# Is standard care delivering substandard outcomes?

Meet the challenges of both open wound and closed incision care with the power of PICO Single Use Negative Pressure Wound Therapy (sNPWT).

## Smith-Nephew

PICO<sup>♦</sup> Single Use Negative Pressure Wound Therapy System

🞯 🙆 🕓 🐼

Samp the INCO pump at least 4 suches Obump away from other medical devices at at times, folkers to do as can cause the other medical devices to tak

# The human and economic burden of wounds

## 8+ million

Medicare recipients with chronic wounds<sup>1</sup>

## \$96+ billion

Annual Medicare expenditures for wound care<sup>1</sup>

## Surgical and diabetic wounds

Surgical and diabetic wound infections were the most prevalent, while surgical wounds and diabetic foot ulcers drove the highest costs<sup>1</sup>

Risk factors increase the odds of surgical site complications (SSCs), wound chronicity, and associated morbidity and mortality.<sup>2-7</sup>

- ObesitySmoking
- Diabetes
  - Hypertension
- Immune deficiency

### Prevent the wound complications you can. Kickstart progression in the ones you can't.

PICO° sNPWT is a pioneering negative pressure wound therapy system that raises the level of care:

- Indicated for use on closed surgical incisions and open wounds
- Manages low to moderate levels of exudate<sup>9-11</sup>
- Delivers compression-like therapy to the wound, wound margin and periwound<sup>12</sup>
- Canister-free and portable, which can improve patient mobility<sup>13,14</sup> and increase satisfaction rates<sup>15</sup>
- Provides therapy for up to 7 days with PICO 7/7Y and 14 days with PICO 14
- Waterproof dressing, allowing patients the ability to shower<sup>13</sup>

As compared to standard dressings, PICO has been shown to help:









Increase patient satisfaction rates<sup>8</sup>

7X Ot sui

Obesity raises the risk of surgical site infections (SSIs) by as much as seven times<sup>3-7</sup>

4x Patients ulcers ha increased

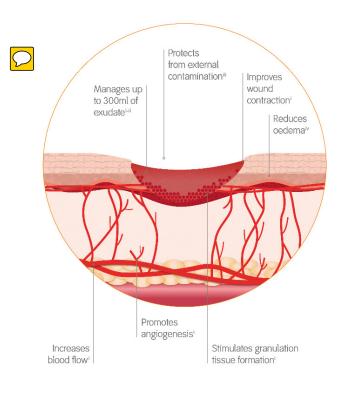
Reduce the risk of surgical site infections<sup>5,6</sup>

Reduce hospital readmissions<sup>7</sup>

Improve wound closure rates<sup>8</sup>

# Designed for a higher standard

PICO<sup>•</sup> features an exclusive mode of action that enables delivery of negative pressure wound therapy across the entire dressing to the wound or incision and periwound, while simultaneously removing exudate.<sup>19,20</sup>

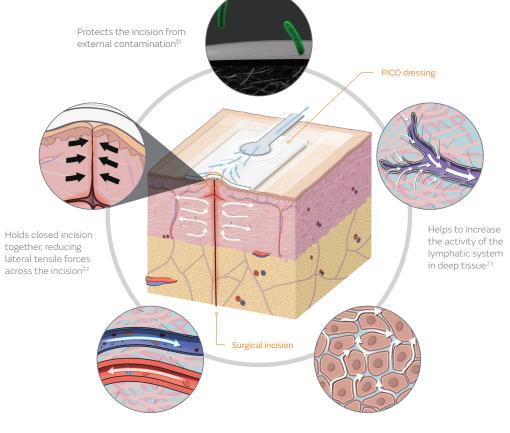


#### For high-risk surgical incisions, PICO:

- Protects the incision from external contamination<sup>21</sup>
- Holds incisions together, reducing lateral tensile forces across the incision<sup>22</sup>
- Helps to increase the activity of the lymphatic system in deep tissue<sup>23</sup>

### For complex open wounds, PICO:

- Protects the wound form external contamination<sup>21</sup>
- Improves wound contraction<sup>15</sup>
- Stimulates granulation tissue formation<sup>15</sup>



Maintains an efficient blood supply to the wound (perfusion), which helps to support the immune response<sup>25,26</sup>

Has been shown to increase the efficiency of functional lymph vessels, helping to reduce oedema<sup>25,27,28</sup>

# Open wound management powered by PICO<sup>\$</sup>

PICO sNPWT is a game changer for patients with open wounds of low to moderate exudate levels, especially with early intervention,<sup>29</sup> providing **uninterrupted, canister-free therapy** with or without a filler – for up to 7 days.

PICO has been shown in clinical studies to improve clinical outcomes of hard-to-heal wounds:

- In chronic wounds that responded to PICO sNPWT, wound size was shown to reduce by an average of 21% per week<sup>30</sup>
- Shown to help heal chronic wounds that responded six times faster

   reducing healing time by an average of 10 weeks, compared to that
   predicted with standard care<sup>30</sup>

In the treatment of lower extremity ulcers, a recent study comparing PICO with traditional NPWT demonstrated PICO to result in:

- 73.1% reduction in wound area<sup>15</sup>
- 48.1% reduction in wound depth<sup>15</sup>
- 48.6% reduction in wound volume<sup>15</sup>

In a study evaluating the benefit of early intervention, PICO sNPWT was shown to:

- Improve the healing trajectory of hard-to-heal wounds, when compared with standard care<sup>29</sup>
- Reduce dressing costs by a predicted 11.2% annually<sup>29</sup>
- Save an overall estimated cost of 33% on healed wounds and wounds on a healing trajectory compared with predicted care with standard dressings<sup>29</sup>

Faster healing than standard care

73.1% Wound area reduction

### Case study: Diabetic foot ulcer





Day 7: 30% reduction in wound volume, reduction in drainage

# Fewer SSCs More TGIFs

Implementing PICO<sup>o</sup> sNPWT as a prophylactic measure for high-risk patients undergoing a range of surgical procedures can help improve outcomes<sup>16</sup> – and give you more peace of mind.



## **Orthopedic surgery**

In orthopedic procedures such as total joint arthroplasty, PICO has been shown to reduce superficial SSCs by **76%**.<sup>27</sup>



### **Cesarean section**

Following cesarean section surgery, PICO 7 has been shown to:

- Reduce relative surgical site infections by 50%<sup>17</sup>
- Reduce relative exudate (versus standard of care) by 31%<sup>17</sup>



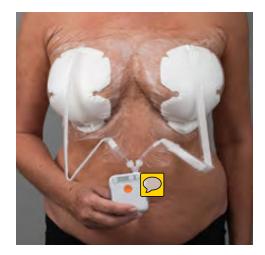
## Mammoplasty/Mastectomy

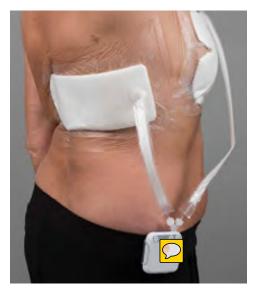
For breast surgery patients, **PICO 7Y** combines our unique mode of action with a dressing design that treats two wounds simultaneously and has demonstrated the potential to significantly reduce SSCs, dehiscence and surgical scar appearance (versus standard of care).<sup>31,32</sup>



### **Complex Procedures**

For more complex surgeries, such as coronary artery bypass grafting procedures and abdominal hysterectomies, **PICO 14** delivers the same benefits for high-risk patients, with a pump duration of up to 14 days to allow therapy for longer hospital stays.<sup>33, 34</sup>





PICO 7Y is a game changer for breast surgery incision care, combining our unique mode of action with a dressing design that treats two incisions simultaneously.

# Fewer complications More convenience

PICO<sup>◊</sup> sNPWT features an ultraportable, canister-free design that has been shown to increase patient satisfaction rates across the clinical spectrum:15

- May improve scar guality<sup>31,35-37</sup>
- Portable system allows patients the freedom to continue daily activities<sup>13</sup>
- Gentle adhesive makes application and removal easy<sup>13</sup> while minimizing pain<sup>10,36-39</sup>
- Waterproof dressing, allowing patients the ability to shower<sup>13</sup>
- Quiet system better enables patients to sleep<sup>13</sup>

### Clinically effective meets cost effective

\$646 PICO was estimated to reduce costs for high-risk savings coronary artery bypass grafting surgery by \$646 per patient<sup>40</sup>



**\$91** A suitable alternative to tNPWT for more than 88% of wounds treated in long-term healthcare facilities, enabling cost savings of up to \$91/day<sup>41</sup>

To learn more about the **PICO sNPWT portfolio and** to order products, visit: www.possiblewithpico.com

### **PICO Reimbursement Helpline**

1 888-705-0061 Monday - Friday 9:00 a.m. to 5:30 p.m. EST.

References: 1. Nussbaum, Samuel & Carter, Marissa & Fife, Caroline & DaVanzo, Joan & Haught, Randall & Nusgart, Marcia & Cartwright, Donna. (2017). An Economic Evaluation of the Impact, Cost, and Medicare Policy Implications of Chronic Nonhealing Wounds. Value in Health. 21. 10.1016/j.yal.2017.07.007. 2. Jährink K, Ni G, Sönnergren H, et al. The humanistic and economic burden of chronic wounds: a protocol for a systematic review. Syst Rev. 2017;6(1):15. Published 2017. Jan 24. 3. Choban PS, Heckler R, Burge JC, Flancbaum L. Increased Incidence of nosocomial infections in obese surgical patients. Am Surg. 1995;61(1):1001–1005. [PubMed] [Google Scholar] 4. Nagachina T, Stephens M, Reitz B, Polk BF, Rikk factors for surgical-site infection complicating laminectomy. Infect Ontrol Hosp Epidemiol. 2007;28(9):1060–1065. 6. Escandon, Julia & Vivas, Algandra & Tang, Jennifer & Rowland, Katherine & Kirsner, Robert. (2011). High mortality in patients with chronic wounds. Wound repair and regeneration : official publication of the Wound Healing Society (Jand) the European Tissue Repair Society. 19. 526-8. 10.1111/j.1524-475X.2011.00699-x.7. Darouiche R. Hospital Infection control: Surgical site Infections. Infections Disease Advisor. https://www.infectious/iseaseave/socrom/home/decision-gland output of the Society of Disease Advisor. https://www.infectious/iseaseave/socrom/home/decision-plasty.2014.146-15. 10. Data on File DS714076.7. Rummary Wound Model Report for Ogal PCO 7. January 2018 11. Data on File DS714076.7. Symmary Wound Model Report For Ogal PCO 7. January 2017. 15. Kirsner R, et al. Randomized controlle drait exite version (Wat Aray et advest duration against. Smarcescens; Hele Lumb, February 2011. 12. Smith & Nephew January 2018. Outcomes following PICO compared to conventional dressings when used prophylactically on closed surgical incisions: systematic literature review and meta-analysis. Internal Report. EO/ AWM/PICO/004/v1.13. Hurd, T, Tureman, P& Rossington, A. Use of portable, single use negative pres Wound J. 2017;14(4):649-657. **25**. Scalise A, Calamita R, Tartaglione C, et al. Improving wound healing and preventing surgical site complications of closed surgical incisions: a possible role of Incisional Negative Pressure Wound Therapy. A systematic review of the literature. Int Wound J. 2016;13(6):1260-1281 **26**. Malmsjö M et al. Biological effects of a disposable, canisterless Negative Pressure Wound Therapy system (in-vitro). ePlasty 2014; 14:e15. **271**. Karlakki S, Brem M, Giannini S, Khanduja V, Stannard J, Martin R. Negative pressure wound therapy for management of the surgical incisions: a plot study. Wounds. 2012;24(11):308-16. **29**. Dowsett C, Hampton K, Myers D, Styche T, Use of PICO to Improve clinical and economic outcomes in hard-to-heal wounds. Wounds International. 2017;8(2):52-58. **30**. Hampton J. Providing cost-effective treatment of hard-to-heal wounds in the community through use of NPWT. BT J Community Nurs. 2015; 20:514-59. **30**. Hampton J. Providing cost-effective treatment of hard-to-heal wounds in the community through use of NPWT. BT J Community Nurs. 2015; 20:514-59. **30**. Hampton J. Providing cost-effective treatment of hard-to-heal wounds in the community through use of NPWT. BT J Community Nurs. 2015; 20:514-59. **30**. Giano RD, Hudson D, Shin J, van der Hulst R, Tanayadin V, Djohan R, et al. Incisional Negative Pressure Wound Therapy for Prevention of Wound Healing Complications Following Reduction Mammaplasty Plastic & Reconstructive Surgery Global Open 2018; 6(1):e1560: 1-8. **32**. Galiano R et al. A prospective, randomized, intra-patient, comparative, open, multi-center study to evaluate the efficacy of a single use negative pressure wound therapy (NPWT) system on the prevention of Solici T-8. **32**. Galiano R et al. Philosci. **32**. Single J = 20:2000, 20:14:33. Oleary DP, Preirce C, Anglin B, et al. Prophylactic Negative Pressure Dressing Usea Torse Treatent of Postoperative Primarily Close Estimation SAW Counds Treated Using Negative Pressure Wound Therapy N: Prezegla Chirugic Adeyemi, Ayoade & Waycaster, Curtis. (2018). Cost-minimization Analysis of Negative Pressure Wound Therapy in Long-term Care Facilities. Wounds : a compendium of clinical research and practice. 30. E13-E15

**Advanced Wound Management** Smith & Nephew, Inc. Fort Worth, TX 76109 USA www.smith-nephew.com

www.possiblewithpico.com

**Customer Care Center** 1 800 441-8227 T 817 900-4000 F 817 900-4100

<sup>◊</sup>Trademark of Smith & Nephew. ©2019 Smith & Nephew, Inc.