[11]

Broad range antimicrobial effect

Exufiber® Ag+ contains fine silver sulphate crystals. These dissolve on contact with exudate, releasing silver ions, which are proven to kill a broad range of pathogens[12,13,14]. The antimicrobial effect is rapid (from 3 hours, *in vitro*) and has a sustained effect (up to seven days, *in vitro*)[12,13,14]. Exufiber® Ag+ prevents biofilm reformation** as part of a biofilm management approach[5,6].

**As part of a holistic biofilm management approach as per international guidelines (i.e. cleansing, debridement & reassessment).[7]

A cost effective approach

Exufiber® dressings help to create an optimal healing environment and reduce the risk of leaks, which means they can be left in place with confidence for up to seven days*. This promotes undisturbed healing, and can reduce nursing time and costs.

*Exufiber® and Exufiber® Ag+ can be left in place for up to seven days, depending on wound condition and clinical practice. In addition Exufiber® can be left in place for up to 14 days for donor sites.

ONLY **14%**

of wound care costs are spent on dressings[15]

	Ordering number	Size (cm)	Pcs/RET	Pcs/TRP
Exufiber®	709900	5x5	10	40
	709901	10x10	10	80
	709903	15x15	10	60
	709905	4.5x10	10	40
	709906	4.5x20	10	50
	709907	4.5x30	10	60
	709904	20x30	5	25
	709908	1x45	5	25
	709909	2x45	5	25
Exufiber® Ag+	603401	5x5	10	40
	603402	10x10	10	60
	603403	15x15	10	60
	603404	4.5x10	10	40
	603405	4.5x20	10	50
	603406	4.5x30	10	60
	603407	20x30	5	20
	603400	2x45	5	20

Mepilex® Border Flex is the recommended secondary dressing for Exufiber® and Exufiber® Ag+. It combines innovative Flex Technology with our proven Safetac® Technology to create a secondary dressing that stays on and uniquely conforms.

References: 1. Mölnlycke Health Care. Data on file. (2018). **2.** Mölnlycke Health Care. Data on file. (2020). **3.** Chadwick P, McCardle J. Open, non-comparative, multicenter post clinical study of the performance and safety of a gelling fibre wound dressing on diabetic foot ulcers. Journal of Wound Care 2016; 25(6): 290-300. **4.** Smet, S., Beele, H., Saine, L., Suys, E., Henrickx, B. Open, non-comparative, multi-centre post market clinical follow-up investigation to evaluate performance and safety on pressure ulcers when using a gelling fibre dressing as intended. Poster Presentation at European Pressure Ulcer Advisory Panel Conference, 2015, Ghent, Belgium. **5.** Gilet al. 2017. Evaluation of a Gelling Fiber Dressing with Silver to Eliminate MRSA Biofilm Infections and Enhance the Healing. Poster presented at the Symposium on Advanced Wound Care Spring meeting/Wound Healing Society (WHS) Annual Meeting 2017, Apr 05 - 09, 2017, San Diego, CA, USA.**6.** Davis, S. C., Li, J. , Gil, J. , Head, C. , Valdes, J. , Glinos, G. D., Solis, M. , Higa, A. and Pastar, I. (2019), Preclinical evaluation of a novel silver gelling fiber dressing on Pseudomonas aeruginosa in a porcine wound infection model. Wound Rep Reg, 27: 360-365.
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Transfers efficiently

Removes cleanly

Exufiber® and Exufiber® Ag+

Optimising the space where healing happens

Mölnlycke®

Chronic wounds present unique clinical challenges

Getting the conditions right

Highly exuding and cavity wounds can be challenging to treat, and painful and worrying for patients. Getting the conditions right for healing is essential. This means a moist environment, without excess exudate. A clean wound bed, undisturbed by slough, residue or debris. And preventing biofilm reformation, which can be a barrier to healing.

When healing is delayed

Without effective management, wounds can macerate surrounding skin, become infected, or simply refuse to heal. This increases the demands on nurses' time and healthcare providers' costs, and also affects patients' wellbeing, independence and quality of life.

A fresh take on chronic wounds

The Exufiber® range offers a fresh take on the challenges of highly exuding and cavity wounds. The next generation of gelling fibres aim to optimise the space where healing happens by efficiently* transferring exudate[1,2] and supporting a clean wound bed[3]. And Exufiber® Ag+ prevents biofilm**[5,6] reformation.

The **Exufiber®** range addresses the key clinical challenges of highly exuding and cavity wounds

– Exudate pooling
– Slough
– Dressing residue
– Biofilm reformation**

* For Exufiber® Ag+, when exposed to a flow rate of 0.6ml/h at 40 mmHg pressure for up to seven days. [7]
** Exufiber® Ag+ may be used as part of a biofilm management approach as per international guidelines[7] (i.e.) cleansing, debridement & reassessment).

MODE OF ACTION

EXUFIBER® AND EXUFIBER® AG+ HELP TO CREATE AN OPTIMAL HEALING ENVIRONMENT

LOCKS IN UP TO **23%**

more**** of the exudate absorbed than Aquacel® Extra™[8]

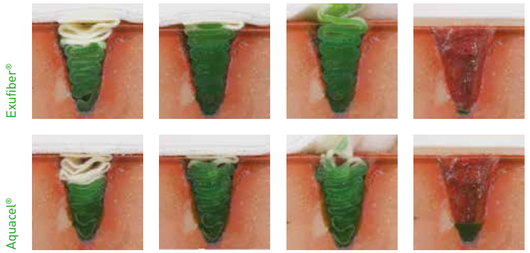
98%

Of clinicians rated Exufiber® as 'easy' or 'very easy' to remove in one piece[9]

98%

Of clinicians reported patient comfort as 'good' or 'very good' for Exufiber®[9]

Proven Transfer Ability



Watch the full video at Mölnlycke.com

A cavity model was used to simulate the fluid transfer capability of Exufiber® and Aquacel® ribbon dressings. 5ml of Solution A was added to the cavity and the dressings were left to absorb and transfer. An additional 5ml was then added and the dressings left to absorb and transfer again. Exufiber® demonstrated a better capability to transfer fluid to the secondary dressing than Aquacel®, and when the dressings were removed, less fluid was left in the cavity.

Transfers exudate

Exufiber® dressings transfer exudate efficiently* from the wound bed to the secondary dressing, locking it in to reduce the risk of pooling, leakage and maceration[3,4]. They can be left in place for up to **seven days****, allowing undisturbed healing[8,10].

Supports a clean wound bed

Residues and debris left in the wound can trigger a foreign body response, and disturb healing[11]. Exufiber® dressings help to break down slough by promoting autolytic debridement[4] They can also be relied upon to stay intact both during use and at removal[3,4,9].

Prevents biofilm reformation

Biofilms are present in almost all chronic, non-healing wounds and their presence may prevent healing[7]. Exufiber® Ag+ is shown to reduce biofilm bacteria and prevent reformation *in vivo****[5,6].

*For Exufiber® Ag+, when exposed to a flow rate of 0.6ml/h at 40 mmHg pressure for up to seven days.[7]
**Exufiber® and Exufiber® Ag+ can be left in place for up to seven days, depending on wound condition and clinical practice. In addition Exufiber® can be left in place for up to 14 days for donor sites.
***As part of a holistic biofilm management approach as per international guidelines (i.e. cleansing, debridement & reassessment)[7]
****When comparing lab test results for retention under pressure with Aquacel®, Aquacel® Extra™, Durafiber® and UrgoClean® dressings

BACKED BY CLINICAL EVIDENCE

Outperforms competition

A recent randomised control trial[16] of 248 venous leg ulcer patients found that Exufiber® outperformed Aquacel® Extra™ across multiple measures:

– A positive trend for better wound size reduction
– Clinician satisfaction for overall experience of use, ease of removal, and non-adherance to wound bed
– Clinicians reported better absorption and lock in of exudate, and better lock in of blood and slough

PATIENT CASE STUDY

Manages wound and wound bed

An elderly patient presented with a large, heavily exuding wound on her heel and calcaneous, with approximately 50% sloughy tissue. Initially Exufiber® Ag+ was used as primary dressing to help manage the bioburden and high exudate levels. After two weeks, treatment continued with Exufiber® to manage exudate levels while assisting autolytic debridement. Following 8 weeks of therapy the wound had a 50% area reduction, was moving in positive trajectory and had no clinical signs of infection.

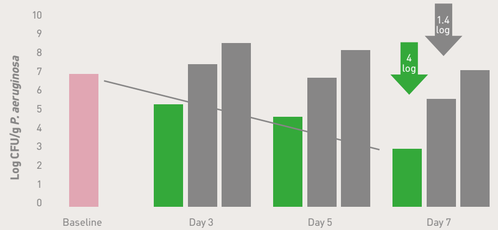
Photographs and case notes kindly supplied by Dr. Paulo Alves, Catholic University of Portugal, Porto, Portugal

Ag+

Baseline
Exufiber® Ag+
Aquacel® Ag+ Extra
Untreated control

Bacterial counts of *Pseudomonas aeruginosa* biofilm after treatment

Exufiber® Ag+ is superior in reducing biofilm* bacteria *in vivo*[6]



Exufiber® Ag+ performs better than Aquacel® Ag+ Extra™ in reducing biofilm bacteria *in vivo*.

*As part of a holistic biofilm management approach as per international guidelines (ie cleansing, debridement & reassessment)[7]