Solutions for Venous Leg Ulcer Care Getting your patients back on their feet.



Let's talk about venous leg ulcers.

A venous leg ulcer (VLU) is an open skin lesion that usually occurs on the medial aspect of the lower leg between the ankle and the knee as a result of chronic venous insufficiency or ambulatory venous hypertension, and that shows little progress towards healing within 4-6 weeks of initial occurrence.¹



The impact of VLUs.

VLUs are the most common type of lower extremity wound, afflicting approximately 1% of the western population during their lifetime. VLUs also represent a significant burden for patients and healthcare systems.³

The Advantages of the 3M[™] Coban[™] 2 Two-Layer Compression System



per patient over 12 months

TLCCB = 3M[™] Coban[™] 2 Two-Layer Compression System, TLCS = KTwo, CIBR = Actico

Therapy goals for VLUs.

Venous leg ulcer management includes a combination of best practice skin and wound care principles with a therapeutic goal of reducing chronic edema and promoting wound healing:^{1,4,5}

- Periwound skin protection
- Identification and management of wound infection and suspected biofilm
- Exudate management
- Compression therapy

Compression therapy—the gold standard for VLU management.

Compression therapy has been shown to increase the rate of healing compared to no compression.³ Research indicates that a bandage or multi-layer compression system that is capable of creating an inelastic sleeve provides stiffness that effectively supports venous pump mechanisms.^{6,7}

- Additional hemodynamic effects of compression therapy include:^{2,8-10}
- Reduced venous ambulatory hypertension and venous pooling
- Improved venous and lymphatic return
- Reduced chronic edema and inflammation
- Reduced leg pain

Solventum Solutions for VLU Management.

Your patients count on you to help reduce the pain and discomfort caused by VLUs. It's possible when you employ best practices in compression therapy, skin and wound care to aid in their healing process.

Please refer to Instructions for Use prior to use.



A world leader in skin and wound care right by your side.

Our focus is on transforming outcomes through patient-centered science, providing you with the trusted solutions you need at every point in your patients' journeys. With Solventum as your partner for solutions, service and education, let's usher in a new era of wound and skin care together.



Science-based solutions

Solventum products are trusted in more than 60,000 hospitals, homes and businesses worldwide. Our comprehensive portfolio of active and advanced wound care solutions is supported by evidence across new and growing categories including dressings, disposables, and digital technology and connectivity.



Our support is designed to be seamless and efficient, from ordering, to placement, to therapy, through patient discharge. Ordering is easy with online ordering and scheduled same-day delivery (where available), and our team is available to assist you with onsite clinical and technical support.



We act as a resource extension for your team—empowering you with hands-on training and award-winning education.

NOTE: Specific indications, contraindications, warnings, precautions and safety information exist for these products and therapies. Please consult a clinician and product Instructions for Use prior to application. This material is intended for health care professionals.

References:

- 1. Harding K. et al. Simplifying venous leg ulcer management. Consensus recommendations. Wounds International. 2015;10-11.
- Guest JF, Fuller GW. Relative cost-effectiveness of three compression bandages in treating newly diagnosed venous leg ulcers in the UK. J Wound Care. 2023 Mar 2;32(3):146-158. doi: 10.12968/ jowc.2023.32.3.146. PMID: 36930185.
- O'Donnell TF, Passman MA, Marston EA, et. al. Management of venous leg ulcers: Clinical practice guidelines of the Society for Vascular Surgery[®] and the American Venous Forum. Journal of Vascular Surgery. 2014; 60(2), 3S-59S.
- 4. Wound, Ostomy, and Continence Nurses Society. (2019). Guideline for management of wounds in patients with lower-extremity venous disease. Mt. Laurel, NJ: Author.
- 5. Mosti G, Partsch H. Measuring venous pumping function by strain-gauge plethysmography. International Angiology. 2010; 29 (5):421-425.
- 6. Partsch H. The Static Stiffness Index: A Simple Method to Assess the Elastic Property of Compression Material In Vivo. Dermatol Surg. 2005; 31:625-630.
- 7. Partsch H, and Mortimer P. Compression for leg wounds. British Journal of Dermatology. 2015 (173): 359-369.
- 8. Partsch H, Moffatt C. An overview of the science behind compression bandaging for lymphoedema and chronic oedema. Compression Therapy: A Position Document on Compression Bandaging. International Lymphoedema Framework in Association with the World Alliance for Wound and Lymphoedema Care. 2012; 12-22.
- 9. Moffatt C, Partsch H, Schuren J, et al. Compression Therapy. A position document on compression bandaging. The International Lymphoedema Framework. 2012.
- 10. Mosti G. Venous ulcer treatment requires inelastic compression. *Phlebologie* 2018. 47(01): 7-12.

Contact your local Solventum representative for more information.



Solventum Medical Surgical 3M Center, Building 275 2519 Conway Avenue East St. Paul. MN 55144-1000

Phone 1-800-275-4524 (NPWT products) 1-800-228-3975 Web Solventum.com © Solventum 2024. All Rights Reserved. Solventum and the S logo are trademarks of Solventum or its affiliates. 3M and the 3M logo are trademarks of 3M. Other trademarks are the property of their respective owners. US_70-2013-1471-6