

Vacutex™

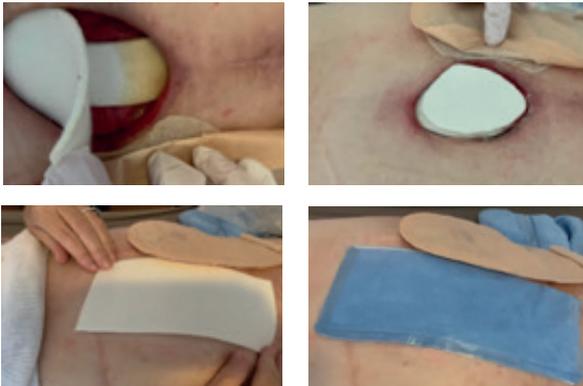
Examples of applying Vacutex™

Vacutex™ can be cut to any shape and adapted to most specific wounds, for superficial, deeper, undermined wounds as well as for fistulas.

Necessities:

- Correct size Vacutex™
- Scissors
- If needed silicone wound dressing
- Absorbent dressing
- Fixation material

Wound with undermining after colostomy:



- Fill up undermining with cut-to-size Vacutex™, make sure Vacutex™ touches the wound bottom
- Then apply another (cut to size) Vacutex™, continue filling up the wound until skin level is reached
- Then apply a widely overlapping Vacutex™
- Finally, apply an (super) absorbent dressing and fix it

Application of Vacutex™ in combination with Multidex®:

- Apply Multidex gel or powder directly to the wound bed
- Apply a silicone wound dressing if necessary
- Then apply a widely overlapping Vacutex™
- Finally, apply an absorbent dressing and fix it



Fixate Vacutex™ with dovetails:



In combination with dovetails

Different ways of applying and fixing Vacutex™, for example pressure ulcers:



drain (1-40 cm)



or



"appel peel" cut



applying, for example, hydrocolloid to protect the wound edges



(super) absorberend dressing

*Or in combination with drain-
or stoma bag.*



With direct bone or tendon contact applying Vacutex™:



- In case of direct bone or tendon contact, first apply a silicone wound dressing.
- Then apply Vacutex™
- If necessary, apply (super) absorbent bandages
- Then fixate

Use of Vacutex™ under compression therapy:

- Cut the Vacutex™ slightly smaller than the wound bed (2-3mm)
- Fill the wound up to skin level
- **For a superficial wound; Cut a widely overlapping Vacutex™ in an oval and apply (this will prevent pressure marks on the tips / ends of the dressing under the compression therapy)**
- Apply a (super) absorbent dressing on top
- Fixate if necessary
- Apply compression therapy

Usage of Vacutex™ in wounds with hypergranulation:

- If hyper granulation develops, continue treatment with Vacutex™! Hypergranulation will disappear during treatment.



Removal of Vacutex™:

- Soak Vacutex™ with physiological saline or wound wash solution, then carefully remove



What is VACUTEX™:

The Vacutex™ wound dressing creates a vacuum effect by means of capillary function.

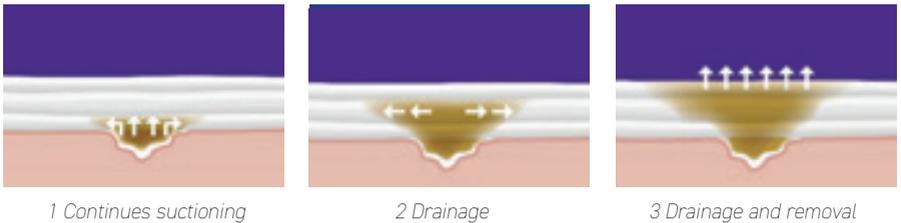
It is not identical to NDT but has an autologous mechanism similar to NDT.

It consists of a 3-layer structure of polyester and polyester-cotton filaments.

Vacutex™ is not a foam dressing, (Super) absorbent dressing, or hydrofiber.

Clinically, Vacutex™ is the first wound dressing capable of significantly influencing Oxygen, Exudate and Edema levels in and around the wound.

Working principle:



Indications: Diabetic Foot ulcers, pressure ulcers, venous leg ulcers, fistulas, burns, surgical wounds. Vacutex™ can be used perfectly in combination with a hydrogel.

Contra-indications:

Vacutex™ must **not** be used:

- In arterial bleeding
- If patients are allergic to polyester
- Vaseline-based dressings in combination with Vacutex™ block the capillary action of the dressing
- Malignancy in the wound
- Untreated osteomyelitis
- Non-enteral fistulas and unexplored fistulas
- Necrotic tissue in which crusting is present
- Free blood vessels or organs
- *Caution in patients who are taking anticoagulants or who have difficult wound haemostasis*

Short user manual Vacutex™:

- Cut the Vacutex™ dressing 2-3mm smaller than the wound edges. (This way the wound edges can grow together during the treatment)
- For deep wounds, apply the required number of layers down to skin level, so that the wound is completely filled
- Apply Vacutex™ in (any present) undermining (s) up to the wound floor.
- In case of direct bone or tendon contact, first apply a silicone wound dressing. On top of that the Vacutex™ dressing
- Cover the wound & intact surrounding skin with an extra layer of Vacutex™
- If there is a lot of wound fluid; put a super absorbent dressing on top of the Vacutex™ dressing. When saturated, leave Vacutex™ dressing on and apply a new absorbent dressing
- With hyper granulation, do not stop Vacutex™, continue the treatment, you will see that the hyper granulation disappears
- Vacutex™ can be used under compression therapy (eg For venous leg ulcers); Use a non-adherent layer as the primary contact layer, as the compression bandages can last up to a week (3, 5 or even 7 days)
- With a deeper wound under compression, stack the Vacutex™ to skin level. Cover with an absorbent bandage. With a superficial wound, if you decide to apply Vacutex™ over the wound edges, make sure the Vacutex™ is applied generously over the wound and cut into an oval, this will prevent (new) pressure marks from the tips / ends of the dressing underneath the compression therapy
- 2-3 dressing changes per week

