



People.Health.Care.

Debrisoft® Pad and Lolly

Clean it like you mean it. Prepare to heal.



See the Debrisoft® Difference through clinical outcomes.

Before debridement



After debridement with Debrisoft®



Venous leg ulcer with hyperkeratotic scales in the periwound area⁴

Wound clinic: Venous insufficiency ulcer and dermatitis with residue and hyperkeratotic scales in periwound area. Debrisoft® was first used to cleanse and de-scale periwound area before addressing the wound.



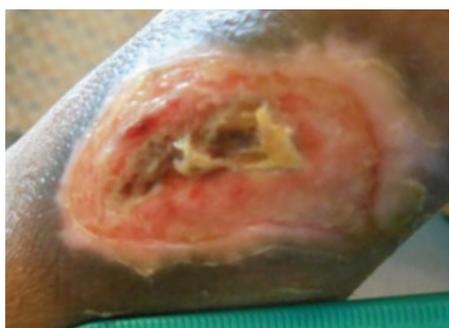
Venous leg ulcer with hyperkeratotic scales in the periwound area⁴

Wound clinic: Venous ulcer from before. Result after 2–3 minutes debridement with another Debrisoft to remove loose debris.



Pressure injury⁴

Long-term care: Very painful wound. Debrisoft used for 2 minutes with no complaints of pain³.



Mixed leg ulcer⁵

Debrisoft was first used to remove the dense fibrinous membrane from the outer wound bed. Next sharp debridement was used to remove the eschar in the center of the wound bed. Finally, Debrisoft was again utilized to remove the remaining necrotic remnants⁴.

There is only one Debrisoft.[®]

Discover its unique benefits.



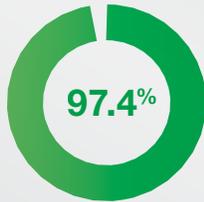
Clinically-proven^{1,2}

- Reduces 90–99% of slough, biofilm, and bacterial load³



Visible results in 2–4 minutes¹

- Saving time and money



Virtually painless²

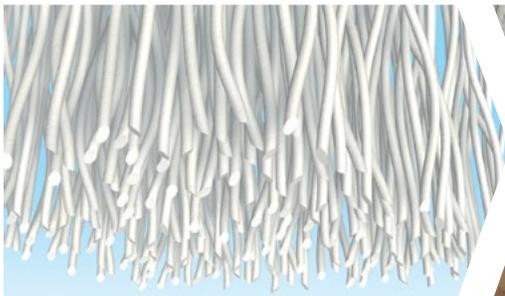
- 97.4% report no pain or side effects



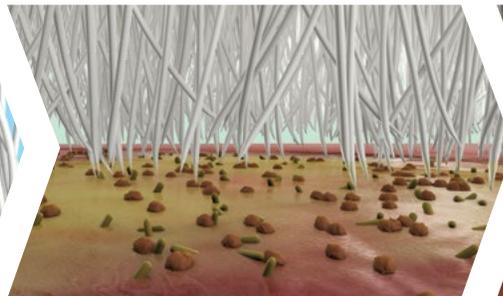
Safe debridement^{1,2}

- Granulation tissue is protected
- Easy to use

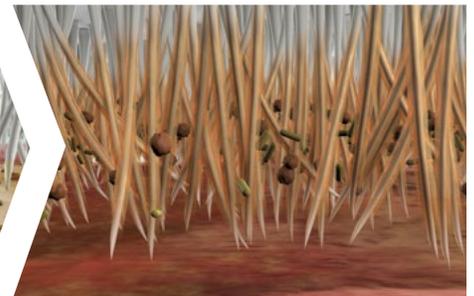
Mode of action



The fiber composite material of Debrisoft consists of 100% **knitted monofilament polyester fibers**.



Beveled fiber tips loosens debris effectively while **protecting newly formed granulation tissue** and epithelial cells.



Fiber composite **lifts, binds, and removes** slough and debris, including biofilm.

Debrisoft®

Effective wound bed preparation for all.

Necrosis, slough, biofilm, and debris trap the wound in the inflammatory phase of wound healing. Effective wound bed preparation helps to remove these inflammatory stimulants and to reduce the associated physical and biochemical mediators, matrix metallo-proteinases (MMPs) and cytokines that degrade the wound and prevent it from progressing to the proliferative phase of wound healing.

Devitalized tissue and hyperkeratosis can interfere with the accurate assessment of the wound and surrounding skin, delaying appropriate follow-on treatment or reducing the effectiveness of topical preparations. Debridement helps expose the wound bed for accurate wound assessment and allows topical medications to reach the skin to deliver therapeutic benefits. Numerous studies have shown that debridement enhances wound healing.^{6,2,8}

The main debridement challenges are:

- Pain for the patient
- Trauma to healthy and newly formed tissue
- Cost, time, number of procedures
- Training of healthcare provider

Debrisoft® overcomes these challenges.

What is Debrisoft®?

Debrisoft products are unique, safe, highly effective debridement products that significantly improve wound bed preparation for acute and chronic wounds.

Debrisoft Pads are ideal for cleansing wound surfaces and removing hyperkeratotic or dry skin, while Debrisoft Lolly safely reaches deep, undermined, or tunneling areas where alternative debridement methods may be impractical.

Effectiveness Evaluation

The National Institute for Health and Care Excellence (NICE) develops guidance, standards, and information on high-quality health and social care. NICE evaluated Debrisoft® and released the Debrisoft NICE Guidance at the end of March 2014. It supports the case that L&R's Debrisoft provides both multiple patient health benefits as well as significant cost savings.

The NICE guidance concluded by using Debrisoft on appropriate wounds, these wounds would be "fully debrided more quickly, with fewer nurse visits needed compared with other debridement methods. In addition, Debrisoft is convenient, easy to use, and is well tolerated by patients". Debrisoft:

- Is more effective at debridement than the common practice of using autolytic dressings and irrigating wounds with saline or cleansing with gauze.
- Provides faster debridement, allowing earlier visibility of the wound bed improving management of the wound
- Results in less frequent and fewer overall care visits
- Reduces risk of trauma to healthy tissue and reduces bleeding
- Contributes to overall cost savings compared with current practices



Debrisoft® Pad and Lolly

Indications

Debrisoft is recommended for cleansing of both superficial acute and chronic wounds, including but not limited to:

- Leg ulcers
- Diabetic ulcers
- Pressure injuries
- Burns, including 3rd degree burns after surgical debridement
- Traumatic and surgical wounds (e.g., abrasions, incisions, lacerations)
- Debrisoft is also highly effective for the removal of hyperkeratotic tissue, including lymphedema associated keratosis, dry skin and seborrheic plaques.

Debrisoft Lolly additionally is suitable to debride deep, undermining, and tunneling wounds as well as cleansing hard-to-reach areas like in-between toes and skin folds.



Application



Step 1

Open the sterile single-use pouch and remove Debrisoft.

- ◆ For better results on hard, dry necrosis or dense slough, utilize surgical, sharp or autolytic debridement to remove or soften the necrotic tissue prior to using Debrisoft.



Step 2

Thoroughly hydrate the soft, fleecy part of the Debrisoft with saline or a wound cleanser using your local protocol. Allow any excess to drip off prior to applying to wound or skin.

- ◆ **Lolly** minimum 15 ml
- ◆ **Pad (4" x 4")** minimum 40 ml
- ◆ **Pad (5" x 8")** minimum 110 ml

Always refer to local guidelines. Do not wring or cut.



Step 3

Grip the Debrisoft Pad (4" x 4"), insert your fingers into the pocket of the Debrisoft Pad (5" x 8"), or grip the Debrisoft Lolly by its ergonomic handle.

Gently with controlled pressure, use the soft, fleecy part of the product in circular motion or long sweeping strokes to disrupt and remove non-viable tissue, debris and biofilm from the wound bed or keratosis from surrounding skin.



Step 4

Dispose of used Debrisoft product with clinical waste.

Do not cut or re-use. Use a new Debrisoft for each separate wound or skin area.



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Debrisoft® Pad and Lolly sterile, individually-sealed

Size	Item No.	Shipping Units (per box/case)
Pad		
10 cm x 10 cm (4" x 4")	31222	5/50
13 cm x 20 cm (5" x 8")	34323	5/50
Lolly		
5 cm x 1.9 cm* (2" x 0.76")	33224	5/50

* Core width of the fiber head of Debrisoft® Lolly only



Sources

- Haemmerle, G., Duelli, H., Abel, M., Strohal, R. (2011), "The wound debrider: a new monofilament fibre technology", British Journal of Nursing, TV Supplement Vol. 20(6) March
- Bahr, S., Mustafi, N., Hattig, P., Piatkowski, A., Mosti, G., Reimann, K., Abel, M., Dini, V., Restelli, J., Babadagi-Hardt, Z., Abbritti, F., Eberlein, T., Wild, T., Bandl, K., Schmitz, M. (2010), "Clinical efficacy of a new monofilament fibre-containing wound debridement product", Journal of Wound Care, Vol 20 (5) May
- Schultz, G. (2015), "Effect of Debrisoft debridement of pseudomonas aeruginosa mature biofilm on pig skin explants", 2015 EWMA Conference, London, GB
- Cuttino, C., Weir, D. (2016), "Use of a Novel Device for Selective Mechanical Debridement of Chronic Wounds", 2016 SAWC Spring, Atlanta, USA
- Alridge, P., Brindle, T., D'Mello-Fernandes, V. (2015), "Gentle, Cost-Effective Debridement for All: The Microfiber Debridement Pad", 2015 SAWC Fall, Las Vegas, USA
- Attinger, C.E., et al. (2006), "Clinical approach to wounds: debridement and wound bed preparation including the use of dressings and wound-healing adjuvants.", Plastic and reconstructive surgery, 117(7): 72-109
- National Institute for Health and Care Excellence (2014), "The Debrisoft® monofilament debridement pad for use in acute or chronic wounds", NICE medical technology guidance MTG17, accessed: <https://www.nice.org.uk/Guidance/MTG17>
- Strohal, R., Apelqvist, J., Dissemmond, J. et al (2013), "EWMA Document: Debridement.", J Wound Care; 22(Suppl.1):p1-p52.
- van den Wijngaard, A., Hesseling, M. (2013), "A polyhexanide containing bio-cellulose dressing in the treatment of partial-thickness dermal burns - a case study", EWMA 2013, Copenhagen, Denmark



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