

Upgrading to Ethicon's **Plus Antibacterial Sutures** couldn't be simpler

BACKGROUND:

- Surgical site infections are the most common and costly healthcare associated infection in Australia occurring at a rate of 3.6%¹.
- The risk factors associated with acquiring a surgical site infection can be multi-factorial, however the risk is increased with the introduction of any foreign body, an example of which are sutures².
- Ethicon's Plus antibacterial sutures inhibit bacterial colonisation on the suture for 7 days or more. This therefore reduces this risk factor for infection^{3,4,5}.

BY REDUCING THIS RISK FACTOR:

Ethicon's Plus Sutures have been proven to reduce the risk of SSI by 28%^{**5}

*21 RCTs, 6,462 patients, 95% CI: (14, 40%), P<0.001 †All triclosan-coated sutures in these RCTs were Ethicon Plus Antibacterial Sutures (MONOCRYL® Plus Antibacterial (poliglecaprone 25) Suture, Coated VICRYL® Plus Antibacterial (polyglactin 910) Suture and PDS® Plus Antibacterial (polydioxanone) Suture).

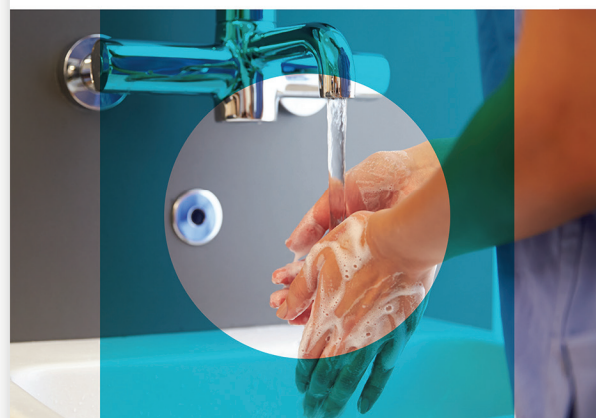
After a rigorous and comprehensive approach that reflects the best available evidence and national expert opinion on infection prevention and control, guidance is now provided in the NHMRC Australian Guidelines for the Prevention and Control of Infection in Healthcare 2019⁶ that:

“Using antimicrobial-coated sutures (included on the ARTG e.g. triclosan coated sutures) can help to reduce SSI rates.”



Australian Government
National Health and Medical Research Council
Australian Commission on Safety and Quality in Health Care

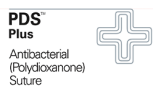
Australian Guidelines for the Prevention and Control of Infection in Healthcare



AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

Upgrading to Plus:

- Plus antibacterial technology is available in our Monocryl®, Vicryl®, PDS™ and Stratafix™ Plus Polymers



- For our core absorbable sutures we have Plus equivalents for most of our suture codes and to upgrade is a simple process requiring a simple ordering change to the product code as illustrated:

Monocryl® to Monocryl® Plus

The petri dish image is for illustrative purposes only, zone of inhibition testing results can vary

“Y” becomes “MCP”

For example:
Y495G becomes MCP495G

Colonisation of a suture knot Colonisation of a braided suture

Vicryl™ to Vicryl™ Plus

“J” becomes “VCP”

For example:
J603H becomes VCP603H

PDS™ to PDS™ Plus

“Z” becomes “PDP”

For example:
Z358T becomes PDP358T

Nothing changes to the suture except for the antibacterial coating on the suture material so you can be assured that you are getting the same product plus more

Please contact your local Ethicon Representative to upgrade to Ethicon's Plus Antibacterial sutures to reduce this risk factor in your hospital

References:

- Russo PL, Stewardson A, Cheng AC, et al Establishing the prevalence of healthcare-associated infections in Australian hospitals: protocol for the Comprehensive Healthcare Associated Infection National Surveillance (CHAINS) study *BMJ Open* 2018;8:e024924. doi: 10.1136/bmjopen-2018-024924
- Edmiston CE, Daoud FC, Leaper D. Is there an evidence-based argument for embracing an antimicrobial (triclosan)-coated suture technology to reduce the risk for surgical-site infections?: A meta-analysis. *Surgery* 2013;154:89100.
- Ming X, Rothenburger S, Yang D. In vitro antibacterial efficacy of Monocryl Plus Antibacterial Suture (poliglecaprone 25 with triclosan). *Surg Infect (Larchmt)*. 2007;8(2):201-207
- Rothenburger S, Spangler D, Bhende S, Burkley D. In vitro antimicrobial evaluation of Coated Vicryl Plus Antibacterial Suture (coated polyglactin 910 with triclosan) using zone of inhibition assays. *Surg Infect (Larchmt)*. 2002;3(suppl):S79-S87.
- Ming X, Rothenburger S, Nichols D. In vivo and In vitro antibacterial efficacy of PDS Plus Antibacterial Suture (polydioxanone with triclosan) suture. *Surg Infect (Larchmt)*. 2008;9(4):451-458
- Australian Guidelines for the Prevention and Control of Infection in Healthcare, Canberra: National Health and Medical Research Council (2019). Accessed: <https://www.nhmrc.gov.au/health-advice/public-health/preventing-infection>.
- de Jonge SW, Atema JJ, Solomkin JS, Boermeester MA. Meta-analysis and trial sequential analysis of triclosan-coated sutures for the prevention of surgical site infection. *Brit J Surg*. 2017;ePub-DOI: 10.1002/bjs.10445.

NHMRC GUIDELINES¹

The **2019 NHRMC guidelines provide a nationally accepted approach to the prevention of surgical site infection (SSI)**. The Guidelines provide a basis for healthcare workers and facilities to develop detailed protocols and processes for infection prevention and control.

Infection control is a health and safety issue, which means that all those working in the healthcare facility are responsible for providing a safe environment for patients and other staff. To be effective, infection prevention and control must be a priority in every healthcare facility.



To access the complete and latest guidelines scan the QR code for full details.

Key extracts from the NHMRC infection prevention and control guidelines, focusing on surgical site infections include:¹



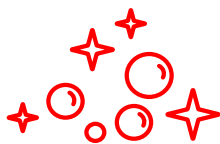
Advise patients to **shower or have a bath** (or help patients to shower, bath or bed bath) using **soap**, either the day before or on the day of, surgery.



If indicated, it is suggested that **antibiotics are administered within 120 minutes before the incision**, whilst considering the half-life of the antibiotics.



Perform **hand hygiene** according to the guideline advice. To access scan the QR code.



In hospital settings, wear **sterile gowns** during the procedure



Avoid routine removal of hair - if clinical circumstances require hair removal, it should be clipped on the day of surgery or as close as possible to the time of operation.



Prepare the skin at the surgical site immediately before incision using an **antiseptic preparation, preferably chlorhexidine**.



Preoperative and intraoperative warming can be used to reduce SSI rates.



Using **antimicrobial-coated sutures (triclosan coated)** can help to reduce SSI rates.



Use **aseptic technique** for changing or removing surgical wound dressings.

1. Australian Guidelines for the Prevention and Control of Infection in Healthcare, Canberra: National Health and Medical Research Council (2019)