



**LEADING
WITH DRYNESS.**

Ultrasorbs® Drypads

Effective Moisture Management Products for Promoting Skin Integrity

Skin Breakdown Is a Common, Costly and Painful Problem.

The need for protection is real.

As a caregiver, you encounter many different skin conditions. Among the most common are those caused by prolonged exposure to moisture: incontinence-associated dermatitis, intertriginous dermatitis or periwound moisture-associated dermatitis (IAD). Moisture-associated skin damage (MASD) negatively impacts the physical health of your patients and the financial health of your facility.

PATIENT/RESIDENT STATS

37.5%

Greater risk of pressure ulcers in individuals with both incontinence and immobility¹



60,000

Approximate number of individuals who will develop a new pressure ulcer annually in the UK³



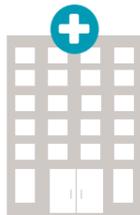
IAD is prevalent in up to:

42% of hospitalised adults²

83% of incontinent ICU patients²

41% of residents in long-term care²

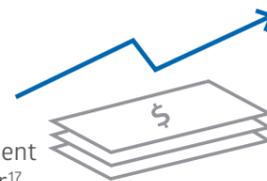
Double incontinence is **50 TO 70%** more common than urinary or faecal incontinence alone.¹



FACILITY STATS

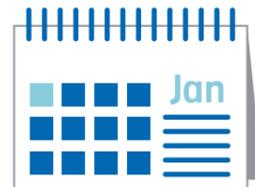
£1,214 TO £14,108

Approximate cost of treatment per individual pressure ulcer¹⁷



£3 BILLION

Estimated yearly cost of treating pressure ulcers³



Causes of MASD

MASD encompasses distinct skin conditions caused by excessive and continued exposure to moisture: wound exudate, urinary and/or faecal incontinence or perspiration.⁴ Identifying the cause of skin damage helps ensure appropriate management and prevention interventions.⁴

ITD

ITD or intertrigo happens when perspiration becomes trapped in skin folds and can't evaporate.⁴ The stratum corneum becomes overly hydrated and macerated, enabling friction damage to both sides of the fold.⁴ This inflames and denudes the skin, making it more prone to infection.⁴ Incontinence, immobility and obesity increase the risk of ITD.^{4,6}

IAD

IAD occurs when urine and/or faeces come into sustained contact with skin.⁴ Ammonia from urine and enzymes from faeces can disrupt the skin's acid mantle, causing maceration and impairing its abilities to withstand microorganisms.¹ The prolonged result is painful, weepy partial-thickness erosions.⁴

Once IAD has occurred, patients are at high risk for pressure ulcers, as well as increased risk of secondary infection and morbidity.⁵

Periwound Moisture-Associated Dermatitis

Drainage is normal during the inflammatory stage of wound healing. But excessive drainage can cause the periwound skin to macerate and even break down.⁴ This is especially a concern with chronic wounds, which contain a higher concentration of proteolytic enzymes than acute wounds.⁴

Shear Strain

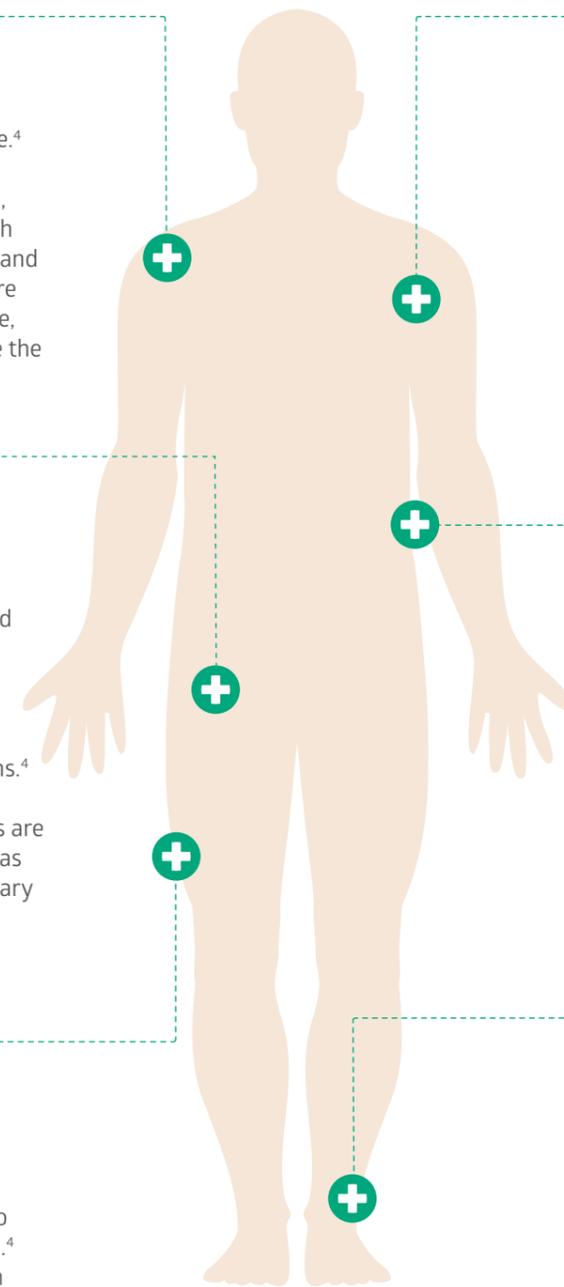
Shear occurs when the bone moves in an opposite direction to the skin surface, for example when a patient or resident slides down in bed.^{9,10} Shear forces distort deep tissues, especially those near bony prominences.¹⁰ Incontinence and perspiration can intensify shear forces.¹¹

Pressure Ulcers

Incontinence, moisture, friction and shear increase the risk of pressure ulcers.¹² Incontinence and moisture contribute to maceration, which can make skin more sensitive to breakdown from pressure.¹² Friction and shear may remove epidermal layers, reducing dermal tissue protection and making skin vulnerable to injury and pressure.¹²

Friction Injury

Friction is the resistance to motion in a parallel direction relative to the common boundary of two surfaces.⁷ Friction increases when skin rubs against a bed sheet or other surface.⁸ Wet skin is easily abraded or blistered by friction, so minimising or eliminating skin exposure to friction is important in preventing IAD, as well as pressure ulcers.¹



Don't Be Reactive: Be Proactive.

To help prevent and manage MASD, it's important for caregivers to use products that absorb and hold moisture and keep it away from the skin.⁴ Unlike conventional underpads, our Ultrasorbs drypads feature advanced polymers that help ensure the ongoing dryness of skin,¹³ help reduce friction and shear, allow air circulation and support low-air-loss mattresses.

CONVENTIONAL PRACTICE

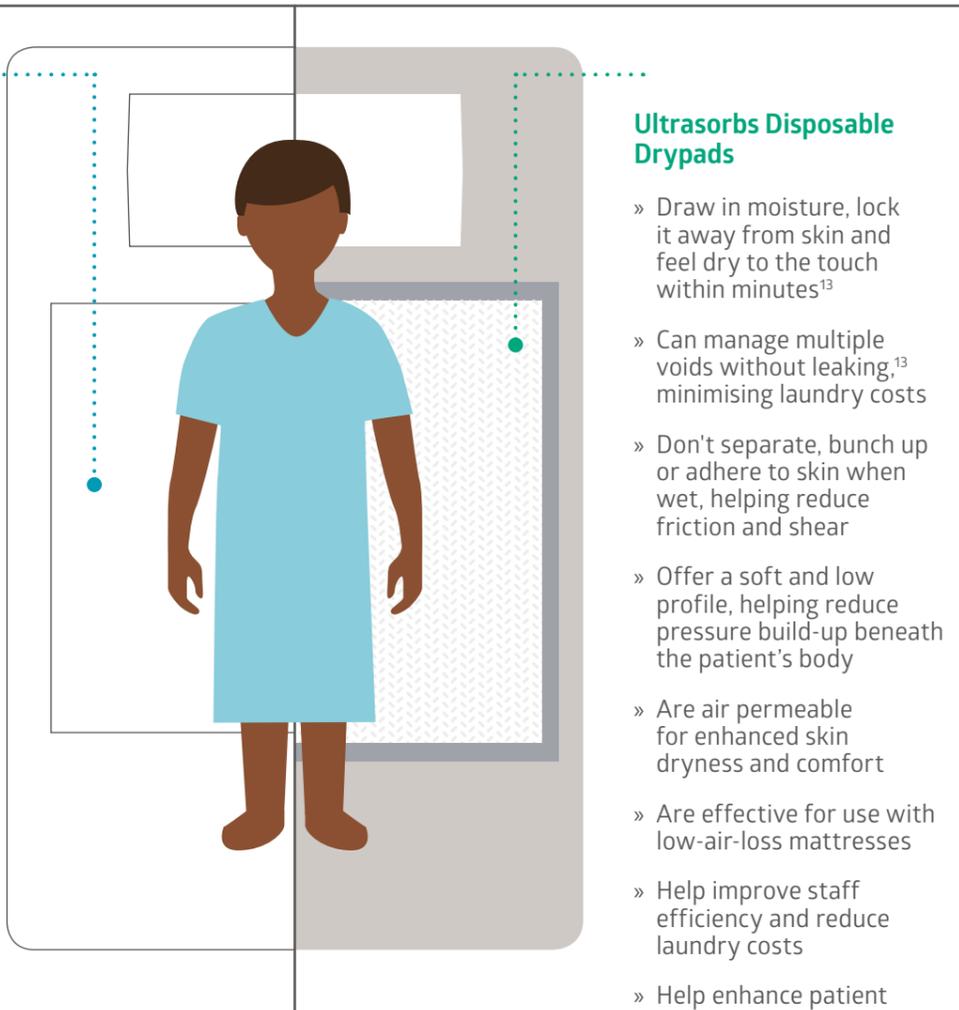
Standard Disposable and Reusable Underpads

- » Shield linens and furniture from fluids, but may hold moisture against skin
- » Require frequent changing, adding to caregiver workload and laundry costs
- » May leak, causing additional work for caregiver and increasing laundry costs
- » Linen changes are disruptive to ICU/CCU patients who should not be moved more than necessary.
- » Layering pads for added absorbency increases the sacral pressure.¹⁶
- » May ball up or adhere to skin, putting patient at risk for friction and skin shear
- » Offer minimal odour control
- » Standard disposable pads are not air permeable, preventing heat from escaping.
- » Wetness, leakage, odour, multiple layers and frequent linen changes may cause patients discomfort and threaten their dignity.

BEST PRACTICE

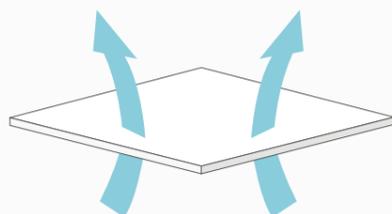
Ultrasorbs Disposable Drypads

- » Draw in moisture, lock it away from skin and feel dry to the touch within minutes¹³
- » Can manage multiple voids without leaking,¹³ minimising laundry costs
- » Don't separate, bunch up or adhere to skin when wet, helping reduce friction and shear
- » Offer a soft and low profile, helping reduce pressure build-up beneath the patient's body
- » Are air permeable for enhanced skin dryness and comfort
- » Are effective for use with low-air-loss mattresses
- » Help improve staff efficiency and reduce laundry costs
- » Help enhance patient comfort and preserve patient dignity



The Importance of Air Permeability

Many patients require the use of specialty support surfaces such as low-air-loss mattresses. Using an air-permeable drypad such as Ultrasorbs helps maximise air circulation, drying the skin and reducing potential maceration from moisture build-up.



Industry-Leading Moisture Management

Patient and Resident Benefits

- » Super absorbent core draws in moisture and locks it away from skin.¹³
- » Feels dry to the touch within minutes¹³
- » Maintains core integrity, reducing friction and shear
- » Ultra-soft, non-woven top sheet for greater patient comfort
- » Air-permeable back sheet for exceptional skin dryness with zero strikethrough

Caregiver Benefits

- » Micropore film protects against leakage for fewer linen changes without double padding.
- » Exclusive fold-over edges* help prevent fluid overflow.
- » Compatible with low-air-loss mattresses
- » Extra-strong option available for repositioning of individuals weighing up to 375 lb (170 kg)¹⁴

Ultra-soft, breathable top sheet provides increased patient and resident comfort.

High-strength back sheet provides exceptional resistance to tearing.**

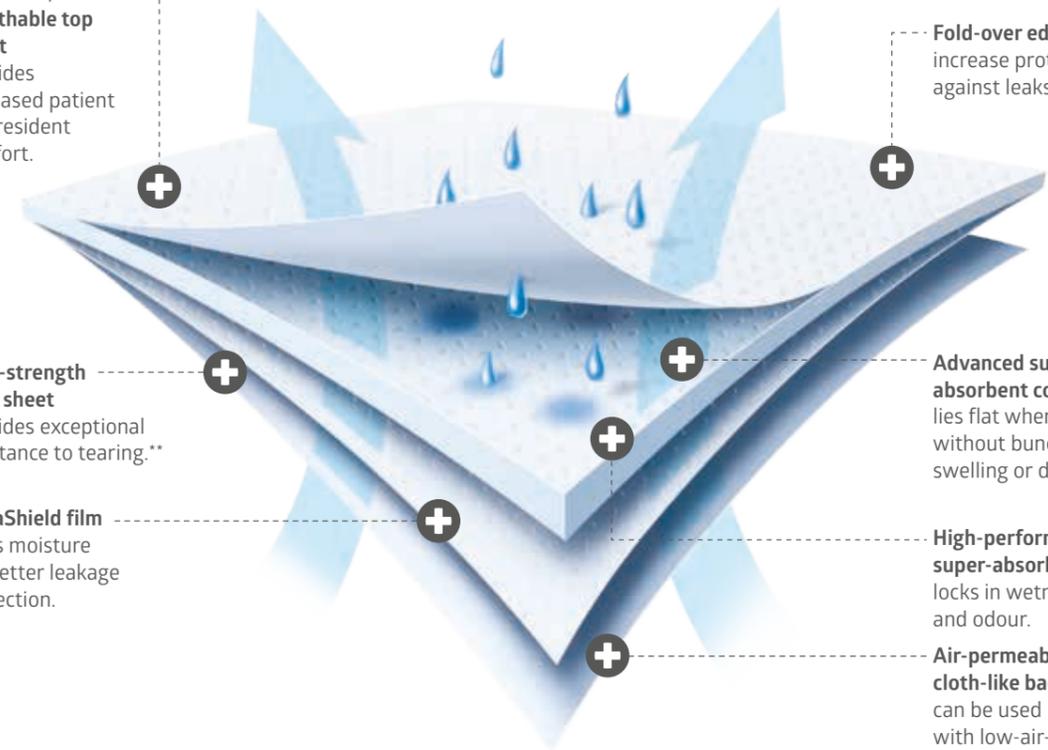
AquaShield film traps moisture for better leakage protection.

Fold-over edges* increase protection against leaks.

Advanced super-absorbent core lies flat when wet without bunching, swelling or disintegrating.

High-performing, super-absorbent polymer locks in wetness and odour.

Air-permeable, cloth-like back sheet can be used with low-air-loss mattresses, with zero strikethrough.



*Exclusive to Ultrasorbs

**Extra-strength options available

Choose the Drypad That Fits Your Patient's Needs.

Ultrasorbs manage moisture to help maintain skin integrity and provide superior dryness and containment. They absorb large amounts of moisture, have a large absorbent area and feature exclusive fold-over edges to prevent fluid overflow.

Ultrasorbs are ideal for patients with continuous exposure to excessive moisture from wound drainage, increased perspiration or incontinence.



SUPPORT FOR SUCCESS

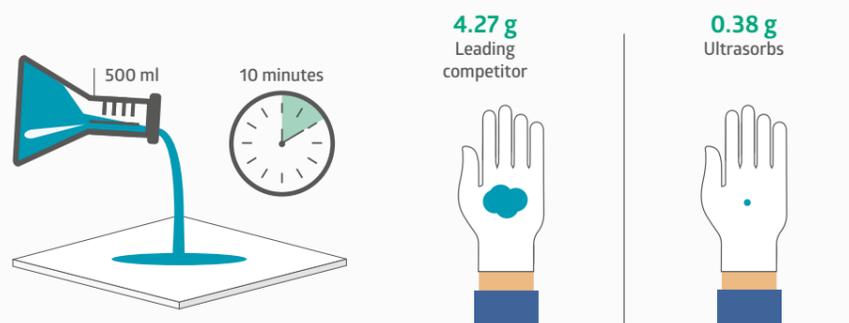
We understand that introducing new protocols or products can be a significant investment in time and effort. We can help. Our team of experts offers you clinical and product support to help ensure successful implementation. They can provide you with:

- Product in-services and training
- Specialised education in product usage and best practices
- Comprehensive skin management programme.

Find out more about our clinical and educational support services; contact your Medline representative today.

10-Minute Test for Dryness

A drypad's ability to withstand multiple insults is determined using the 're-wet' test. The test is done by pouring 500 millilitres of water onto a drypad, waiting 10 minutes and then measuring how much water returns to the surface. The lower the number, the drier the pad will be against the patient's skin.¹³



Satisfy Multiple Moisture Management Needs.

Ultrasorbs AP

Item No.	NPC Code	Description	Packaging
ULTRASRBE2540	VJD3119	Ultrasorbs AP, 25 x 40 cm	100/cs, 10/bg
ULTRASRBE4561	VJD3121	Ultrasorbs AP, 45 x 61 cm	60/cs, 10/bg
ULTRASRBE6191	VJD3124	Ultrasorbs AP, 58.4 x 90 cm	70/cs, 10/bg



Ultrasorbs ES

Item No.	NPC Code	Description	Packaging
USAPE6191ES	VEB792	Ultrasorbs ES, 58.4 x 90 cm	60/cs, 10/bg
USAP4090ES	VEB791	Ultrasorbs ES, 228 x 101 cm	25/cs

Specialty Drypads: Operating Theatre Table Cover

Item No.	NPC Code	Description	Packaging
MSCE4090PUPS	VEB677	Ultrasorbs OR, 101 x 228 cm	30/cs
MSCE4090PUSPB	VEB678	Ultrasorbs OR, 101 x 228 cm, single packed	1/bg, 30/cs



Sterile Versions

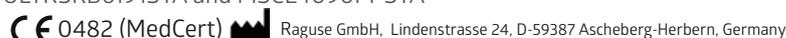
Item No.	NPC Code	Description	Packaging
ULTRSRB4561ST	VEB789	Ultrasorbs AP, 45 x 61 cm, sterile	160/cs
ULTRSRB6191STA	VEB790	Ultrasorbs AP, 61 x 91 cm, sterile	50/cs
MSCE4090PPSTA	VEB676	Ultrasorbs AP, 228 x 101 cm, sterile	25/cs

Ultrasorbs AP, ES and Drypads are medical devices in class I non-sterile.



Sterile underpads ULTRSRB4561ST, ULTRSRB6191STA and MSCE4090PPSTA

are medical devices in class I sterile.



Before use, consult instructions and precautions on the corresponding labelling.

See how effectively our Ultrasorbs drypads manage moisture and dryness. Contact your Medline account manager for a product trial at your facility.



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We reserve the right to correct any errors that may occur within this brochure.

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