

More than half (58%) of patients complain that their dressing pulls or doesn't move with their body<sup>9</sup>.

## Designed to conform and stay on

Thanks to Flex Technology, the unique conformability of Mepilex® Border Flex allows it to adapt to the shape and movement of the patient<sup>4</sup>. Reducing pressure on the skin and pull on the borders increases comfort and minimises the risk of detachment<sup>10</sup>.

**And it's water resistant so your patients can shower<sup>11</sup>.**

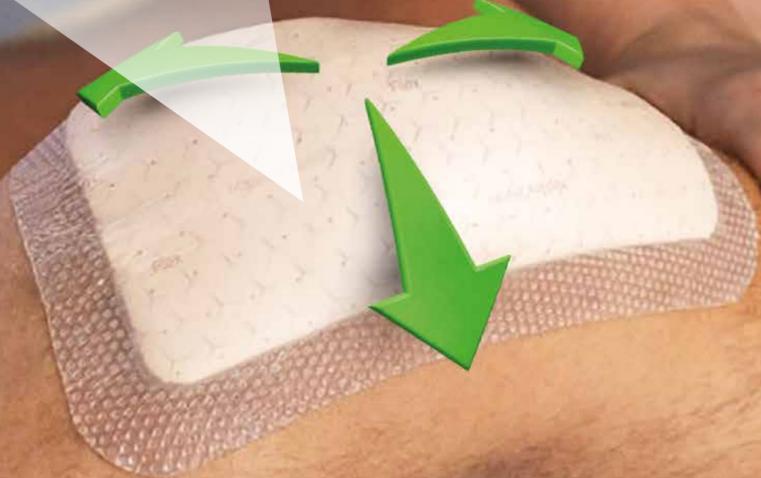


## Unique Flex Technology = 360° flexibility

Y-cuts expand to allow movement:

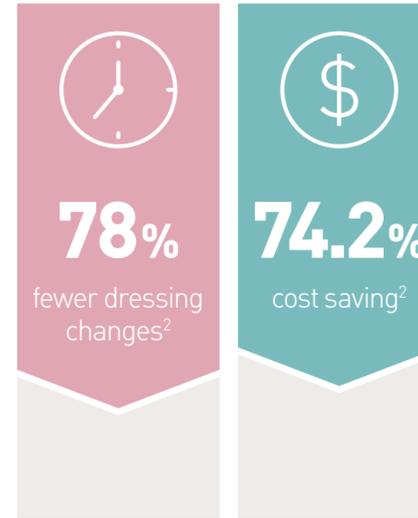


**UP TO 11x**  
more flexible  
than other foam  
dressings<sup>4</sup>.



## Mepilex® Border Flex can make a positive impact on your budget

Every unnecessary dressing change comes at a cost, from the care hours and material waste, to the patient's discomfort. In a QIP (quality improvement project) performed during one year, it was observed that Mepilex® Border Flex can, as part of other improvement processes implemented, help reduce these costs by staying on for longer, supporting patients and carers in achieving their healing and budget goals<sup>1</sup>. In another recent QIP performed during 6 months it was observed that dressing utilisation was reduced in the group using Mepilex® Border Flex vs. the group with formulary dressing, decreasing the total cost of care and giving time back to nurses<sup>2</sup>.



Visit [molnlycke.com](http://molnlycke.com) to find out how Mepilex® Border Flex dressings can help your patients, your team and your budgets.



Square

| Order number | Size (cm)   | Size (inch) | Dressings per pack |
|--------------|-------------|-------------|--------------------|
| 595200       | 7.5 x 7.5   | 3 x 3       | 10                 |
| 595300       | 10 x 10     | 4 x 4       | 10                 |
| 595000       | 12.5 x 12.5 | 5 x 5       | 10                 |
| 595400       | 15 x 15     | 6 x 6       | 10                 |
| 595600       | 15 x 20     | 6 x 8       | 10                 |

Oval

| Order number | Size (cm) | Size (inch) | Dressings per pack |
|--------------|-----------|-------------|--------------------|
| 583500       | 7.8 x 10  | 3.1 x 4     | 5                  |
| 583300       | 13 x 16   | 5.1 x 6.3   | 5                  |
| 583400       | 15 x 19   | 6 x 7.5     | 5                  |

Note: Please contact your local Mölnlycke representative for information about order numbers available in your country.

References: 1. Nelson, D. A New Bordered Foam Dressing Technology Improves Wound Outcomes and Satisfaction While Reducing Dressing Utilization in Acute Care. Poster Presentation at WOCN Annual Meeting, Nashville, 2019. 2. Tyson, L. Study First: Driving the Case for Improving Hospital Wound Care. Poster Presentation at WOCN Annual Meeting, Nashville, 2019. 3. Mölnlycke Health Care. Mepilex® Border Flex - Estimate of spreading area using dot pattern on backing film. Report no. PD-528872. Data on file. 4. Mölnlycke Health Care. Mepilex® Border Flex Product Manual - Conformability PD-528870. Data on file. 5. Mölnlycke Health Care. Mepilex® Border Flex-Bacteria encapsulation. Report no. PD-537072. Data on file. 6. Mölnlycke Health Care. Mepilex® Border Flex Product Manual - Spreading layer PD-528874. Data on file. 7. Mölnlycke Health Care. Product Manual - Maintained dressing profile. Report no. 525458. Data on file. 8. White, R. A multinational survey of the assessment of pain when removing dressings. Wounds UK 2008;4(1):14-22. 9. Opinion Matters' Professional Health Care Treatment for Wounds' survey conducted June-July 2018 in UK. Data on file. 10. Mölnlycke Health Care. Mepilex® Border Flex - External data - FEM simulations MxB Flex vs Allevyn Life. Report no. PD-529747. Data on file. 11. Mölnlycke Health Care. Mepilex® Border Flex - Waterproofness. Report no. PD-532095. Data on file. 12. Mölnlycke Health Care. Mepilex® Border Flex - Fluid handling capacity compared to Urgotul Foam Absorb Border, Aquacel Foam, Allevyn Classic Gentle Border, Allevyn Life, Opifoam Gentle, KerriFoam Gentle Border. Report no. PD-527642. Data on file. 13. Mölnlycke Health Care. Mepilex® Border Flex - Absorption and dispersion tests on inclined plane, viscous test solution. Report no. PD-528871. Data on file. 14. Mölnlycke Health Care. Product manual Initial abs different test solutions. Report no. PD-535352. Data on file. 15. Mölnlycke Health Care. Product Manual Mepilex® Border Flex - Viral penetration. Report no. PD-535090. Data on file. 16. Woo, K., Coutts, P.M., Price, P., Harding, K., Sibbald, R.G. A randomised crossover investigation of pain at dressing change comparing foam dressings Advances in Skin and Wound Care 2009;22(7):304-310. 17. Meaume S. et al. A study to compare a new self-adherent soft silicone dressing with a self-adherent polymer dressing in stage II pressure ulcers. Ostomy Wound Management, 2003.

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# Stays on

Uniquely conforms



Mepilex® Border Flex

Our next generation of flexible dressings



Wounds need to heal. Patients need care. Nurses need time. Budgets are tight. The challenge is finding a dressing that is comfortable and stays on as long as it is needed.

## Introducing the Mepilex® Border Flex range

Our next generation of flexible dressings are designed to stay on and uniquely conform; giving time back to nurses, cost savings back to managers and quality of life back to patients<sup>1,2</sup>.

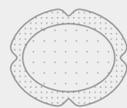


### Choose the right dressing for your patient's needs

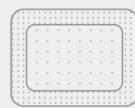
Designed for a wide range of exuding wounds including: leg and foot ulcers, traumatic wounds (e.g. skin tears) and surgical wounds, as well as part of a prophylactic therapy to help prevent skin damage, e.g. pressure ulcers.



Square



Oval



Rectangular

Up to 1/3 of patients complain that their dressing needs changing daily<sup>9</sup>.

## Smart exudate management

Giving you confidence to leave the dressing on for longer and still maintain an optimal wound healing environment.



### 1. Rapid absorption with minimal swelling:

The foam layer allows rapid absorption of both normal and viscous exudate<sup>13,14</sup> and it is better at handling exudate than comparable dressings<sup>12</sup>.



### 2. Maximises capacity by channelling exudate:

Exudate is channelled away from the wound and over a wider area to increase moisture vapour loss and reduce swelling<sup>6,7</sup>.



### 3. Traps bacteria away from the wound:

The superabsorbent fibers in the retention layer prevent exudate containing bacteria from re-entering the wound bed, even under compression<sup>5</sup>. Backing film prevents entry of external bacteria<sup>15</sup>.



### 4. Tracks exudate without dressing removal:

The Exudate Progress Monitor allows the spread of exudate to be objectively assessed and recorded, without disturbing the wound<sup>3</sup>.

AS MUCH AS

**2.2x**

greater exudate handling compared to other tested foam dressings<sup>12</sup>

9/10 patients feel their wound impacts their quality of life<sup>9</sup>.

## Reduced pain and damage to the skin

All Mepilex® Border Flex dressings seek to reduce trauma caused by dressing changes. This is made possible by our proven Safetac® soft silicone wound contact layer, **which minimises pain and damage to the skin and risk of maceration** compared with traditional (adhesive) dressings<sup>8,16,17</sup>.

MORE THAN

**9/10**

patients preferred dressings with Safetac® over other dressings with traditional adhesives<sup>9</sup>



### How the Exudate Progress Monitor works

Leaving wounds undisturbed can help healing. The Exudate Progress Monitor gives you the confidence to leave the dressing in place for longer<sup>3</sup>.



The Exudate Progress Monitor is a grid of equidistant dots.



e.g. 4 x 4cm

As exudate spreads you can record a dot count that reflects exudate volume in the dressing.



e.g. 8 x 10cm

You can then refer to the recorded dot count to help monitor exudate trends.



e.g. 10 x 14cm

Consider dressing change when exudate is approaching the borders of the dressing.\*

\*Wound inspection and dressing change frequencies are driven by clinical decision and should be at the discretion of the treating clinician