

+ Skin care is deeper than you think

Helping to maintain skin integrity

Safe and effective for the management of moisture related skin damage, whilst also preventing and protecting skin from Incontinence-Associated Dermatitis and moisture lesions



PROSHIELD[◊]
Skin Care

Smith+Nephew

Helping you get **CLOSER TO ZERO[◊]**
delay in wound healing



Incontinence is one of the major risk factors for the development of skin breakdown

The main barrier of the skin is the outer layer – **stratum corneum**, it goes through a constant renewal process to maintain the integrity of the skin barrier. A healthy skin surface is acidic with a **pH between 4-6**, this plays a vital role in the skin's barrier function by helping regulate the bacteria on the skin and ensuring the optimal stratum corneum cohesion and barrier function.

When the skin is exposed to urine and or feces, the skin becomes more alkaline as the bacteria on the skin convert the urea in urine to ammonia which is alkaline. Feces contain enzymes that have been shown to be more damaging to the skin and they are more active at a higher pH.¹

This leaves **4.6 million Australians** living with urinary or fecal incontinence - that's **over 20%** of the population with vulnerable skin. The prevalence of incontinence is known to increase with age, more than half of the individuals are aged 50 years and above. With an ageing population, these figures are only going to keep increasing.²

Together with incontinence, the look and function of the skin changes as we age-increasing in pH, resulting in higher rates of skin complaints.³



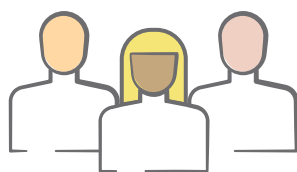
Incontinence-Associated Dermatitis

Incontinence-Associated Dermatitis (IAD) is a skin condition that affects people who are incontinent - resulting in inflamed, excoriated, infected and damaged skin when it is exposed to urine or faeces. This condition causes pain, discomfort, burning, itching or tingling in the areas that are affected. IAD reduces quality

of life and many times can be difficult to be correctly diagnosed. It often gets mistaken as stage 1/2 pressure injuries, or contact dermatitis. Misdiagnosis has potentially serious implications if the person doesn't not receive the appropriate treatment.⁴



\$169 AUD to treat IAD episode⁵



4.6 million Australians are incontinent and at risk of IAD²



Highest prevalence in acute care has been found in ICU⁶

The development of IAD adds to the burden of care, further stretching resources, adding to costs. On average one mild to moderate IAD episode can cost \$169 to treat.⁵

IAD affects all age groups, and can be found in incontinent individuals in the community, long term and acute care settings. In acute care settings, the prevalence of IAD in was found to be as high as 50% amongst the critically ill (ICU).⁶

There is evidence to show that with the presence of IAD there is significantly increased likelihood of the development of perineal infections or sacral pressure injuries. The pressure injury risk increases as the severity of IAD increases.⁷

The 2019 International Pressure Injury clinical guidelines recommends a structured skin care regime for pressure injury prevention that includes cleansing the skin promptly after any episode of incontinence, avoiding the use of alkaline soaps/cleansers and protecting the skin from moisture with a barrier product.⁸



Poor skin condition and/or incontinence can often be a contributing factor to pressure injury development.⁷

PROSHIELD[◇] range helping to maintain skin integrity

For use on intact and injured skin associated with incontinence⁹⁻¹²



Safe and effective for the management of moisture related skin damage¹¹⁻¹²



A study using the PROSHIELD range showed a 26% reduction in pressure injury and IAD¹⁰ vs standard of care



Helps prevent and protect skin from IAD and moisture lesions^{9,11,12}



For best results, use Dual PROSHIELD System: Cleanser & Protectant

PROSHIELD[◇] PLUS Skin Protectant

Smooth, viscous and fragrance free
moisture barrier.^{13,14}



Helps protect skin against
IAD and moisture lesions^{9,11,12}



Safe and effective for the
management of moisture
related skin damage^{9,11,12}



Moisturises and conditions
the skin^{12,14}

- Easy to apply, remove and use¹⁵
- Helps maintain skin integrity by protecting skin from exposure to bodily fluids such as faeces and urine^{9,11,12}
- Moisturises and protects severely dry skin
- Protects peri-wound skin^{9,11,12}
- Helps prevent and temporarily protects chafed, chapped, or cracked skin^{*9,11,12}

Easy to remove with PROSHIELD
Foam & Spray Cleanser




*With evidence from incontinence-associated dermatitis and moisture lesions

PROSHIELD[◊] Foam & Spray Incontinence Cleanser


Effective prevention and management of moisture lesions and IAD without rinsing or the use of a moisturiser, when used with PROSHIELD PLUS skin protectant.^{9-11, 16}



Contributed to prevention of pressure injuries and IAD¹⁶



pH balanced¹⁷





Formulated to help eliminate odour¹⁸

- 26% reduction in the incidence of pressure injuries and IAD was seen in a study, when used with PROSHIELD PLUS Skin Protectant compared to standard care¹⁶
- Formulated to help eliminate odour and break down dried stool, reducing the need to scrub delicate tissue¹⁸
- Foam and spray modes
- For removing urine and faeces, dried blood, post-operative antiseptic solutions and other hard to remove debris from patients



For best results, use Dual PROSHIELD System: Cleanser & Protectant

Product ordering codes

	Product Code	Description
	8213-0150-08	PROSHIELD ^o Foam & Spray Skin Cleanser 235ml
	8213-0300-04	PROSHIELD PLUS Skin Protectant 115g

Smith & Nephew Pty Ltd
Australia
T +61 2 9857 3999
F +61 2 9857 3900
smith-nephew.com/australia

Smith & Nephew Ltd
New Zealand
T +64 9 820 2840
F +64 9 820 2841
smith-nephew.com/new-zealand

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For detailed product information, including indications for use, contraindications, precautions and warnings, please consult the product's applicable Instructions for Use (IFU) prior to use.

References

1. 2015 Beeckman D et al. Proceedings of the Global IAD Expert Panel. Incontinence associated dermatitis: moving prevention forward. Wounds International 2015. Available to download from www.woundsinternational.com
2. 2011 Deloitte Access Economics - The economic impact of incontinence in Australia https://continence.my.salesforce.com/sfc/p/#A0000000KUC9/a/0f000000Hbwi/9ElyXwlgDG7.s2n1CW0jeC_ZqiBkvcvjCmSmoD1j0mc
3. 2017 Beeckman D. A decade of research on Incontinence-Associated Dermatitis (IAD): Evidence, knowledge gaps and next steps. Journal of Tissue Viability (26) 47-56
4. 2015 Beeckman D et al. Proceedings of the Global IAD Expert Panel. Incontinence associated dermatitis: moving prevention forward. Wounds International 2015. Available to download from www.woundsinternational.com
5. 2007 Bliss D, et al. An Economic Evaluation of Four Skin Damage Prevention Regimens in Nursing home residents with Incontinence. Journal of Wound Ostomy Continence Nursing (34) 143-152
6. 2018 McNichol, L et al. Incontinence-Associated Dermatitis: State of the Science and Knowledge Translation Advances in Skin & Wound Care: November 2018 - Volume 31 - Issue 11 - p 502-513
7. 2018 Gray, M et al. Incontinence-Associated Dermatitis, Characteristics and Relationship to Pressure Injury A Multisite Epidemiologic Analysis Journal of Wound, Ostomy and Continence Nursing: [January/February 2018 - Volume 45 - Issue 1 - p 63-67](#)
8. European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel and Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline. Emily Haesler(Ed.) 2019
9. Flynn D, Williams S. Barrier creams for skin breakdown, Nursing & Residential Care. 2011; 13 (11): 553-558.
10. Wall L, Vernon T. Launch of a Skin Care Regime to reduce the incidence of Moisture Associated Skin Damage. Doncaster and Bassetlaw NHS Foundation Trust. Presented at TVS, UK, 2016.
11. Maxwell J, Sinclair D. Treatment of moisture related lesions in children. Great Ormond St Hospital for Children NHS Foundation Trust, London UK. Poster presented at EWMA 2012, Vienna, Austria.
12. Meuleneire, F. A new solution in the treatment of moisture lesions. AZ St Elisabeth Zottegem, Belgium. Presented at EPUAP 2010.
13. Data on File – Anderson, Larry, R&D/CMC (Forth Worth), Does Not Contain Ingredients Certification 11 Feb 2016 – PROSHIELD Foam & Spray incontinence cleanser.
14. Smith & Nephew 2019. Verification Report for the Viscosity of PROSHIELD PLUS Skin Protectant. U/064/R3.
15. Howers L, Boyett F. Evaluation of PROSHIELD PLUS in nursing homes for inclusion onto formulary in a healthcare trust. NHS Surrey. Presented at Wounds UK 2012.
16. Wall L, Vernon T. Launch of a Skin Care Regime to reduce the incidence of Moisture Associated Skin Damage. Doncaster and Bassetlaw NHS Foundation Trust. Presented at TVS, UK, 2016
17. Commercial Stability Report, Test Point 24: PROSHIELD Foaming Cleanser 8oz. 2016.
18. Technical file PROSHIELD Foam & Spray incontinence cleanser (product formulation/specifications).