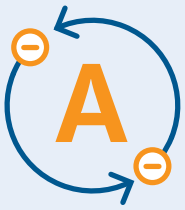

Medela
Innovates
the Standard
of Care.
medela

Fundamental Requirements for Effective NPWT[1,2]:



The **set level of negative pressure** must be accurately delivered to the wound bed.

A **pressure gradient** between the wound bed and the canister for efficient fluid removal must be created.

A **sealed wound environment** must be maintained.

The Standard of Care

International Consensus Recommendation for NPWT Systems

NPWT systems should use an electronically controlled feedback system to ensure the maintenance of the selected pressure level (for example, –50 to –200 mmHg) even in the presence of small air leaks, guaranteeing the effectiveness of NPWT. The electronically controlled feedback system, not implemented in all mechanical systems, ensures the maintenance of the selected pressure level giving the patient higher safety.[1]

Keys to Success

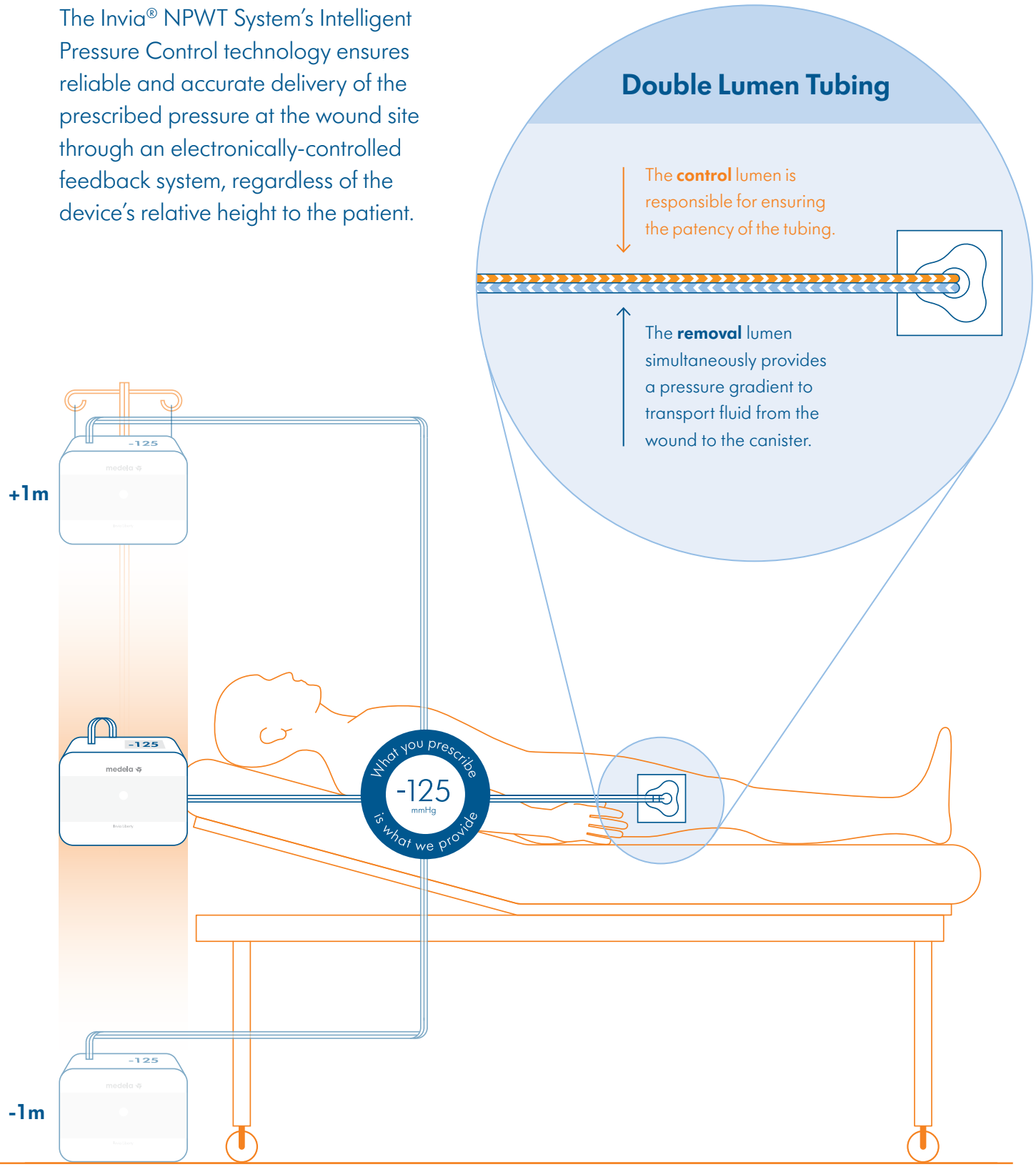
Successful NPWT devices can manage changes in fluid volume and viscosity.[2] The most reliable systems are able to prevent fluid stagnation or blockages in the tubing, which is essential to ensure the prescribed pressure is accurately delivered to the wound bed and maximize the healing potential.

There has been little innovation to the way NPWT is delivered and controlled at the wound bed and the manner in which fluid removal is managed–**until now**.

Medela has developed ways that improve NPWT performance through our **Intelligent Pressure Control™** and **Dynamic Exudate Removal™** technology.

Intelligent Pressure Control™

The Invia® NPWT System's Intelligent Pressure Control technology ensures reliable and accurate delivery of the prescribed pressure at the wound site through an electronically-controlled feedback system, regardless of the device's relative height to the patient.

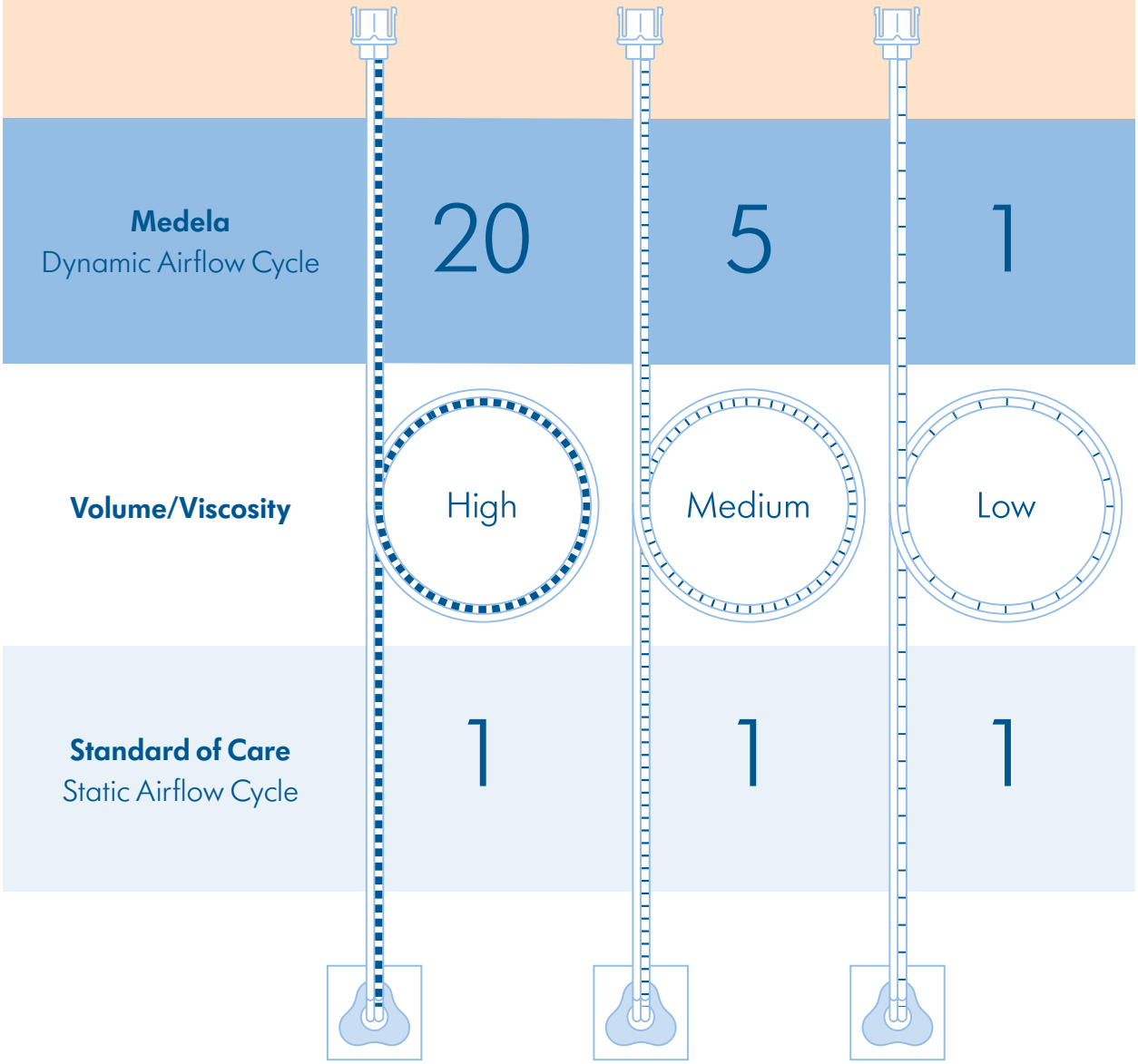


Dynamic Exudate Removal™

The Invia® NPWT System's Dynamic Exudate Removal technology senses changes in fluid volume and viscosity and dynamically adjusts airflow cycles to actively prevent blockages. By contrast, the standard NPWT system has static airflow cycles which only occur once every 5 minutes regardless of changes in the wound.

Dynamic vs Static Airflow Cycles per 5 Minutes

Airflow cycles: preset purges to check for blockages and create the pressure gradient necessary for fluid removal.



Medela Invia® Liberty™ vs. 3M+KCI V.A.C.ULTA™

When put to the test,* the Invia Liberty System consistently outperformed the V.A.C.ULTA.[3]

TEST METHOD #1:

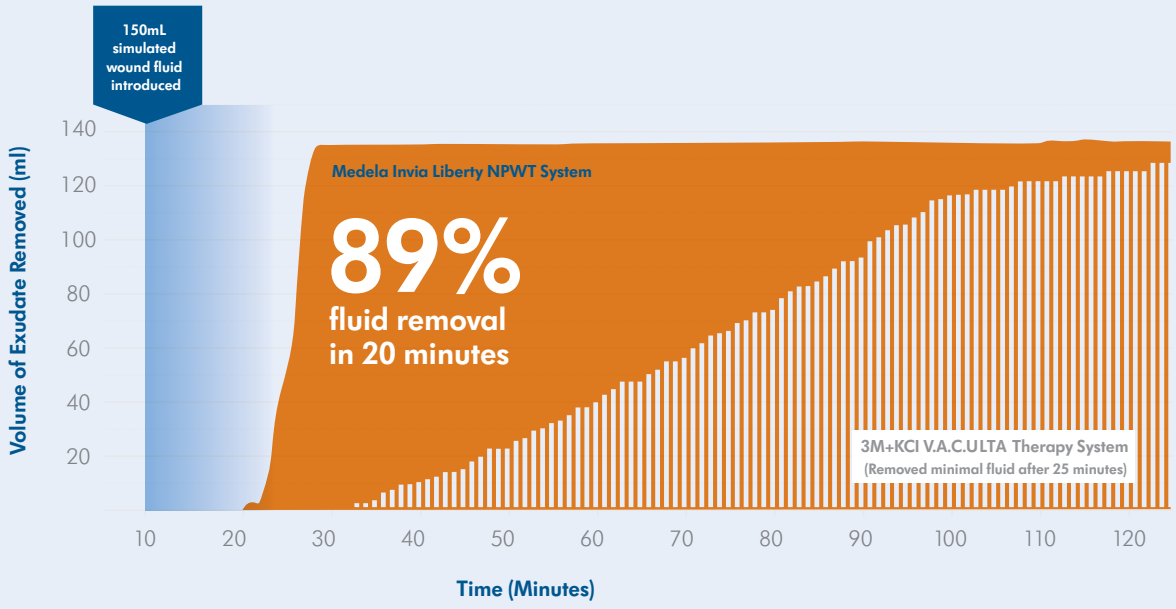
Accurate pressure delivery to the wound bed regardless of device position

Through the use of an electronic feedback system, both the Invia Liberty and V.A.C.ULTA meet the standard of care for NPWT as recommended by EWMA.

TEST METHOD #2:

Efficiency of fluid removal from the wound

The Invia Liberty evacuated 89% of the fluid in less than 20 minutes while the V.A.C.ULTA made minimal progress toward removing any fluid at all during that same time. In the end, the V.A.C.ULTA did not reach the same 89% fluid removal throughout the duration of the experiment (125 minutes long). The Medela system provided a more consistent pressure level over time, which innovates the standard of care.



The Invia NPWT System removes fluid more efficiently, innovating the standard of care.

* Testing was conducted at an independent third party laboratory using a test protocol designed by Medela AG. Outcomes may not be indicative of clinical performance.

Healthcare is changing. Has your NPWT evolved?

REFERENCES:

1. Apelqvist J, Willy C, Fagerdahl AM, et al. EWMA document: negative pressure wound therapy overview, challenges and perspectives. J Wound Care. 2017;26(Suppl 3):S1–S113.

2. Harding K, Carville K, Chadwick P, et al; Core Expert Working Group. WUWHS Consensus Document: wound exudate, effective assessment and management. Wounds Int.2019. https://www.woundsinternational.com/resources/details/wuwhs-consensus-document-wound-exudate-effective-assessment-and-management.

3. Paglinawan R, Schwab P, Bechert K. Negative pressure wound therapy system Innovates standard of care via intelligent pressure control and dynamic exudate removal. Wounds. 2020;32(10):S1-S8.

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