

## ACTICOAT<sup>®</sup> Nanocrystalline Silver Dressings were estimated to be cost saving compared with other silver delivery systems for managing partial thickness burns

Estimates showed that ACTICOAT helps to achieve better clinical outcomes at lower overall treatment costs than other silver dressings



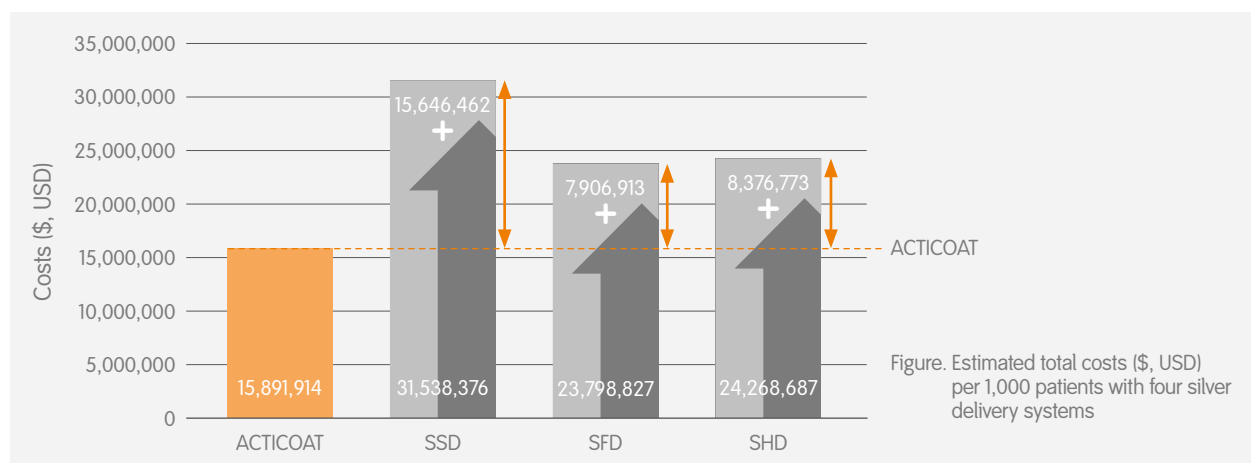
### Study design

- A cost-effectiveness analysis of four commonly used silver delivery systems (nanocrystalline silver [ACTICOAT]; silver impregnated hydrofiber [SHD]; silver-impregnated foam [SFD] and silver sulfadiazine [SSD] dressings) in patients with partial thickness burns (total body surface area affected <20%)
- The economic model was conducted from the US healthcare payer perspective based on data derived from an indirect treatment comparison and meta-analysis of randomised controlled trials and observational studies (n=1,873)<sup>1</sup>
- Incidence of infections over six weeks, surgical procedures, length of stay and quality-adjusted life years (QALYs) were estimated for each dressing and presented per 1,000 patients



### Key results

- Incidence of infections was estimated to be lower with ACTICOAT than the other evaluated silver delivery systems when used prophylactically (5 vs 67, 17 and 17 with SSD, SFD and SHD, respectively)
- Estimated number of surgical procedures was also lower with ACTICOAT (11 vs 69, 14 and 18 with SSD, SFD and SHD, respectively)
- Estimated cost of treatment was lowest with ACTICOAT compared with the other evaluated silver dressings (Figure)
- ACTICOAT was estimated to provide more QALYs compared with the other evaluated silver delivery systems (970.45 vs 919.49, 969.37 and 969.42 for SSD, SFD and SHD, respectively)
- Sensitivity analyses confirmed the results were robust and showed that ACTICOAT had an 86% probability of being cost effective vs SHD (the second-best silver dressing)



## Evidence in focus (continued)



### Conclusion

Use of ACTICOAT<sup>®</sup> was estimated to be cost saving, ie, resulted in better treatment outcomes and less treatment cost in patients with partial thickness burns compared with the other evaluated silver dressings assessed in this study.



### Considerations

- The results of this analysis cannot be easily generalised in developing countries
- The quality of evidence for some of the included studies was low and relatively limited, which may have biased the results
- Not all possible clinical scenarios and outcomes were modelled (eg, long-term scarring outcomes)



### Study citation

\*Nherera L, Trueman P, Roberts C, Berg L. Cost-effectiveness analysis of silver delivery approaches in the management of partial-thickness burns. *Wounds*. 2018 Feb 23. [Epub ahead of print]

Available at: [Wounds](#)

#### References:

1. Nherera L, Trueman P, Roberts C, Berg L. Silver delivery approaches in the management of partial thickness burns: A systematic review and indirect treatment comparison. *Wound Repair Regen*. 2017;25:707-721.