

Alexis[®]

WOUND PROTECTORS/RETRACTORS



Applied Medical is dedicated to providing innovative products that improve patient outcomes and enable the advancement of minimally invasive surgery. As a new generation medical device company, we are equally committed to improving the affordability and accessibility of high-quality healthcare.

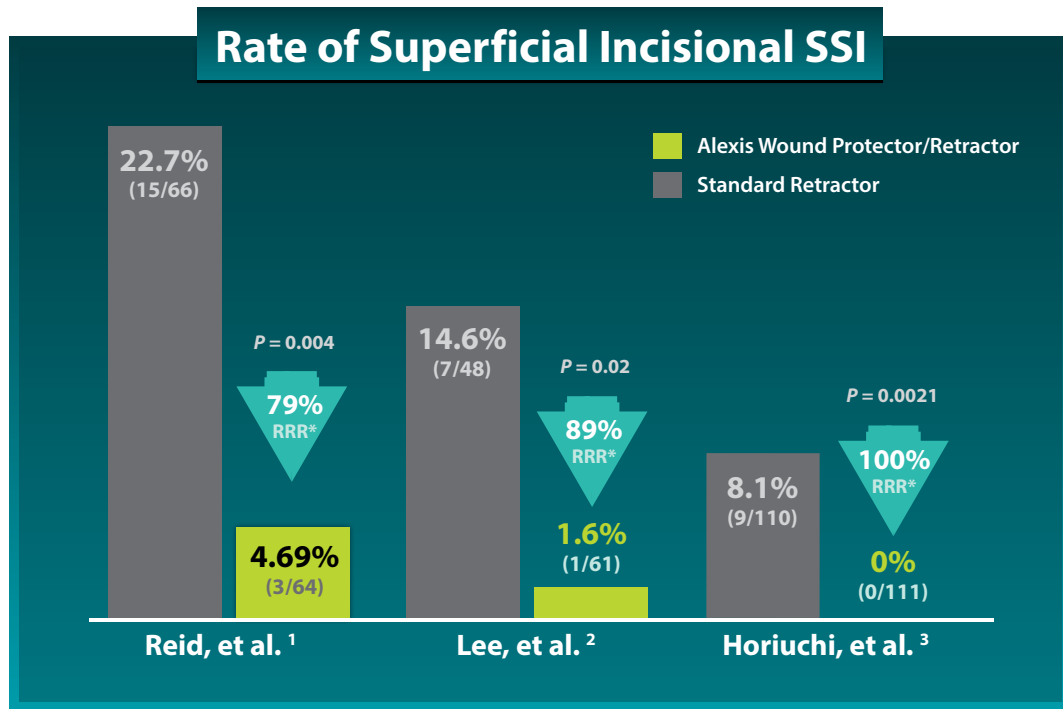
To further our dedication to improving both hospital and patient outcomes, we are committed to being a part of the overall solution to reduce surgical site infection (SSI) through research, education, and awareness. Applied Medical has developed stopwoundinfection.com, a comprehensive resource for healthcare professionals interested in learning more about the prevention of SSI. Our mission is to enhance patient outcomes by providing multiple platforms to discuss and implement clinically proven methods to reduce the incidence of SSI.

Visit www.stopwoundinfection.com

to learn more about surgical site infection prevention.



IS ALEXIS® PART OF YOUR STANDARD OF CARE?



1. Reid K, Pockney P, Draganic B, Smith SR. Barrier wound protection decreases surgical site infection in open elective colorectal surgery: A randomized clinical trial. *Dis Colon Rectum*. 2010 Oct; 53(10): 1374-1380.
 2. Lee P, Waxman K, Taylor B, Yim S. Use of wound-protection system and postoperative wound-infection rates in open appendectomy: A randomized prospective trial. *Arch Surg*. 2009; 144(9): 872-875.
 3. Horiuchi T, Tanishima H, et al. Randomized, controlled investigation of the anti-infective properties of the Alexis retractor/protector of incision sites. *J Trauma*. 2007 Jan; 62(1): 212-215.
- *RRR (relative risk reduction) was defined as the proportion of the control group (standard retractors) experiencing a given outcome minus the proportion of the treatment group (Alexis protector) experiencing the outcome, divided by the proportion of the control group (standard retractors) experiencing the outcome.

Recommendation of a wound protector to REDUCE SURGICAL SITE INFECTION



“Use impervious plastic wound protectors for gastrointestinal and biliary tract surgery.”

Anderson DJ, Podgorny K, et al. Strategies to prevent surgical site infections in acute care hospitals: 2014 update. *Infect Control Hosp Epidemiol*. 2014 Jun; 35(6): 605-627.

REDUCTION IN SURGICAL SITE INFECTION



“Impervious plastic wound protectors reduce the risk of SSI when employed in non-trauma related gastrointestinal and biliary tract surgery. Wound protectors represent a safe and simple intervention that may reduce postoperative morbidity and mortality.”

...

“Our study suggests that the use of wound protectors decreases the risk of SSI by 45%. Our number needed to treat suggests that only 10 patients would have to be treated intraoperatively with a wound protector to prevent 1 SSI.”

Edwards JP, Ho AL, Tee MC, Dixon E, Ball CG. Wound protectors reduce surgical site infection: A meta-analysis of randomized controlled trials. *Ann Surg.* 2012 Jul; 256(1): 53-59.



“The ALEXIS® wound retractor is more effective in preventing SSI in elective colorectal resections compared with conventional methods.”

Cheng KP, Roslani AC, et al. ALEXIS O-Ring wound retractor vs conventional wound protection for the prevention of surgical site infections in colorectal resections. *Colorectal Dis.* 2012 Jun; 14(6): e346-e351.



“[U]se of a plastic wound retractor may result in reduced enteric bacterial colonization of the surgical incision site during gastrointestinal surgery. Reduced colonization of the surgical incision site by enteric bacteria due to the use of a plastic wound retractor should result in a reduction in SSI following gastrointestinal surgery.”

Mohan HM, McDermott S, et al. Plastic wound retractors as bacteriological barriers in gastrointestinal surgery: A prospective multi-institutional trial. *J Hosp Infect.* 2012 Jun; 81(2): 109-113.

Use of Wound-Protection System and Postoperative Wound-Infection Rates in Open Appendectomy
A Randomized Prospective Trial

Lee P, Waxman K, Taylor B, Yim S. Use of wound-protection system and postoperative wound-infection rates in open appendectomy: A randomized prospective trial. Arch Surg. 2009; 144(9): 872-875.

Objectives: To determine if use of a wound-protection system in open appendectomy decreases the incidence of wound infection.

Design: A randomized prospective trial.

Setting: Community hospital.

Patients: One hundred seven patients undergoing open appendectomy.

Intervention: Randomly assigned experimental patients were treated with the Alexis wound-protection system. The control group was treated with standard open appendectomy. Outcomes including wound-healing rates, wound-infection rates, and hospital charges were compared. The mean age of patients was 40 years. The mean length of hospital stay was 4.5 days.

Main Results: Incidence of wound infection in the Alexis group was 14.3% compared with 28.6% in the control group. The difference in wound-infection rates was statistically significant (P = .02).

Conclusions: Use of a wound-protection system reduces the incidence of wound infection in open appendectomy.

Key Words: Appendectomy; Wound infection; Wound-protection system.

“Our data demonstrate that a statistically significant reduction in the incidence of wound infection was achieved with the use of a wound-protection device. This device provides a simple intervention that may eventually have a large impact on the incidence of surgical wound infection and therefore annual health care expenditures.”

Lee P, Waxman K, Taylor B, Yim S. Use of wound-protection system and postoperative wound-infection rates in open appendectomy: A randomized prospective trial. Arch Surg. 2009; 144(9): 872-875.

Barrier Wound Protection Decreases Surgical Site Infection in Open Elective Colorectal Surgery: A Randomized Clinical Trial

Reid K, Pockney P, Draganic B, Smith SR. Barrier wound protection decreases surgical site infection in open elective colorectal surgery: A randomized clinical trial. Dis Colon Rectum. 2010 Oct; 53(10): 1374-1380.

Objectives: To determine if barrier wound protection in elective open colorectal surgery decreases the incidence of surgical site infection.

Design: A randomized prospective trial.

Setting: Community hospital.

Patients: One hundred seven patients undergoing open elective colorectal surgery.

Intervention: Randomly assigned experimental patients were treated with barrier wound protection. The control group was treated with standard open elective colorectal surgery.

Main Results: Incidence of surgical site infection in the Alexis group was 14.3% compared with 28.6% in the control group. The difference in wound-infection rates was statistically significant (P = .02).

Conclusions: Use of barrier wound protection decreases the incidence of surgical site infection in open elective colorectal surgery.

Key Words: Colorectal surgery; Wound infection; Barrier wound protection.

“[T]he use of barrier wound protection in elective open colorectal resectional surgery resulted in a clinically significant reduction in incisional surgical site infections. Barrier wound protection of this nature should be considered routine in this type of surgery.”

Reid K, Pockney P, Draganic B, Smith SR. Barrier wound protection decreases surgical site infection in open elective colorectal surgery: A randomized clinical trial. Dis Colon Rectum. 2010 Oct; 53(10): 1374-1380.

A wound retractor/protector can prevent infection by keeping tissue moist and preventing tissue damage at incision sites

Horiuchi T, Nakatsuka S, et al. A wound retractor/protector can prevent infection by keeping tissue moist and preventing tissue damage at incision sites. Helix Review Series: Infectious Diseases. 2007; 3: 17-23.

Objectives: To determine if a wound retractor/protector can prevent infection by keeping tissue moist and preventing tissue damage at incision sites.

Design: A randomized prospective trial.

Setting: Community hospital.

Patients: One hundred seven patients undergoing open elective colorectal surgery.

Intervention: Randomly assigned experimental patients were treated with a wound retractor/protector. The control group was treated with standard open elective colorectal surgery.

Main Results: Incidence of wound infection in the Alexis group was 14.3% compared with 28.6% in the control group. The difference in wound-infection rates was statistically significant (P = .02).

Conclusions: Use of a wound retractor/protector can prevent infection by keeping tissue moist and preventing tissue damage at incision sites.

Key Words: Wound retractor/protector; Wound infection; Tissue moisture; Tissue damage.

“The studied wound retractor/protector effectively protects wound tissue from damage due to environmental factors experienced during surgery.”

Horiuchi T, Nakatsuka S, et al. A wound retractor/protector can prevent infection by keeping tissue moist and preventing tissue damage at incision sites. Helix Review Series: Infectious Diseases. 2007; 3: 17-23.

Randomized, Controlled Investigation of the Anti-Infective Properties of the Alexis Retractor/Protector of Incision Sites

Horiuchi T, Tanishima H, et al. Randomized, controlled investigation of the anti-infective properties of the Alexis retractor/protector of incision sites. J Trauma. 2007 Jan; 62(1): 212-215.

Objectives: To determine if the Alexis retractor/protector has anti-infective properties.

Design: A randomized controlled trial.

Setting: Community hospital.

Patients: One hundred seven patients undergoing open elective colorectal surgery.

Intervention: Randomly assigned experimental patients were treated with the Alexis retractor/protector. The control group was treated with standard open elective colorectal surgery.

Main Results: Incidence of wound infection in the Alexis group was 14.3% compared with 28.6% in the control group. The difference in wound-infection rates was statistically significant (P = .02).

Conclusions: The Alexis retractor/protector has anti-infective properties.

Key Words: Alexis retractor/protector; Wound infection; Anti-infective properties.

“The results of this study demonstrate that wound infection decreased significantly in the with Alexis retractor group.”

Horiuchi T, Tanishima H, et al. Randomized, controlled investigation of the anti-infective properties of the Alexis retractor/protector of incision sites. J Trauma. 2007 Jan; 62(1): 212-215.

REDUCTION IN BACTERIAL INVASION



"[U]se of a plastic wound retractor may result in reduced enteric bacterial colonization of the surgical incision site during gastrointestinal surgery. Reduced colonization of the surgical incision site by enteric bacteria due to the use of a plastic wound retractor should result in a reduction in SSI following gastrointestinal surgery."

Mohan HM, McDermott S, et al. Plastic wound retractors as bacteriological barriers in gastrointestinal surgery: A prospective multi-institutional trial. J Hosp Infect. 2012 Jun; 81(2): 109-113.

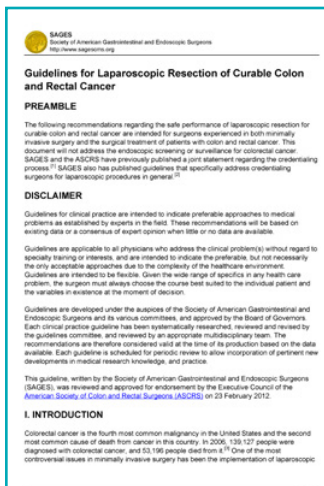


"These results suggest that the [wound protector] protects an incision site from bacterial invasion."

...
"[W]e consider that the low incidence of SSI may have resulted from the protective effects of the [wound protector]."

Horiuchi T, Tanishima H, et al. A wound protector shields incision sites from bacterial invasion. Surg Infect (Larchmt). 2010 Dec; 11(6): 501-503.

Recommendation of a wound protector to REDUCE ABDOMINAL WALL CANCER RECURRENCES



"Recommendation: The use of a wound protector at the extraction site and the irrigation of port sites and extraction site incisions may reduce abdominal wall cancer recurrences. (++00, strong)"

Guidelines for Laparoscopic Resection of Curable Colon and Rectal Cancer. SAGES Society of American Gastrointestinal and Endoscopic Surgeons. <https://www.sages.org/publications/guidelines/guidelines-for-laparoscopic-resection-of-curable-colon-and-rectal-cancer/>. February 2012. Accessed January 22, 2015.