WOUND CARE
BECAUSE YOU CARE

ALGINATE

HIGHLY ABSORBENT
HIGH WET STRENGTH
LOW RISK OF MACERATION
LOW LATERAL WICKING

ALGINATE ABSORBENT DRESSING IS CONFORMABLE AND AIDS MOIST WOUND HEALING.
**ACTIVHEAL® ALGINATE IS A SODIUM CALCIUM ALGINATE DRESSING INDICATED FOR THE TREATMENT OF MODERATE TO HEAVILY EXUDING WOUNDS AS A PRIMARY DRESSING.**

ActivHeal® Alginate is manufactured by processing natural elements found in seaweed to produce felt and rope dressings.

The absorbent alginate fibres in the dressing gel on contact with the wound fluid and gently conform to the wound surface. Alginites absorb exudate away from the wound whilst maintaining an ideal moist wound environment. The versatility of ActivHeal® Alginate allows the dressing to be used on a variety of wounds, including cavity wounds.

**PERFORMANCE**

ActivHeal® Alginate dressings are highly absorbent whilst promoting a moist wound environment. The graphs below demonstrated its performance when compared with other Alginate dressings. When ActivHeal® Alginate dressings are applied to an exuding wound the sodium salts present in exudate exchange with calcium in the alginate to form a hydrophilic gel. The high wet strength of ActivHeal® Alginate ensures the dressing remains integral upon removal. Alginate fibres are biodegradable and therefore any residual fibres that remain after a dressing change pose no risk to patient safety. Alginate fibres have naturally haemostatic properties, as following absorption of wound exudate the alginate dressing releases calcium ions into the wound, which can activate platelets to control minor bleeding.

**INDICATIONS**

ActivHeal® Alginate is indicated for moderate to heavily exuding wounds that are granulating or with areas of slough, including:

- Pressure ulcers
- Venous and arterial leg ulcers
- Diabetic ulcers
- Cavity wounds
- Lacerations
- Skin abrasions
- Graft donor sites
- Post operative surgical wounds
- Superficial and partial thickness burns
- To control minor bleeding in superficial wounds

**CASE STUDY**

Mr B is a 55 year old male with type 2 diabetes and peripheral neuropathy. Mr B whilst on holiday scalded his foot and didn’t receive appropriate treatment. The patient presented to hospital 20 days after the initial injury, he had been treated with a low dose of oral antibiotics and a non-adherent dressing. However he unfortunately developed a gangrenous toe with associated osteomyelitis. Subsequently the patient underwent a surgical amputation of his second and third toes on his left foot. ActivHeal® Alginate dressing was selected as the wound was highly exuding.

1. Week 1 - The wound following amputation was highly exuding and comprised of 90% slough.
2. Week 4 - The wound showed signs of progression with a significant reduction in size and newly formed epithelial tissue being present.
3. Week 9 - The wound showed a significant sign of improvement with a small area of granulating tissue.

**REFERENCES**