



3M™ Cavilon™ Advanced Skin Protectant Product Overview
3M Critical and Chronic Care Solutions Division



What is it?



Liquid barrier with a completely novel formulation



Ingredients	What They Do	Which Means
Acrylic Tetrapolymer	Creates a highly durable <i>elastomeric</i> barrier on skin	Better skin protection: greater durability/better integrity Fewer applications (2-3x/wk vs every episode)
2-Octyl Cyanoacrylate	Enables attachment/adherence to wet/weepy damaged tissue	Barrier stays in place even when skin is severely damaged (denuded)
HMDS	Non-stinging delivery of tetrapolymer and cyanoacrylate onto skin	Comfortable application



3M™ Cavilon™ Advanced Skin Protectant

- Prevents, Stops and Reverses IAD
- Superior barrier performance allows/enables damaged skin to heal
- Helps to control minor bleeding and weeping of serous fluid
- Helps reduce risks that contribute to pressure ulcers
- Ability to attach to wet, weeping skin enables product to do a superior job of protecting skin from irritants
- Protective barrier reduces pain associated with IAD and IAD care
- Single use-disposable applicator-reduced risk of cross contamination

This product can change clinical practice!!

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What Should You Use 3M™ Cavilon™ Advanced Skin Protectant For?

Category 2: Incontinence-Associated Dermatitis (IAD)

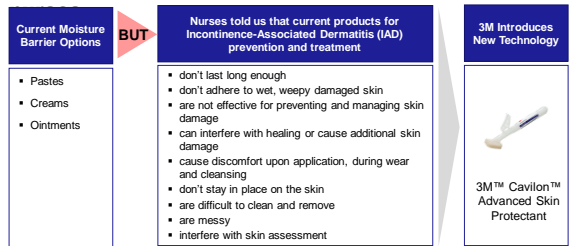
TABLE 1 | IAD Severity Categorisation Tool

Clinical presentation	Severity of IAD	Signs**
	No redness and skin intact (at risk)	Skin is normal as compared to rest of body (no signs of IAD)
	Category 1 – Red* but skin intact (mild)	Erythema +/-oedema
	Category 2 – Red* with skin breakdown (moderate-severe)	As above for Category 1 +/-vesicles/bullae/skin erosion +/- denudation of skin +/- skin infection

* Or paler, darker, purple, dark red or yellow in patients with darker skin tones.
**If the patient is not incontinent, the condition is not IAD

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We developed 3M™ Cavilon™ Advanced Skin Protectant to meet the unmet needs of patients and



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10

Pastes and ointments have many limitations

- Gritty texture/thick consistency**
- Can hurt on application and removal
 - Can be difficult to clean and remove
 - "Work-around"- manufacturers advise removing only the top layer!

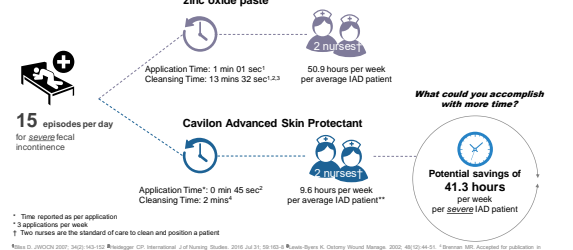


- 3M™ Cavilon™ Advanced Skin Protectant**
- 2-3x/week application minimizes contact with damaged skin
 - No removal needed - wears off
 - Easy to clean
 - Easier for the nurse!!

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11

3M™ Cavilon™ Advanced Skin Protectant can reduce nursing time to manage IAD associated with AFI-D



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12

Pastes and ointments have many limitations

Pastes/ointments are occlusive and will trap moisture on skin

- "Work-around"
 - Some clinicians recommend just a thin layer and just around the anal opening!



Better for skin!!

3M™ Cavilon™ Advanced Skin Protectant

- Breathable

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13

Pastes and ointments have many limitations

Pastes and ointments are opaque

- Must be removed for accurate assessment



3M™ Cavilon™ Advanced Skin Protectant

- Transparent so nurses can visualize and continuously assess the patient's skin

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14

Pastes and ointments have many limitations

Pastes and Ointments are provided in multi-use tubes

3M™ Cavilon™ Advanced Skin Protectant

- Single-use applicator
- Avoids potential cross-contamination



Nurse do not change gloves as often as they should

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15

Improving your IAD protocol can benefit your PPU prevention efforts

The risk of developing pressure ulcers has been found to increase as the severity score for IAD increases*

1.9 odds ratio
The likelihood of developing a pressure ulcer increases by a ratio of **1.9** for every **1-point increase** in IAD severity score (odds ratio = 1.9, 95% CI = 1.237-2.917)**

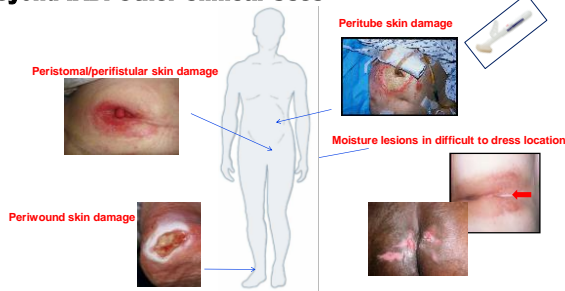
Patients with IAD are at a significantly higher risk of superficial sacral pressure ulcers†

44%
Superficial sacral pressure ulcers developed in **44.4%** of patients who had IAD versus 12.2% of patients who did not have IAD (p=0.10)

2.99 odds ratio
Patients with IAD are at an increased risk of superficial sacral pressure ulcers with an odds ratio of **2.99** (CI: 1.20-7.52, p=0.19)†

*Hermann, J Adv Nurs 2014; Aug 15. #194-191. J WOCN 2014;41(5):424-25. #1066096. Wounds International 2015. © 2015, All Rights Reserved.

Beyond IAD: Other Clinical Uses



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What is the evidence for 3M™ Cavilon™ Advanced Skin Protectant?

The image shows the cover of a document titled "3M™ Cavilon™ Advanced Skin Protection Summary of Clinical Evidence". The cover is white with a blue and purple geometric pattern on the right side. The 3M logo is in the top left corner.

3M™ Cavilon™ Advanced Skin Protectant has proven durability and allows damaged skin to heal

Superior durability

Cavilon Advanced Skin Protectant is significantly more durable than those products tested¹

Code	Product Name
Code A	3M Cavilon Advanced Skin Protectant
Code B	Moline Marathon Liquid Skin Protectant MSC09305
Code C	Smith & Nephew No-Sling Skin Prep REF 59420700
Code D	Moline Sureprep No-Sling Skin Protective Barrier Wound Ref MSC15113

Adheres to wet, weepy tissue

Reduces pain associated with IAD

Cavilon Advanced Skin Protectant's superior durability may reduce nursing time

Cavilon Advanced Skin Protectant is highly durable, requiring application 2 to 3 times per week, instead of with every cleansing which reduces the required to manage IAD

Minimizing frequent contact with damaged skin may help promote healing reduce patient discomfort

¹ Day et al. 2016. D. Sherr, C. Sack, K. Smith, G. Madson, E. An. Economic Evaluation of Full Skin Change Prevention: Progress in Healing Healed Residents With Incontinence. J WOCN 2017;24(2):103-107. Bennett MR, Sherr CT. Appl Nurs Res 2016;39:100-106. Clinical evaluation of a barrier film for the management of incontinence-associated dermatitis (IAD) in an open label, non-randomized, prospective study. Accepted for publication in Journal of Wound, Ostomy and Continence Rehabilitation. DOI: 10.1016/j.woc.2016.08.002. © 2017 3M. All rights reserved.

3M™ Cavilon™ Advanced Skin Protectant adheres to wet, weepy tissue

Superior durability

Adheres to wet, weepy tissue

Reduces pain associated with IAD

Cavilon Advanced Skin Protectant results in:¹

- 1.9 times less wound exudate²** (2.231g vs. 4.232g, N = 6, preclinical)
- 18.3% greater re-epithelialization³** (p=0.003, 95% CI=3.2%-27.5%, N = 7)

Cavilon Advanced Skin Protectant has been shown to significantly improve severe cases of IAD even in the presence of continued incontinence⁴

- 81.3%** Percent of severe IAD patients with improved IAD scores when Cavilon Advanced Skin Protectant was used (N = 9)⁴
- 96%** Median percent improvement in IAD score - significantly different from auto. (p=0.013 by Wilcoxon Signed-Rank test (N=13))⁴
- 33.3%** Percent of patients with epidermal skin loss who had complete re-epithelialization with 4-6 applications of the new product (N = 12)⁴

¹ Bennett MR, Sherr CT, Appl Nurs Res 2016;39:100-106. Clinical evaluation of a barrier film for the management of incontinence-associated dermatitis (IAD) in an open label, non-randomized, prospective study. Accepted for publication in Journal of Wound, Ostomy and Continence Rehabilitation. DOI: 10.1016/j.woc.2016.08.002. © 2017 3M. All rights reserved.

3M™ Cavilon™ Advanced Skin Protectant can reduce pain associated with IAD

Superior durability

Adheres to wet, weepy tissue

Reduces pain associated with IAD

Cavilon Advanced Skin Protectant eliminates difficult cleansing and does not require removal minimizing irritating and frequent contact with damaged skin¹

Cavilon Advanced Skin Protectant is easy to cleanse, does not require removal, and is applied 2-3 times per week minimizing irritating and contact with damaged skin

Cavilon Advanced Skin Protectant is also transparent, allowing inspection damaged skin without removing the product

Cavilon Advanced Skin Protectant helps reduce patient pain¹ which improves patient comfort, quality of life and the patient experience / perceived quality of care

100% Percent of patients with severe IAD reporting pain on Day 1 who have a substantial reduction in pain with the use of Cavilon Advanced Skin Protectant by the end of the study (N = 9)¹

Cavilon Advanced Skin Protectant avoids a potentially painful sensation from a temperature rise typically seen with application of cyanacrylate-based products on denuded skin

¹ Bennett MR, Sherr CT, Appl Nurs Res 2016;39:100-106. Clinical evaluation of a barrier film for the management of incontinence-associated dermatitis (IAD) in an open label, non-randomized, prospective study. Accepted for publication in Journal of Wound, Ostomy and Continence Rehabilitation. DOI: 10.1016/j.woc.2016.08.002. © 2017 3M. All rights reserved.

3M™ Cavilon™ Advanced Skin Protectant does not support the growth of organisms relevant to incontinent patients *in*

Agar plates after a 48h incubation
Left: Plates seeded with microorganisms
Right: Plates coated with a stripe of Cavilon Advanced Skin Protectant, then seeded with microorganisms

Methicillin-resistant
Staphylococcus aureus
ATCC 33592



Pseudomonas aeruginosa
PA-O1



Candida albicans
ATCC 10231



Cavilon Advanced Skin Protectant does not support the growth of microorganisms and forms a film barrier to bacteria and yeast associated with incontinence

Single application of strip of Cavilon Advanced Skin Protectant on agar plate leads to no growth over the product for at least 48 hours

10 bacterial species (Gram+ and Gram-) and 3 yeasts were tested in duplicate and all showed no growth over the stripe of Cavilon Advanced Skin Protectant

†K10462 | Manuscript in preparation for submission to Advances in Wound Care



