



# A Simple Solution For Leg Ulcer Care



## Simpler Wound Management, Without Compromise

## Leg Ulcer Burden - a growing problem



According to Guest et al in total, there were 1 million ulcers of the lower limb, which equates to 2% of the adult population having a lower limb ulcer in the study year<sup>14</sup>



Only 16% of all those with a leg or foot ulcer had a Doppler ankle brachial pressure index (ABPI) recorded<sup>14</sup>

**59%**

An estimated 59% of chronic wounds healed if there was no evidence of infection<sup>14</sup>



The annual NHS cost of managing wounds is estimated to be £8.3 billion pounds<sup>14</sup>

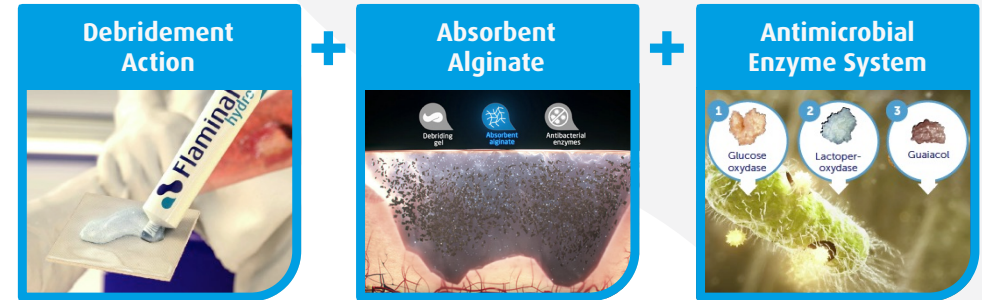


The National Wound Care Strategy recommendations for lower limb advises that when appropriate, people with leg and foot wounds should be supported to self-care<sup>15</sup>



Patient education helps patients to adhere to their treatment and can increase confidence to take on additional components of management<sup>2</sup>

## What is Flaminal®?



A versatile, unique dressing designed to simplify leg ulcer wound management

- ✓ Speeds up the healing time<sup>1,9</sup>
- ✓ Manages moisture balance<sup>4</sup>
- ✓ Continuously debrides the wound<sup>4,5</sup>
- ✓ Reduces bacteria released from biofilm<sup>3,6\*</sup>
- ✓ Helps minimise patients' pain and discomfort<sup>9,10</sup>
- ✓ Non-cytotoxic<sup>3</sup>
- ✓ Comfortable & easy to apply even in the most difficult areas<sup>5,7</sup>
- ✓ Can be used throughout all stages of the healing trajectory<sup>5</sup>
- ✓ Better scar quality<sup>1</sup>
- ✓ Reduces wound odour caused by bacteria<sup>5,8</sup>

\* Bacteria are absorbed into the Flaminal® gel structure and killed



# Flaminal®- Improving outcomes in Leg Ulcers<sup>11</sup>

Flaminal® in the management of Bilateral ulceration caused by Cutaneous Vasculitis<sup>11</sup>

Day 1

Day 10

6 Months



#### Patient:

- 48 year old woman
- 10 month history of bilateral circumferential ulceration caused by cutaneous vasculitis

#### Treatment aims:

- Reduce wound bioburden (Staphylococcus Aureus)
- Debride slough
- Manage exudate
- Prevent peri wound maceration
- Control pain
- Prevent hospital admission

#### Treatment:

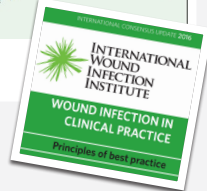
- Flaminal® Forte
- Non adherent secondary dressing
- Covered with super absorbent dressings
- Compression bandaging
- Dressing changes 3X a week in outpatient clinic

#### Results & Outcome

- Within 10 days fibrous slough was liquifying and autolytically debriding, which continued over next 5 months
- The peri wound skin improved as the bioburden and exudate levels reduced
- Pain was controlled and she felt she regained her quality of life

## Flaminal®: Reduction in Bioburden & Biofilms<sup>12</sup>

| Antimicrobial agent | Type   | Biofilm efficacy   | Guidance for use   |
|---------------------|--|--|--|
| Enzyme alginate gel | Alginate gel with two enzymes:<br>Lactoperoxidase<br>Glucose oxidase | Prevents formation of biofilms at concentration MO.5% (w/v) <sup>12,13</sup><br>Inhibits growth of established biofilms at higher concentrations | Concentrations of alginate of 3% and 5% depending on level of exudate <sup>12,13</sup> |



# Flaminal® Optimal Wound Healing -The Evidence



DEFEND

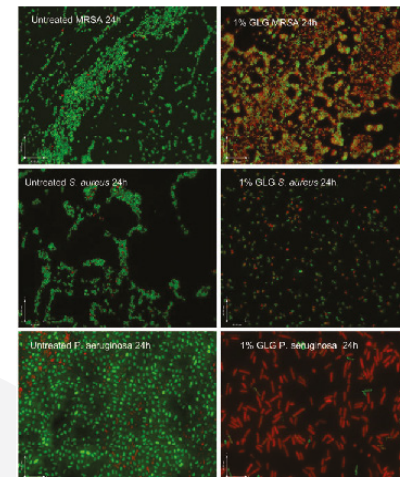
GLG-enzyme system combines effective control of microbial bioburden with non-cytotoxicity<sup>3</sup>

#### Effects of GLG enzymes system on 12 strains of Gram + and Gram - bacteria

- Successful in killing wide range of antibiotic-resistant bacterial strains
- Killed in 6 hours of incubation or less in vitro

| Gram | Bacteria                     | Killed within 6 hours |
|------|------------------------------|-----------------------|
| +    | Staphylococcus aureus (MRSA) | ✓                     |
|      | Enterococcus faecium         | ✓                     |
|      | Enterococcus faecalis        | ✓                     |
| -    | Escherichia coli             | ✓                     |
|      | Klebsiella oxytoca           | ✓                     |
|      | Enterobacter cloacae         | ✓                     |
|      | Enterobacter aerogenes       | ✓                     |
|      | Burkholderia multivorans     | ✓                     |
|      | Pseudomonas aeruginosa       | ✓                     |
|      | Stenotrophomonas maltophilia | ✓                     |
|      | Pandoraea apista             | ✓                     |
|      | Achromobacter denitrificans  | ✓                     |

## Flaminal® can prevent formation of biofilms and inhibit established biofilms in vitro<sup>6</sup>



#### Effects of GLG enzyme system on biofilms of Staphylococcus aureus, methicillin-resistant S.Aureus and Pseudomonas aeruginosa

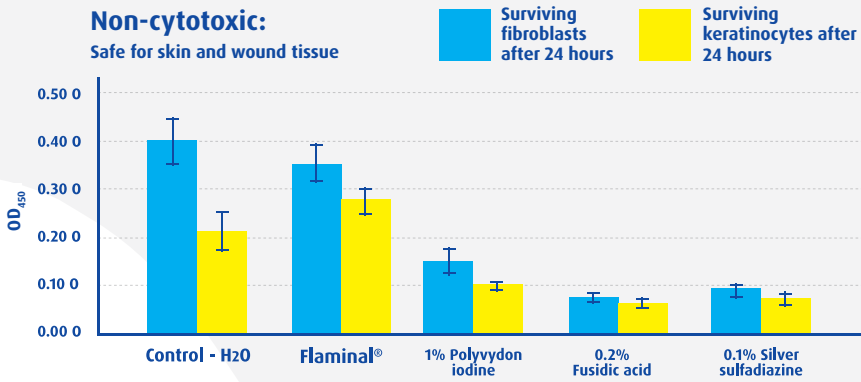
- Antibacterial component in Flaminal® can prevent the formation of biofilms and inhibit established biofilms in vitro (green=living biofilm, red=dead biofilm)



## PROTECT

### Flaminal® safe for skin and wound tissue<sup>3</sup>

**Non-cytotoxic:**  
Safe for skin and wound tissue



#### Effects of GLG enzyme system on keratinocytes and fibroblasts

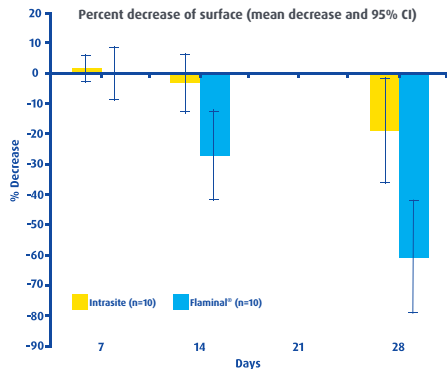
- Flaminal® significantly higher cell survival compared to other dressings in vitro
- Flaminal® shown to be non-cytotoxic.

## IMPROVE

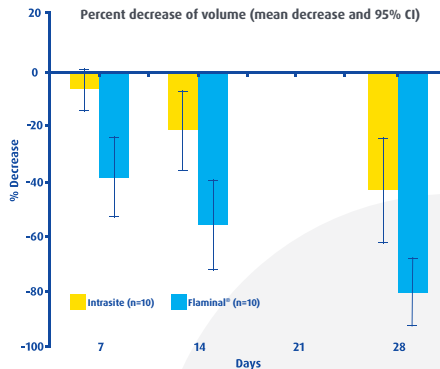
### Flaminal® reduces wound size and volume over 28 days in chronic leg ulcers<sup>13</sup>

Comparing healing properties of Flaminal® vs Intrasite® on chronic leg ulcers over 28 days with two parallel groups of 10 patients

- Reduction of wound surface and wound volume were superior with Flaminal®



A significant difference is observed at day 14 and at day 28 (P < 0.01)



A significant difference is observed at day 7 (P < 0.001), day 14 (P < 0.001) and day 28 (P < 0.01)

## Flaminal® Hydro or Forte - Which one should I use?



Perform wound cleansing and debridement techniques as per local/national guidelines

How wet is the wound? Consider the moisture balance - does it need moisture adding or moisture absorbing?

Slight to moderate exudate

**FLAMINAL® HYDRO**  
3.5% Alginate

Moderate to heavy exudate

**FLAMINAL® FORTE**  
5.5% Alginate

Apply Flaminal®  
Cover the wound with a sufficiently thick layer (0.5cm)



Apply with a nozzle



Apply with a spatula



Apply with a syringe



Direct from the tube



Cover with your choice of dressing. This depends on the amount of exudate.

Change the dressing if exudate strikes through and check the status of the ulcer regularly for deterioration. Flaminal® can remain in place as long as the gel structure is intact (1 to 4 days).

### Ordering Information



| PACK SIZE     | PIP CODE | NHS CAT NO. |
|---------------|----------|-------------|
| 5 x 15g tubes | 324-2971 | ELG021      |
| 1 x 50g tube  | 344-9600 | ELG025      |
| 500g tub      | -        | ELG029      |

| PACK SIZE     | PIP CODE | NHS CAT NO. |
|---------------|----------|-------------|
| 5 x 15g tubes | 324-2963 | ELG022      |
| 1 x 50g tube  | 344-9592 | ELG023      |
| 500g tub      | -        | ELG028      |

Once opened, and if recapped carefully, a tube of Flaminal® (Hydro or Forte) can be stored at room temperature and used for 12 months. A jar of Flaminal® (Hydro or Forte) 500 g however can be used for one week after its first opening. A pack of Flaminal® (Hydro or Forte) will be used for one patient only (multiple use - single patient).

Advice leaflets are a valuable tool that can build on the interaction between a clinician and the individual with the leg ulcer. An advice sheet that incorporates a self-help section can aid the person with the ulcer in their self care<sup>16</sup>

Please contact your local representative or [info@flenhealth.com](mailto:info@flenhealth.com) for further information on our Flaminal® leg ulcer shared care guide for patients.



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