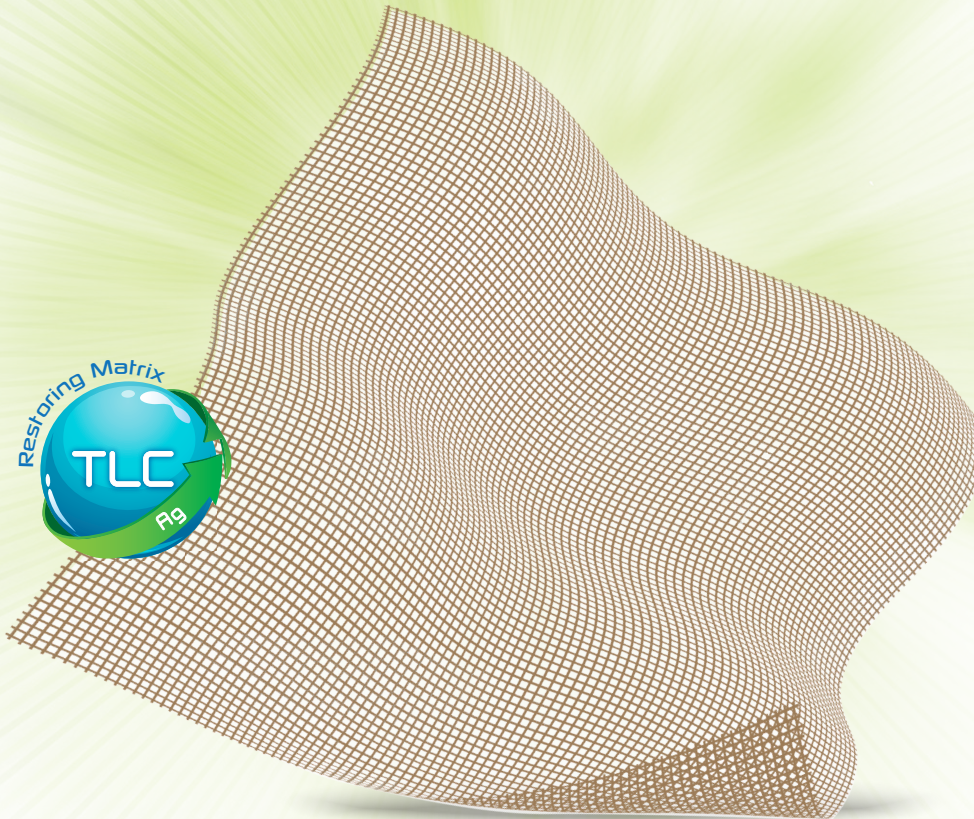


# THE JELLIFYING SILVER CONTACT LAYER PROVEN TO FACILITATE WOUND PROGRESS

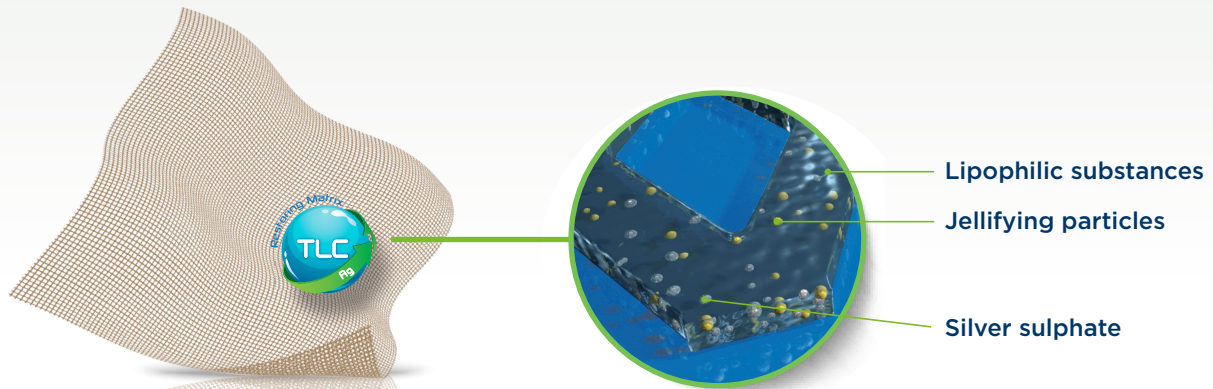


**UrgoTul™ Ag/Silver**

PATIENTS WITH LIGHT TO MODERATELY EXUDATIVE PARTIAL AND FULL THICKNESS WOUNDS, INCLUDING DIABETIC ULCERS, FIRST AND SECOND DEGREE BURNS, DECUBITUS ULCERS, VENOUS STASIS ULCERS, AND GRAFT AND DONOR SITES

# UrgoTul™ Ag/Silver

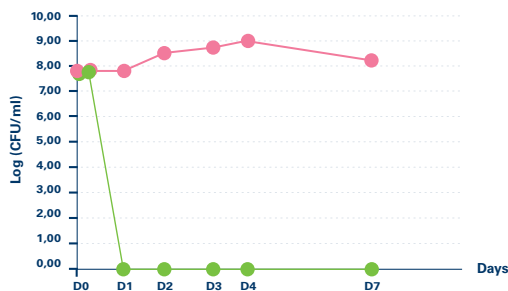
## THE JELLIFYING SILVER CONTACT LAYER PROVEN TO FACILITATE WOUND PROGRESS



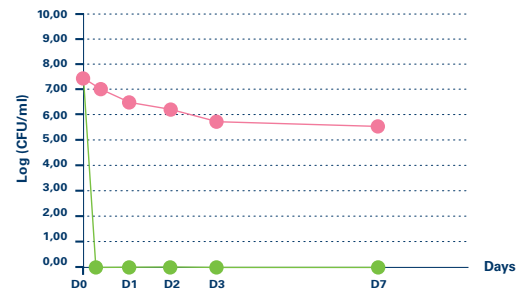
- ▶ Clinically proven to facilitate wound progress with reduced signs of local infection over neutral dressings<sup>(2)</sup>
- ▶ Broad spectrum antimicrobial barrier with proven *in vitro* efficacy against antibiotic resistant bacterial strains and yeast<sup>(1)</sup>
- ▶ Sustained antimicrobial effect for up to 7 days (in vitro studies)<sup>(1)</sup>
- ▶ Atraumatic and pain-free due to the jellifying TLC-Ag matrix

### UrgoTul™ Ag/Silver IS AN ANTIMICROBIAL BARRIER DRESSING AGAINST A BROAD RANGE OF BACTERIAL STRAINS AND YEAST FOR UP TO 7 DAYS, *IN VITRO*<sup>(1)</sup>

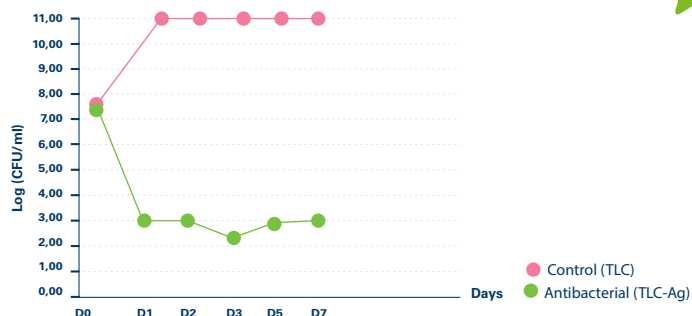
▶ MRSA  
Methicilin-resistant *Staphylococcus aureus*



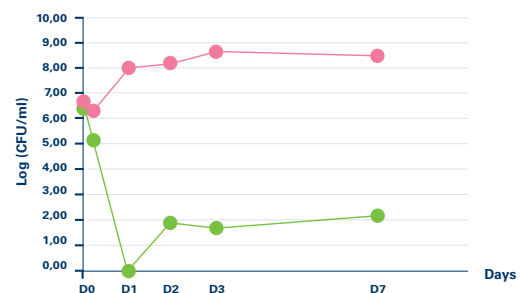
▶ *S. pyogenes*



▶ *Pseudomonas aeruginosa*



▶ *Candida albicans*



# UrgoTul™ Ag/Silver

## THE JELLIFYING SILVER CONTACT LAYER PROVEN TO FACILITATE WOUND PROGRESS

UrgoTul™ Ag/Silver IS CLINICALLY PROVEN TO FACILITATE WOUND PROGRESS WITH REDUCED SIGNS OF LOCAL INFECTION OVER NEUTRAL DRESSINGS<sup>(2)</sup>

### STUDY DESIGN:

- Randomized controlled trial, multicenters
- 102 patient RCT, 2 groups (sequential group: UrgoTul Ag/UrgoTul; neutral group: UrgoTul)
- Leg ulcers presenting signs suggesting heavy bacteria load

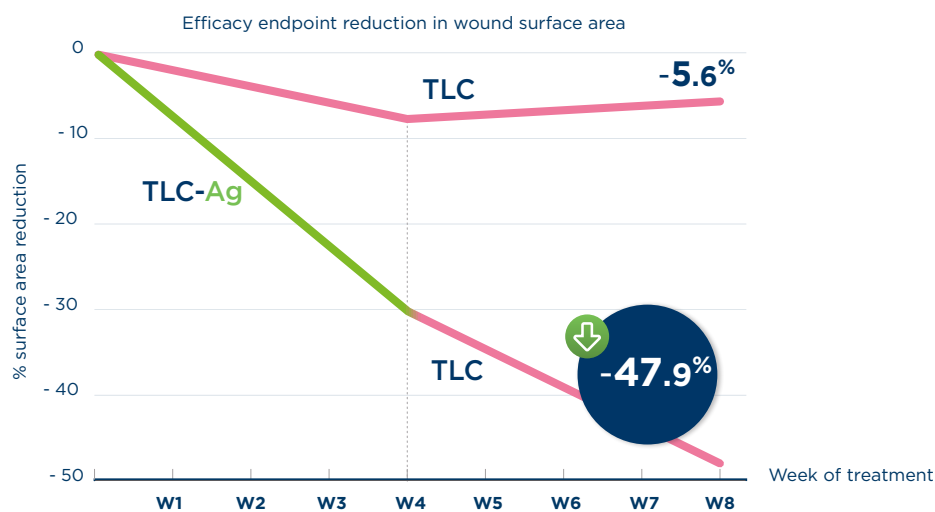
▶ A significantly lower clinical score\* with the sequential TLC-Ag group

Clinical score	Sequential TLC-Ag group	Neutral TLC group
D0	3.84	3.84
W4	1.25	2.31
W8	1.43	2.31 (p=0.0001)

▶ A very good safety profile of the TLC-Ag dressing

The TLC-Ag dressing did not induce any increase in blood silver levels in the patients checked (blood samples taken at D0, W4 and W8)

▶ -47.9% wound surface reduction with the sequential TLC-Ag group (p=0.036)

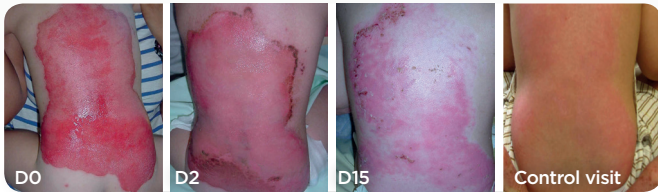


\*defined by the presence of 5 clinical signs: peri-wound skin erythema, oedema, pain between two dressing changes, malodorous wound, high level of exudate.

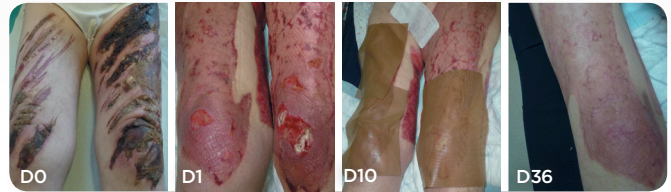
# UrgoTul™ Ag/Silver

## THE JELLIFYING SILVER CONTACT LAYER PROVEN TO FACILITATE WOUND PROGRESS

21 month year old patient presenting a burn



58 year old female patient presenting a 3<sup>rd</sup> degree burn with carbonisation

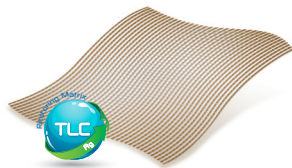


45 year old male patient presenting a traumatic wound



- Recommended dressing change every 1 to 3 days
- Indicated for patients with light to moderately exudative partial and full thickness wounds, including diabetic ulcers, first and second degree burns, decubitus ulcers, venous stasis ulcers, and graft and donor sites

### UrgoTul™ Ag/Silver

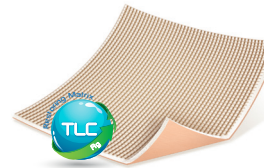


Can be cut

Can be meshed

Size (inch)	Size (cm)	No. per box	Code
4 x 5	10 x 12	10	509341
6 x 8	15 x 20	10	509342
8 x 12	20 x 40	5	553228

### UrgoCell Ag



Can be cut

Can be used under compression bandage

Size (inch)	Size (cm)	No. per box	Code
4 x 4	10 x 10	10	509345
6 x 8	15 x 20	10	509346

References: **1.** UrgoTul Ag data on file. **2.** Lazareth I., Meaume S., Sigal-Grinberg M-L, et al. The Role of a Silver Releasing Lipido-colloid Contact Layer in Venous Leg Ulcers Presenting Inflammatory Signs Suggesting Heavy Bacterial Colonization: Results of a Randomized Controlled Study. WOUNDS 2008;20(6):158-166.  
**Prior to use, be sure and read the entire Instructions for Use package insert supplied with the product for Device Intended Use, Description, Contraindications, Warnings, Precautions, Adverse Events, and Instructions for Use. Caution: Federal laws restrict this device to sale or on the order of a physician or licensed healthcare professional.**

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