

## + Evidence in focus

Publication summary: Forni C, et al. *J Wound Care* (2020)\*

Smith+Nephew

ALLEVYN<sup>◇</sup> LIFE Foam Dressings plus standard preventive care were estimated to be cost saving and more effective at helping to reduce pressure injuries (PIs) than standard preventive care alone in elderly hip fracture patients using a decision-analytic economic model

## + Plus points

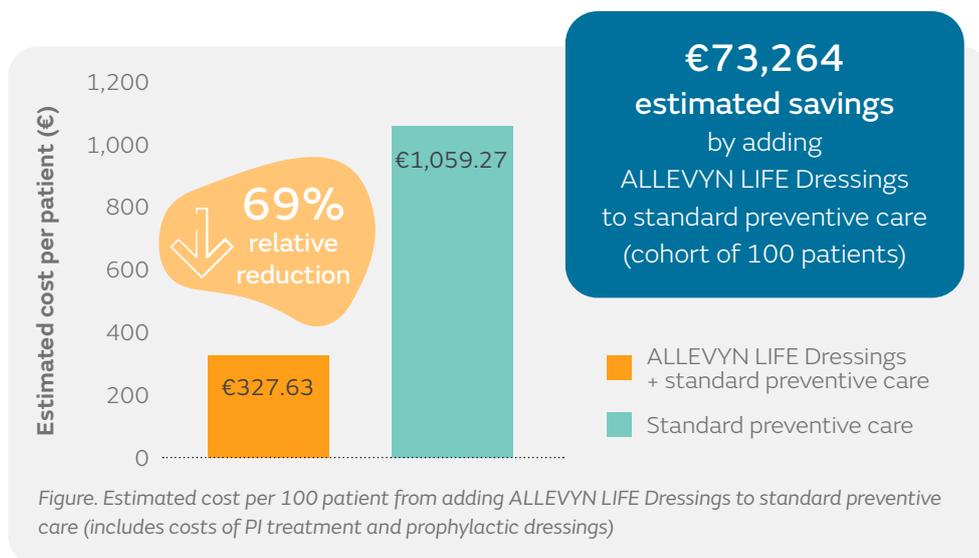


## Overview

- A cost effectiveness analysis of using ALLEVYN LIFE Dressings in addition to standard preventive care to help reduce PI incidence in elderly patients with hip fracture
  - Cost of dressings, nursing time and PI treatment were included in the model
- The economic evaluation was performed from the Italian hospital perspective, based on results from an independent, randomized controlled trial<sup>1</sup>

## Results

- Compared with standard preventive care alone, addition of ALLEVYN LIFE Dressings was estimated to:
  - Help reduce PI incidence by 71% (4.5 vs 15.4%)
  - Provide estimated cost savings of €733 per patient (Figure)
  - Help potentially to avoid 11 PIs
  - Provide estimated cost savings of €73,264 for a cohort of 100 patients (Figure)



## Conclusions

Adding ALLEVYN LIFE Dressings to standard preventive care was estimated to be cost saving and more effective at helping to prevent PIs in elderly patients with hip fracture than using standard preventive care alone.

## Citation

\*Forni C, Searle R. A multilayer polyurethane foam dressing for pressure ulcer prevention in older hip fracture patients: an economic evaluation. *J Wound Care*. 2020;29(2):120-127.

For detailed product information, including indications for use, contraindications, precautions and warnings, please consult the product's applicable Instructions for Use (IFU) prior to use.

Reference: 1. Forni C, D'Alessandro F, Gallerani P, et al. Effectiveness of using a new polyurethane foam multi-layer dressing in the sacral area to prevent the onset of pressure ulcer in the elderly with hip fractures: A pragmatic randomised controlled trial. *Int Wound J*. 2018;15(3):383-390.