


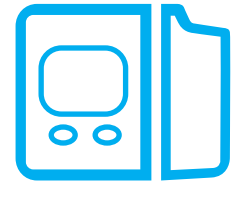
# Bringing a new certainty to wound care

## Proven therapy

In these uncertain times, management of wounds can't wait. Using trusted and proven treatment modalities is important now, more than ever. 3M provides the products, programs and partnership to support healthcare providers and patients which enables you to focus on delivering the clinical and economic outcomes you need, with safety and confidence your patients can trust.

 **10M** wounds treated worldwide  
3M™ V.A.C.® Therapy<sup>1</sup>


 **More than 75%** of published NPWT clinical evidence is based on 3M™ V.A.C.® Therapy<sup>2</sup>

 **25 years** of transformative technology in Negative Pressure Wound Therapy (3M™ V.A.C.® Therapy) leadership

 **1,700+** publications<sup>3</sup>

### 3M™ V.A.C.® Therapy has been associated with fewer:

-  Hospitalizations<sup>4,5</sup>
-  Amputations<sup>7,8</sup>
-  Complications<sup>5,6</sup>
-  Dressing changes<sup>9,10</sup>

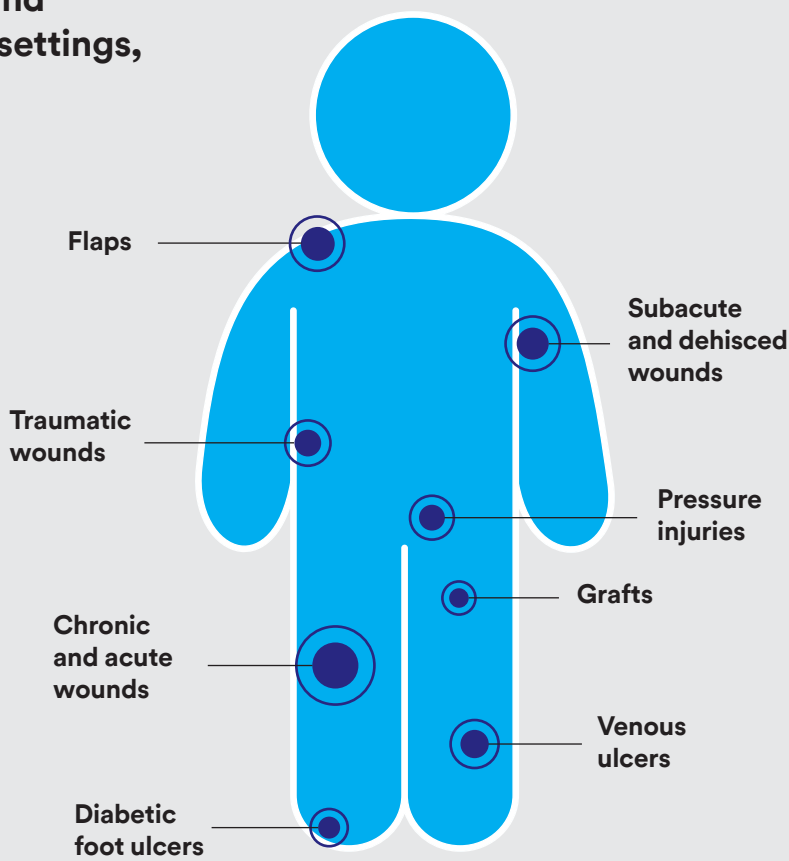
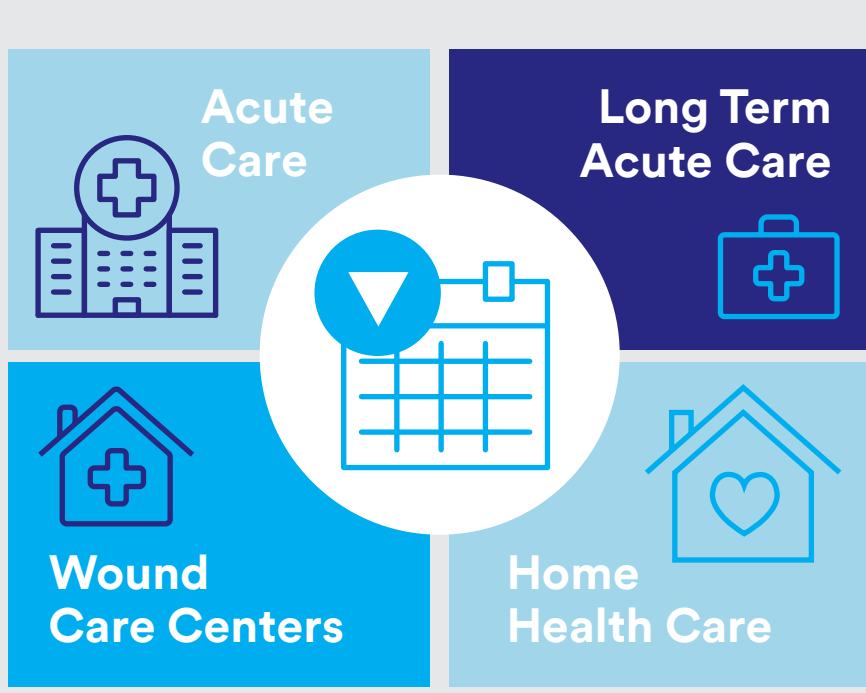
 **Shorter** hospitalization time<sup>7,8</sup>

 **Reduced** treatment times<sup>11,12</sup>

## Your patients can't wait

### Manage wounds with certainty when it matters most.

Benefits of early initiation of 3M™ V.A.C.® Therapy on **acute and chronic wounds of many types and sizes in multiple care settings**, have been demonstrated by **reduced length of stay** in:<sup>13-15</sup>



### What would 178 fewer days mean to your patients?

In a retrospective analysis of 3,604 patients, when 3M™ V.A.C.® Therapyx was initiated early in **acute and chronic wounds of varying size**, treatment time period compared to late initiation, the median days to reach significant closure (75% WSA [wound surface area reduction]) were:<sup>16\*</sup>

**Fewer 41.4 days** for acute wounds **Fewer 178 days** for chronic wounds

Additionally, the early group was **twice as likely** to reach 75% WSA reduction as the late group **for both acute and chronic wounds**.

In addition, improved WSA reduction was observed for **all sizes of acute and chronic wounds** with early treatment.<sup>16</sup>

### Early initiation of NPWT helps reduce total cost of care.



A retrospective analysis conducted in the US on a national insurance provider's medical claims data examined 6,181 acute and 1,480 chronic wound patients that received NPWT from January 1, 2009 to June 30, 2011 showed:<sup>17</sup>

**Patients with chronic wounds treated early vs. late had:<sup>17</sup>**

**25% lower** total estimated costs (£52,882 vs £70,468\*\*, p<0.001)

**Patients with acute wounds treated early vs. late had:<sup>17</sup>**

**17% lower** total estimated costs (£41,532 vs £50,504\*\*\*, p<0.001)

\*\*Based on a cost of \$70,016 vs \$93,289.  
\*\*\*Based on a cost of \$54,899 vs \$66,865.  
Exchange rates from USD to GBP correct as of Aug 2020

## Support you and your patients can rely on

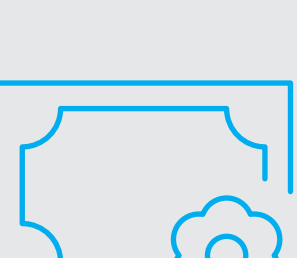
**You need more than a product, you need a trusted partner.** 3M is here to provide help to you and your patients when you need it.



**3M Guidance**  
Contact your 3M Customer Representative for product, ordering and application guidance including virtual education options for your staff, and troubleshooting support for your patients.



**24/7 Clinical & Technical Support**  
24/7 clinical support directly to patients and clinicians for questions about safety, clinical guidelines and troubleshooting dressing applications. Technical support for using 3M Therapy Units, such as buttonology, instructions on changing a full canister, or questions about charging the unit.



**3M™ Health Care Academy**  
3M™ Health Care Academy offers online continuing education for healthcare professionals and contains over 50 free courses. This education resource is dedicated to helping you focus on deepening your expertise and improving patient care.  
**For more information visit: 3M.com/learningconnection**

For clinical, ordering or technical support, please contact your 3M Health Care Account Manager, or visit **3M.com**.

\***Early:** Acute wounds defined as NPWT initiated within the first 7 days. Chronic wounds defined as NPWT initiated within first 30 days. **Late:** NPWT initiation occurred after these time periods. Statistically significant (p<0.0001) reduction in days to reach 75% WSA in all chronic wounds evaluated (96.4 days vs 274.6 days).

**References:**

- KCI. Cumulative NPWT Wounds. 2018.
- KCI. Percentage of V.A.C. Therapy Articles vs. Comp Articles. May 7, 2020.
- KCI. Current V.A.C.® Therapy publication numbers as of June 2020.
- Page JC, Newswander B, Schwenke DC, Hansen M, Ferguson J. Retrospective analysis of negative pressure wound therapy in open foot wounds with significant soft tissue defects. *Advances in Skin and Wound Care*. 2004;17:354-364.
- Scherer LA, Shiver S, Chang M, Meredith JW, Owings JT. The vacuum assisted closure device: a method of securing skin grafts and improving graft survival. *Arch Surg*. 2002;137:930-934.
- Falagas ME, Tansarli GS, Kapaskelis A, Vardakas KZ. Impact of vacuum-assisted closure (VAC) therapy on clinical outcomes of patients with sternal wound infections: a meta-analysis of non-randomized studies. *PLoS One*. 2013 May 31;8(5):e64741.
- Blume PA, Walters J, Payne W, Ayala J, Lantis J. Comparison of negative pressure wound therapy using vacuum-assisted closure with advanced moist wound therapy in the treatment of diabetic foot ulcers: a multicenter randomized controlled trial. *Diabetes Care*. 2008;31:631-636.
- Armstrong DG, Lavery LA, Diabetic Foot Study Consortium. Negative pressure wound therapy after partial diabetic foot amputation: a multicentre, randomised controlled trial. *Lancet*. 2005;366:1704-1710.
- Monsen C, Acosta S, Mani K, Wann-Hansson C. A randomised study of NPWT closure versus alginate dressings in peri-vascular groin infections: quality of life, pain and cost. *J Wound Care*. 2013;24(5):1-8.
- Ozturk E, Ozguc H, Yilmazlar T. The use of vacuum assisted closure therapy in the management of Fournier's gangrene. *Am J Surg*. 2009;197:660-665.
- Sinha K, Chauhhan VD, Maheshwari R, Chauhan N, Rajan M, Agrawal A. Vacuum assisted closure therapy versus standard wound therapy for open musculoskeletal injuries. *Adv Orthop*. 2013;2013:245940.
- Dalla Paola L, Carone A, Ricci S, Russo A, Ceccacci T, Ninkovic S. Use of vacuum assisted closure therapy in the treatment of diabetic foot wounds. *Journal of Diabetic Foot Complications*. 2010;2:33-44.
- Baharestani MM, Driver VR. Optimizing clinical and cost effectiveness with early intervention of V.A.C.® Therapy. *Ostomy Wound Manage*. 2008;54(11 Suppl):1-15.
- Baharestani MM, Houliston-Otto DB, Barnes S. Early versus late initiation of negative pressure wound therapy: examining the impact home care length of stay. *Ostomy Wound Manage*. 2008; 54(11 Suppl):48-53.
- Driver VR, de Leon JM. Health economic implications for wound care and limb preservation. *J Managed Care Med*. 2008; 1(11):13-19.
- Miller-Mikolajczyk C, MStat RJ. Real world use: comparing early versus late initiation of negative pressure wound therapy on wound surface area reduction in patients at wound care clinics. Poster presented at The Wound Ostomy and Continence Nurses Society Annual Conference, June 22-26, 2013. Seattle, Washington.
- Law A. Economic value with V.A.C.® Therapy: Effect of early versus late initiation of negative pressure wound therapy on total treatment and wound-related costs. Analysis conducted on insurance claims data by Axia Ltd. 2015.

**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 healthcare professionals.