



Highly breathable film¹

Absorbent hydrocellular foam

Adhesive non-adherent²
wound contact layer



 **smith&nephew**
ALLEVYN[®]
Adhesive

ALLEVYN[®] Adhesive delivers fluid management via the unique triple-action technology which absorbs, retains and transpires the optimal balance of fluid^{1,2,3} to promote moist wound healing³:

- A highly breathable top film¹ helps to minimise the risk of maceration to the wound and peri-wound⁴ as well as providing an effective barrier to bacteria to minimise the risk of contamination⁵
- Low allergy adhesive⁶ helps to keep the dressing securely in place without adhering to the wound²
- High conformability to body contours helping to ensure patient comfort^{2,4,7,8}
- Available in a wide range of sizes which can be cut to fit awkward areas
- Sacral sizes available which combine the same high-absorbency and secure self-adhesion in an anatomically-shaped dressing.

Indications

ALLEVYN Adhesive is indicated for wound management by secondary intention on shallow, granulating wounds, chronic and acute exudative wounds, full and partial thickness wounds such as pressure ulcers, diabetic foot ulcers, leg ulcers, fungating wounds, infected wounds, malignant wounds, surgical wounds, donor sites and 1st and 2nd degree burns.

Application

Cleanse the wound in accordance with normal procedures. Select appropriate dressing size.

Prepare and clean the skin surrounding the wound area and remove excess moisture. Any excess hair should be clipped to ensure close approximation to the wound. NO-STING SKIN-PREP[®] wipes may be used prior to application of ALLEVYN Adhesive where fragile skin is involved.

Remove one of the protector films and anchor the adhesive side of the dressing to the skin.

Remove the remaining protector film and smooth the dressing over the remainder of the wound without stretching, ensuring there are no creases. The pad area of the dressing must be adhered across the entire surface of the wound.

ALLEVYN Adhesive can be cut to dress wounds on the heel, elbows and other awkward areas. Always use a clean technique when cutting the dressing. If the dressing has been cut ensure any exposed foam areas are covered with an appropriate film dressing taking care not to cover the entire dressing.

Ordering codes

Code	Size	Pieces per Carton
66000043	7.5cm x 7.5cm	10
66000599	10cm x 10cm	10
66000044	12.5cm x 12.5cm	10
66000045	17.5cm x 17.5cm	10
66000046	22.5cm x 22.5cm	10
66000744	12.5cm x 22.5cm	10
66000700	17cm x 17cm Sacral	10
66000451	22cm x 22cm Sacral	10

References

1. Data on file report 0601003. Comparison of the permeability of old ALLEVYN Adhesive and new modified ALLEVYN Adhesive. David Foster and Ana Rial. February 2006.
2. Bale S, Squires D, Varnon T, Walker A, Benbow M, Harding KG. A comparison of two dressings in pressure sore management. J Wound Care 1997; 6(10): 463 – 466.
3. The composite structure of ALLEVYN Adhesive allows a moist wound environment to be maintained at the wound surface. The moisture is held in the open pores in the foam. As the dressing becomes saturated and the moisture reaches the backing film the excess moisture is removed through this layer.
4. Cassino R, Ricci E, Carusone A, Mercanti A. A conformable hydrogel in the debridement of complex necrotic wounds. EWMA; 1997.
5. Data on file report 0607022. An *in-vitro* assessment of the bacterial barrier properties of ALLEVYN Adhesive. D. Smith. July 2006.
6. A human repeat insult patch test with adhesive materials. Inveresk Research International. Report No 3524. June 1986.
7. Avanzi R, Martinelli R, Accardi S, Giraudi C, Peroli P, Rowan S *et al*. Adhesive hydrocellular dressing vs hydrocolloid dressing in the treatment of 2nd and 3rd degree pressure ulcers. B. Harding Kg, Bales S. A randomised clinical study to evaluate and compare the performance of ALLEVYN Adhesive and TielletM dressings in the management of exuding wounds in the community. Smith & Nephew Healthcare.

Frequency of change

During the early stages of wound management ALLEVYN Adhesive should be inspected according to local clinical protocol. Where the product is used on infected wounds the infection should be inspected and treated as per local clinical protocol. Dressings can be left in place for up to 7 days, except the sacral area where dressings can be left in place for up to 5 days, depending on the condition of the wound and the surrounding skin or until exudate is visible and approaches to within 2cm of the edge of the dressing pad, whichever is sooner. The decision of when to change should be dependent upon clinical assessment and local protocols should also be taken into consideration.

Removal

To remove ALLEVYN Adhesive, lift one corner of the dressing and slowly peel back until completely removed from the wound. Sacral dressings should be removed from the top edge and down towards the anus to minimise the chance of transmitting infection.

Precautions

Do not use ALLEVYN Adhesive with oxidising agents such as hypochlorite solutions (e.g. EUSOL) or hydrogen peroxide, as these can break down the absorbent polyurethane component of the dressing. If reddening or sensitisation occur discontinue use. ALLEVYN Adhesive is a single use product. In common with all adhesive products, some cases of irritation and/or maceration of the skin surrounding the wound have been reported. Infrequently cases of sensitivity to the dressing have been reported. It should be noted that inappropriate use or too frequent dressing changes, particularly on patients with fragile skin, can result in skin stripping. If reddening or sensitisation occur, discontinue use.



ALLEVYN - Proud to put people first

For patients. For budgets. For today.[®]

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