

## **Clinical Data Indicates System Reduces Surgical Site Complications In C-Section Patients**

Smith & Nephew, the global medical technology business, today announces data from two independent clinical evaluations that indicate favorable results in preventing surgical site infections when using the PICO Negative Pressure Wound Therapy System (PICO) post-operatively following a Caesarean section.

Jeanette Harris, Infection Preventionist, and Evelyn Hickson, Perinatal Clinical Nurse Specialist from MultiCare Health System in the Tacoma, WA area, conducted a study on outcomes from a new post-operative strategy to manage C-sections introduced in January 2012. Analysis of outcomes using the new strategy showed an 83% reduction in surgical site infections (SSI), arriving at a rate of 0.5 percent or six surgical site infections out of a total of 1,200. The average re-admission stay due to post-operative SSI is seven patient days at a cost of roughly \$50,000.<sup>1</sup>

Under MultiCare's protocol, patients were separated into high-risk and low-risk categories through a decision tree. Patients with a body mass index of 35 or greater, or had two or more risk factors, for example diabetes, steroid therapy within 48 hours of surgery, autoimmune diseases, hematological disorders, immune suppression, or others were identified as high-risk. High-risk patients were treated with PICO, while OPSITE\* Post-Op Visible was used as a low-risk dressing. ACTICOAT\* antimicrobial barrier dressings were used in both risk groups. Before this, standard practice included the use of conventional post-operative dressings on low-risk patients, and conventional negative pressure wound therapy for high-risk patients.

"We are committed to innovation that helps reduce the human and economic cost of wounds," said Tom Dugan, President, North America, Advanced Wound Management division, Smith & Nephew. "PICO, OPSITE and ACTICOAT are examples of Smith & Nephew's unique ability to provide a spectrum of wound care options that together give clinicians the flexibility to exercise their best judgment and to develop better ways to serve patients."

A second study presented by Lindsey Bullough and Diane Wilkinson of the Royal Albert Edward Infirmary in Wigan followed a group of 50 patients who were deemed to be at higher risk of contracting an infection post-C-section due to being clinically obese and had their closed surgical incisions treated with a protocol including the PICO Negative Pressure Wound Therapy System. The results showed that there were no infections and zero re-admissions.

"Infections impact not only the mother and her family but also the health service costs in relation to antibiotic use, general practitioner time and additional care" said Diane Wilkinson, Infection Control, Junior Matron at Royal Albert Edward Infirmary.

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"I had an emergency C-section and was a bit nervous about my recovery since I had had an infection with my first C-section," said Michelle Mann, a mother of three and a patient who was part of the Wigan evaluation. "For me, PICO was as easy as wearing a belt. It didn't restrict my movements at all and it was easy to remove for showering. I didn't have an infection after this surgery and overall my recovery was much better the second time around."

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