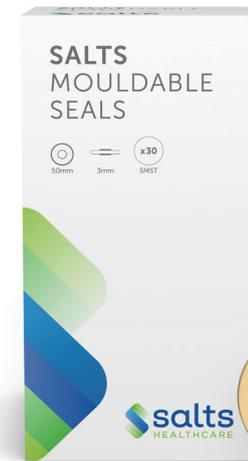




SALTS

MOULDABLE SEALS

IN PRACTICE



Recognising Salts research
into healthy stome skin



DERMATOLOGICALLY
ACCREDITED



PATIENT CASE STUDY ONE



PATIENT HISTORY

32 year old female.

DIAGNOSIS:

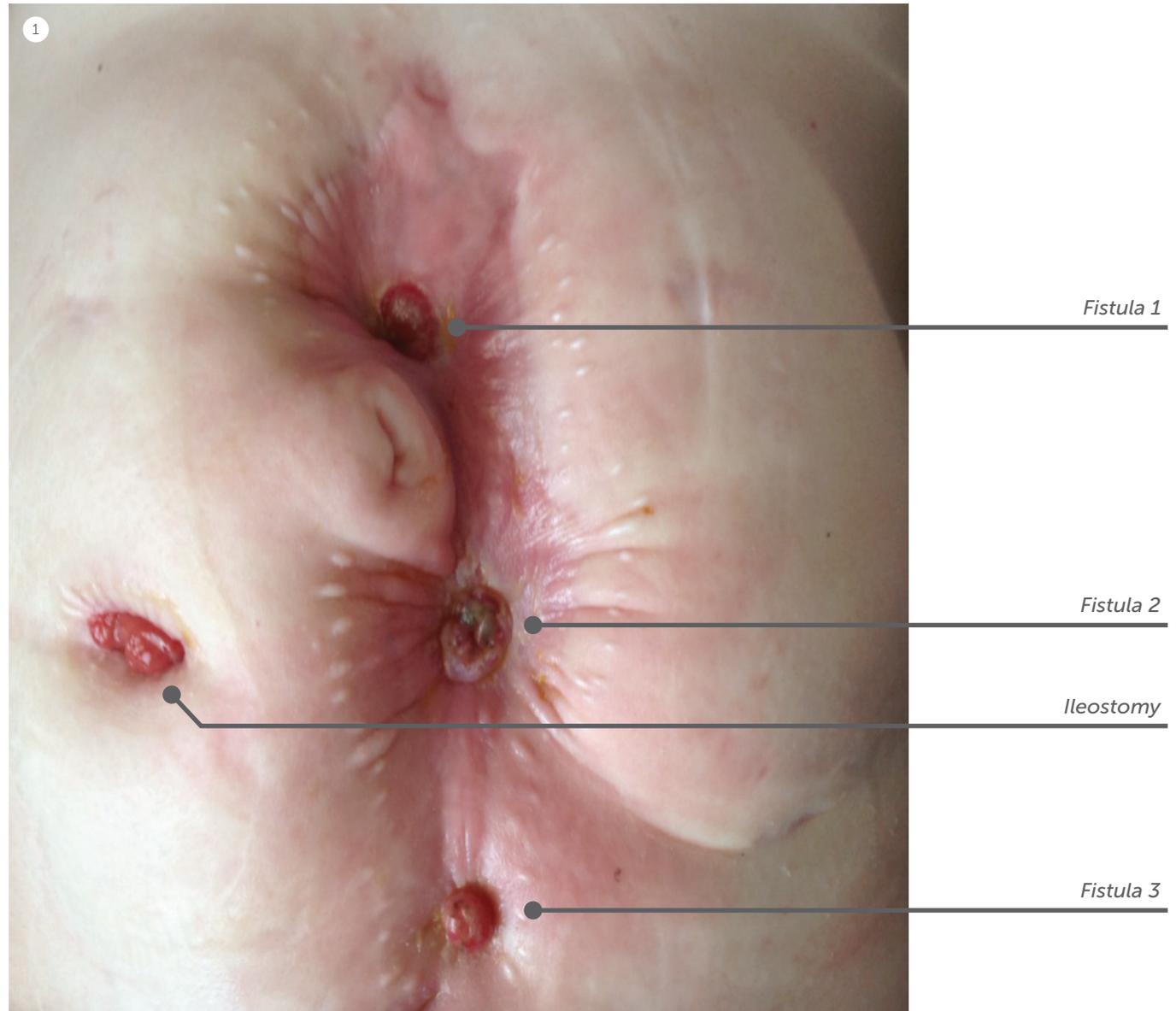
Crohn's Disease in 2007

- ▶ Recurrent intra-abdominal collections admitted to local hospital
- ▶ Referred to London hospital for fistula removal surgery and TPN
- ▶ While at London hospital, developed small bowel perforation and had emergency surgery performed – open laparotomy
- ▶ After 4 months in hospital, discharged home with ileostomy and x3 enterocutaneous fistulae (Ref 1)



OBSERVATION ON REFERRAL

- ▶ Patient was leaking from fistula dressings: between 3–4 per day
- ▶ District Nurses were not able to manage stoma care and specific fistula needs
- ▶ Peristomal skin was red, irritated, sore and very sensitive
- ▶ Ileostomy active – approx 500ml per day
- ▶ High output from fistulae, and on daily TPN
- ▶ Patient was using many accessories and had no system when applying these products
- ▶ Due to leakages, the patient lacked confidence and was unable to return to work



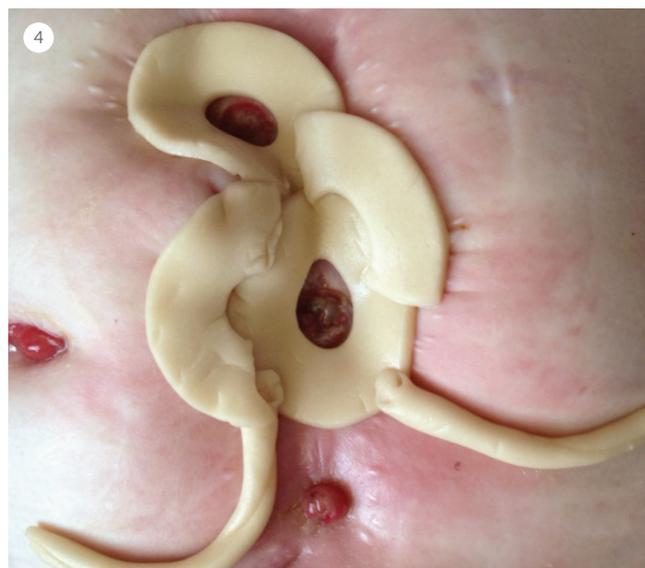
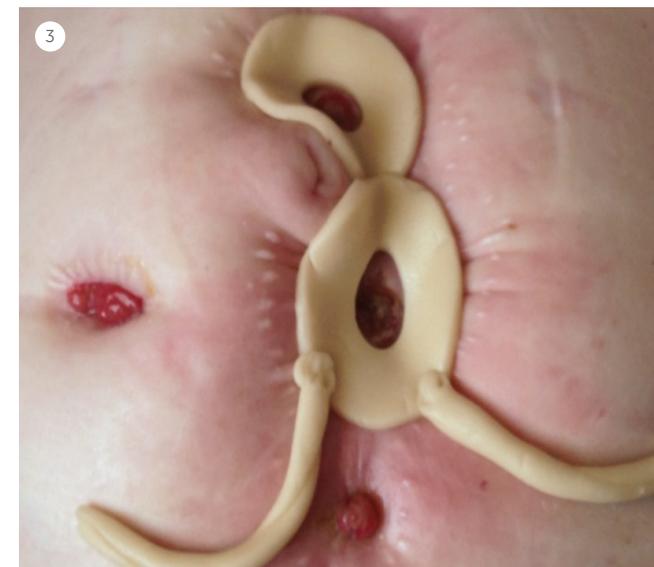
TREATMENT

- ▶ The peristomal skin was clean, dried well and protective skin barrier applied
- ▶ Ileostomy was isolated and a separate drainable bag applied
- ▶ 2 x Salts Mouldable Seals (Standard) were used to mould around 2 central fistulae (Ref 2)
- ▶ 1 x Salts Mouldable Seal (Standard) was broken in half and rolled into skin folds (Ref 3)
- ▶ 1 x Salts Mouldable Seal (Standard) was broken in half and placed over creases (Ref 4)
- ▶ Wound and fistula bag and paediatric bag were applied (Ref 5)

RESULTS

- ▶ Ileostomy and fistula dressing stayed intact for 2–3 days
- ▶ Patient found Salts Mouldable Seals easy to apply and mould around each fistula
- ▶ We were able to customise the Salts Mouldable Seal to fit into contours and creases
- ▶ Seals were skin-friendly and easy for the patient to self-apply
- ▶ The patient is now back to work part-time and is more confident
- ▶ No further plans for surgery to close the fistulae

“The patient is now back to work part-time and is more confident.”



PATIENT CASE STUDY TWO



PATIENT HISTORY

93 year old female.

DIAGNOSIS:

Colostomy

- ▶ Failing eyesight
- ▶ Stoma care routine had deteriorated over the previous 6 months
- ▶ Limited community support from a care agency



OBSERVATION ON REFERRAL

- ▶ Using excessive amounts of closed bags over 24-hour period
- ▶ Misplacing the pre-cut aperture, which was no longer the correct size
- ▶ Colostomy identified with sore and over-granulated areas scattered around the muco-cutaneous junction (Ref 1)
- ▶ Bleeding was common at bag removal
- ▶ The patient was distressed as she was unsure of the cause of bleeding



TREATMENT

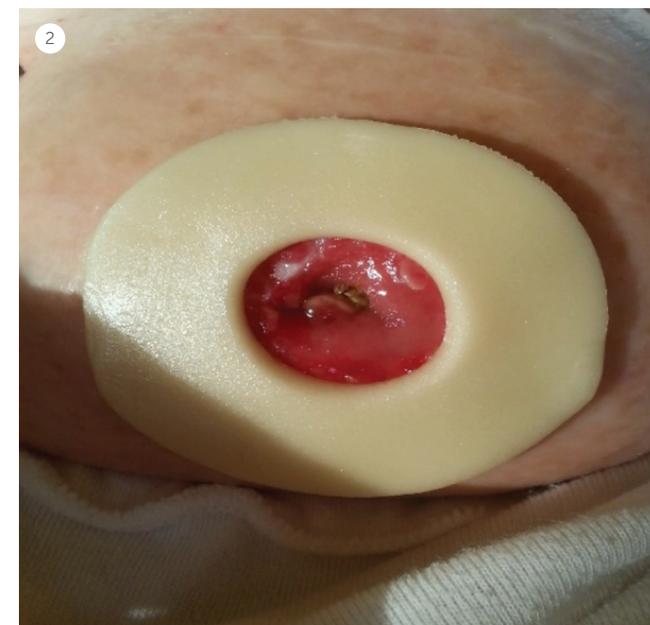
- ▶ Salts Mouldable Seal (Standard) (Ref 2)
- ▶ Salts Confidence® Natural closed bag
- ▶ Salts Adhesive Remover Wipes

RESULTS

- ▶ After 2 months, the red and inflamed mucosa had virtually healed (Ref 3)
- ▶ Despite further healing needing to take place, the over-granulation at the muco-cutaneous junction presented more evenly and the edge of the stoma was more defined
- ▶ Patient reported that the area felt more comfortable
- ▶ Staff caring for her are now familiar with her routine, find the seal easy to use and have noticed the improvement to this lady's skin

"Patient reported that the area felt more comfortable."

"Staff find the seal easy to use and have noticed the improvement to her skin."



PREVIOUS PRACTICE

PRODUCT CODE	MANUFACTURER	AMOUNT PER MONTH
N13	Salts Confidence® Natural bag	150
WAP	Salts Adhesive Remover Spray	3

RECOMMENDED PRACTICE

PRODUCT CODE	MANUFACTURER	AMOUNT PER MONTH
N13	Salts Confidence® Natural bag	60
WAP	Salts Adhesive Remover Spray	3
SMSS	Salts Mouldable Seals, Standard	60

PATIENT CASE STUDY THREE



PATIENT HISTORY

59 year old female.

DIAGNOSIS:

Sigmoid colectomy for diverticular disease in 2000

- ▶ 3 surgeries for adhesions
- ▶ Division of adhesions in January 2015 resulted in formation of a small bowel fistula
- ▶ Treated both in hospital and in the community



OBSERVATION ON REFERRAL

- ▶ Patient discharged with convex bags, stoma paste and a belt that were lasting about 12 hours



TREATMENT

- ▶ Combination of large and small Salts Mouldable Seals with Salts Stoma Paste to create a barrier, with wound and fistula bag over fistula (Refs 1–5)
- ▶ This now lasts for 24–36 hours

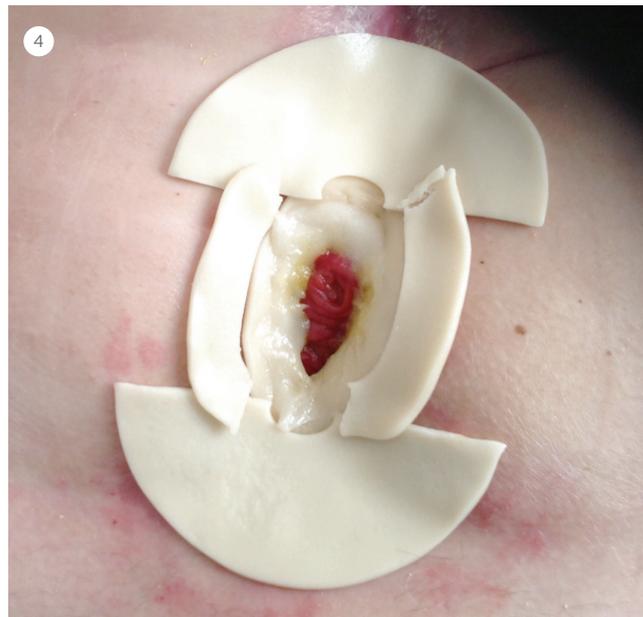
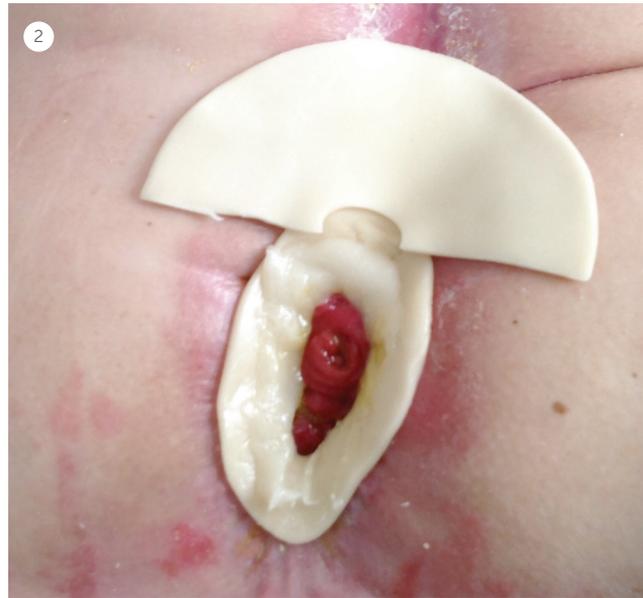




RESULTS

- ▶ The patient is now eating and drinking well and has a varied output
- ▶ Seals and paste stop any leakage
- ▶ Leakage occurred without the seals
- ▶ The patient dresses herself at home and is starting to go out, feeling more confident that her bag will last 24 hours

“The patient is starting to go out, feeling more confident that her bag will last 24 hours.”



PATIENT CASE STUDY FOUR



PATIENT HISTORY

91 year old female.

DIAGNOSIS:

Left-sided end ileostomy in 1991, following anastomotic leak

▶ She changes her bag daily, for comfort



OBSERVATION ON REFERRAL

▶ Skin raw and weeping, due to stoma output leaking under wafer (Ref 1)

▶ Using a barrier wipe at each change, but was still sore

▶ The stoma was not very well spouted, at times

▶ Moderate parastomal hernia, causing bulge above and a dip/crease underneath

▶ The patient was wearing Salts Confidence® Natural Soft Convex XND1338, cut to 22mm. Template too small. Needed 25mm

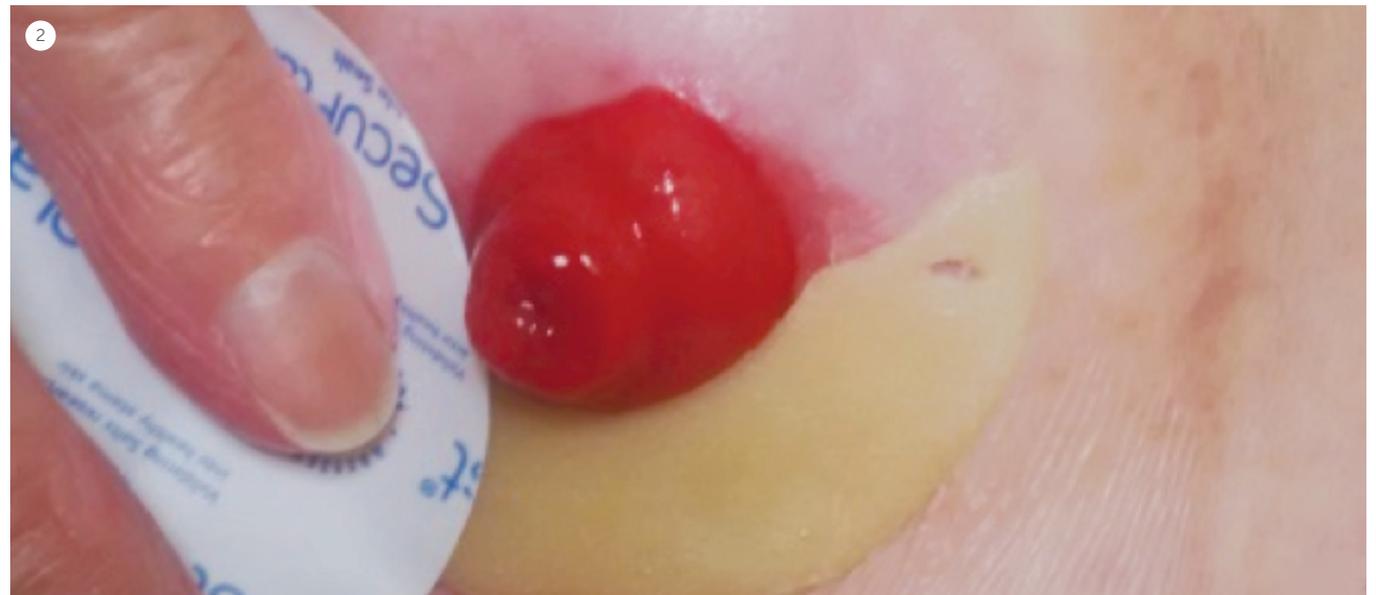


TREATMENT

▶ A thin dusting of powder was applied to raw skin

▶ Half a Salts Mouldable Seal was used, to cover and protect soreness and fill the 'dip' below the stoma (Ref 2)

▶ The patient was shown how to apply and secure the seal, using the release paper to press onto the skin





RESULTS

- ▶ Follow-up 3 weeks later revealed that the skin had almost healed (Ref 3)
- ▶ The patient reported that pain went as soon as she started using the seals and that she hasn't needed to use barrier wipes since
- ▶ She has stopped using the powder
- ▶ Bags were comfortably lasting 2 days, while skin was healing, but the patient has reverted back to changing daily
- ▶ She says the seal was easy to apply and secure. It also removed easily with the bag and left no residue
- ▶ The patient's quality of life has improved. She is no longer in discomfort and knows that, if she would prefer to change her bag less often, she can do so securely.

"The patient reported that the pain went as soon as she started using the seals."



REGIME BEFORE SEAL USE		
PRODUCT CODE	MANUFACTURER	AMOUNT PER MONTH
XND1338	Salts Confidence® Natural Soft Convex bag	30
PPS1	Salts Barrier Film Wipes	30
WAP	Salts Adhesive Remover Spray	2

REGIME WITH SEAL USE		
PRODUCT CODE	MANUFACTURER	AMOUNT PER MONTH
XND25	Salts Confidence® Natural Soft Convex bag	30
SMST	Salts Mouldable Seals, Thin	15
WAP	Salts Adhesive Remover Spray	2

PATIENT CASE STUDY FIVE



PATIENT HISTORY

4 year old girl.

DIAGNOSIS:

Hirschsprung's Disease

- ▶ Had formation of an end Ileostomy and mucous fistula in 2014
- ▶ Discharged from a London hospital but soon developed leaks and problems when applying bag over stoma and mucous fistula



OBSERVATION ON REFERRAL

- ▶ Peristomal skin was red and sore due to close proximity between stomas (Ref 1)
- ▶ Current paediatric bag was leaking one or two times per day
- ▶ The girl's mother was unable to isolate stomas into separate appliances
- ▶ The daughter did not like her bag being changed and found the experience distressing



TREATMENT

- ▶ The peristomal skin was cleaned, dried well and a protective skin barrier applied
- ▶ 1 x Salts Mouldable Seal (Thin) was used to easily mould around both stomas
- ▶ 1 x Salts Mouldable Seal (Thin) was broken into a smaller piece and used to mould between stomas and rejoin to other seal (Ref 2)

RESULTS

- ▶ No leakages
- ▶ Peristomal skin is healed and no longer sore
- ▶ Mum finds Salts Mouldable Seals easy to apply and mould
- ▶ The appliance stayed intact for 24 hours and this resulted in fewer bag changes for the child

“Stayed intact for 24 hours, resulting in fewer bag changes for the child.”



PATIENT CASE STUDY SIX



PATIENT HISTORY

58 year old female.

DIAGNOSIS:

Rectal cancer in May 2015

- ▶ Anterior resection with a defunctioning loop ileostomy
- ▶ Stoma was healthy and the muco-cutaneous junction was intact on discharge



OBSERVATION ON REFERRAL

- ▶ The patient was visited 4 days post discharge
- ▶ Her stoma had dehisced (Refs 1–2)
- ▶ The patient had experienced leakage and her skin was sore



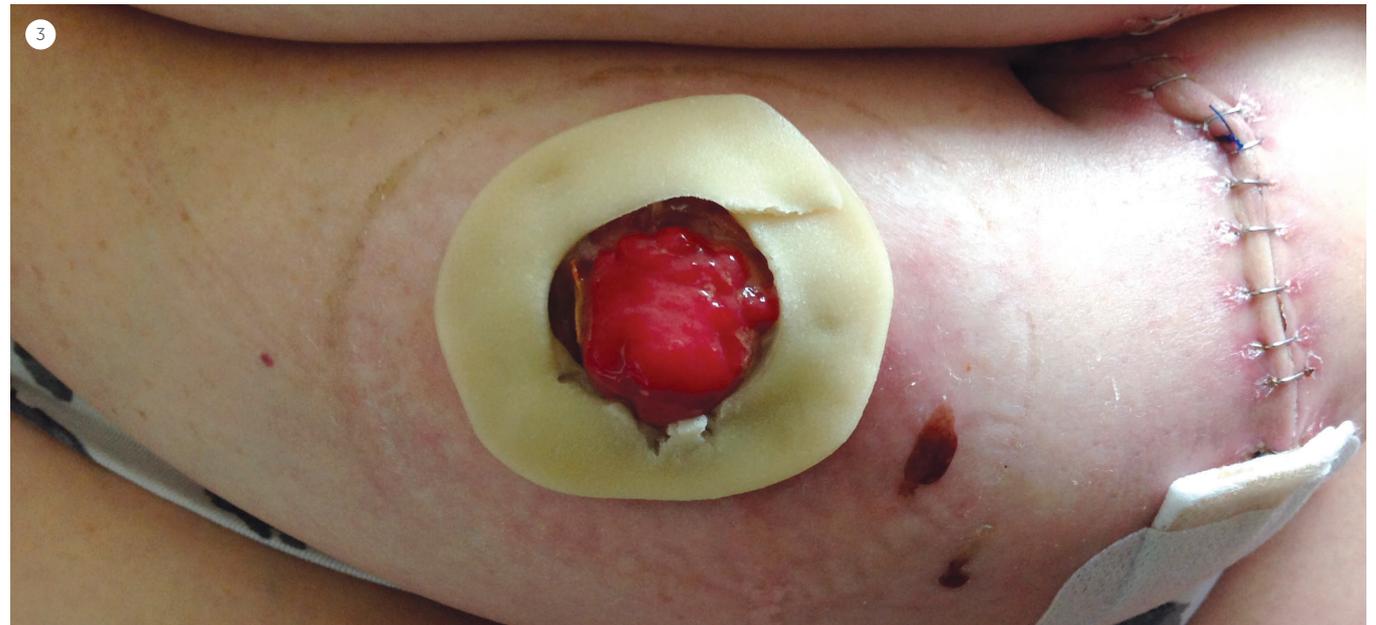
TREATMENT

- ▶ The cavity was filled with stoma powder and covered with a mouldable seal to protect the wound (Ref 3)
- ▶ The patient was asked to repeat this procedure in two days, after which she would be visited again
- ▶ 6 days post treatment, the dehiscence was filling and looking better
- ▶ The procedure was repeated and, 11 days post treatment, sutures were removed and powder was discontinued
- ▶ The seal was continued, to protect the area and stop leakage

RESULTS

- ▶ Completely healed, with patient not experiencing any leakage (Ref 4)

“The patient is not experiencing any leakage.”



THE SCIENCE BEHIND THE SEAL

As well as performing well in practice, Salts Mouldable Seals were also found to be superior in almost every way. We measured mouldability, gel strength and absorption – three of the most crucial attributes of any seal – and Salts Mouldable Seals were found to be superior in almost every way. Tests showed they're easier to mould, absorb more fluid in less time, and stay in place more securely than similar seals.*

96%

of people asked found Salts Mouldable Seals **very easy or fairly easy to mould**

90%

of people asked found Salts Mouldable Seals **very or fairly good at preventing leaks**

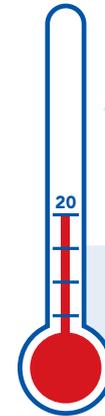
73%

of people asked found that using Salts Mouldable Seals **extended bag wear-time by between 12 and 24 hours**

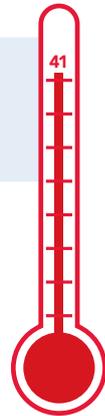
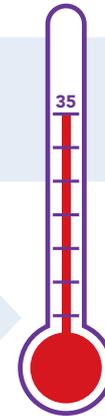
86%

of people asked found Salts Mouldable Seals **left little or no residue**

MOULDABILITY



Salts Mouldable Seals do not have to be warmed before use. At 20°C, Salts Mouldable Seals have a low viscosity and are therefore highly mouldable.

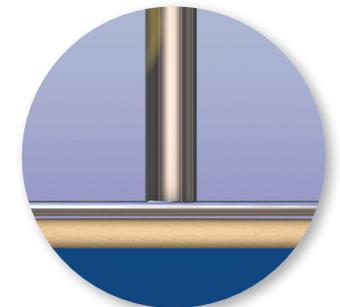


Two of the market-leading seals will not reach the same viscosity until they are warmed to 35°C and 41°C respectively.



By moulding easily and sticking strongly, Salts Mouldable Seals form an effective barrier against leakage.

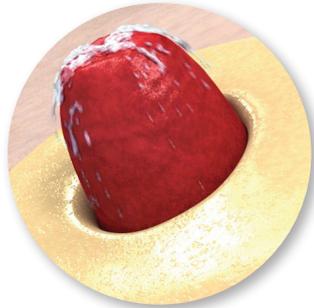
Mouldability is measured by viscometry testing. The less viscous the seal, the more mouldable it is.



Being highly mouldable means Salts Mouldable Seals are ideal for patients with difficult folds and creases around their stomas.

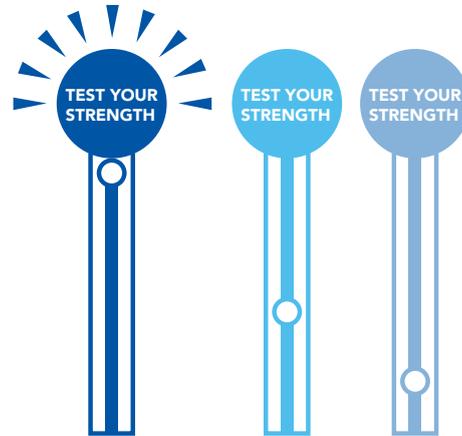
*Data on file at Salts Healthcare Ltd.

GEL STRENGTH



Seals form a gel as they absorb fluid. The strength of that gel determines how effective the barrier is against leakage.

The more viscous the gel, the stronger it is. After absorbing the same amount of fluid, the gel formed by the Salts Mouldable Seals proved to have a higher viscosity than both of the market-leading competitor gels and, in one case, was proven to be twice as strong.



Highly viscous gels are very difficult to displace, even when the body is twisting and turning, and will return more easily to their original position.

ABSORPTION



Even when full of fluid, the gel formed by Salts Mouldable Seals retains its shape, leaving behind little or no residue.

One of the market-leading gels begins to break up when full of fluid and leaves behind a large amount of residue.



Salts Mouldable Seals are excellent at absorbing fluid and transferring it away from the skin, so minimising leaks and protecting the mucocutaneous junction.

A Salts Mouldable Seal has a higher initial absorption rate than both of the competitor products we tested and absorbs fluid much faster than the market leader.

A Salts Mouldable Seal will absorb 3ml of fluid in 75 minutes.

It will take the market leader 165 minutes to absorb the same amount of fluid.



Skin-friendliness

Skin integrity is essential for the normal usage of a stoma appliance. Salts research into skin-friendly hydrocolloids is recognised by the British Skin Foundation and dermatologically accredited by the Skin Health Alliance.



SALTS MOULDABLE SEALS

SIZE	DIAMETER	THICKNESS	ORDER CODES	PACK SIZE
Thin	50mm	3mm	SMST	30
Standard	50mm	4.2mm	SMSS	30
Large	100mm	3mm	SMSL	10

SALTS ADHESIVE REMOVER

DESCRIPTION	ORDER CODES	PACK SIZE
Spray	WAP	50ml
Wipes	WAP2	30 sachets

SALTS FLANGE EXTENDER WITH ALOE

SIZE	ORDER CODE	PACK SIZE
One size fits all	SPHA2	30

SALTS NO-STING STOMA PASTE

SIZE	ORDER CODE	QUANTITY
60g	NSP1	1

International customers please contact our

International Customer Service Team:



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