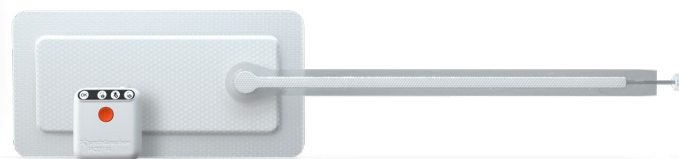




# + Powerful results in stalled wounds

Turn around wound healing more effectively  
than standard dressings and tNPWT<sup>1,8</sup>

**Smith+Nephew**



**PICO<sup>◇</sup> 14**

Single Use Negative Pressure  
Wound Therapy System

Helping you get **CLOSER TO ZERO<sup>®</sup>** delay in wound healing  
[smith-nephew.com/pico](https://smith-nephew.com/pico)

# Stop paying the price for hard-to-heal wounds

**Hard-to-heal wounds** are defined as those that fail to heal with standard therapy in an orderly and timely manner.<sup>3</sup>



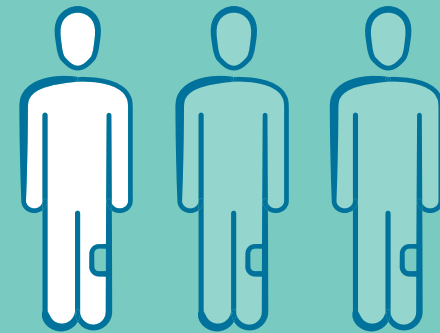
**Unhealed wounds cost:**  
a mean **135%**  
more than  
healed wounds.<sup>4</sup>

**Unhealed:<sup>4</sup>**  
**£1,719-£5,976**

**Healed:<sup>4</sup>**  
**£698-£3,998**

# 29%

Nearly **1-in-3** (29%) of hard-to-heal wounds last for more than **a year**<sup>1</sup>



# A system under increasing pressure:

Annual prevalence of wounds is estimated to grow at the rate of:<sup>5</sup>

↑ **9%**  
for acute

↑ **12%**  
for chronic

## Many patient groups are at risk:

- Cardiovascular disease<sup>5</sup>
- Dermatological disease<sup>5</sup>
- Endocrinological/Diabetes<sup>5,6</sup>
- Nutritional deficiency<sup>5,6</sup>
- Smoking<sup>6</sup>
- Alcohol abuse<sup>6</sup>
- Obesity<sup>6</sup>
- Medication<sup>6</sup>
- Elderly<sup>6</sup>



## Limitations facing healthcare:

### Nursing



### Training



### Budgets



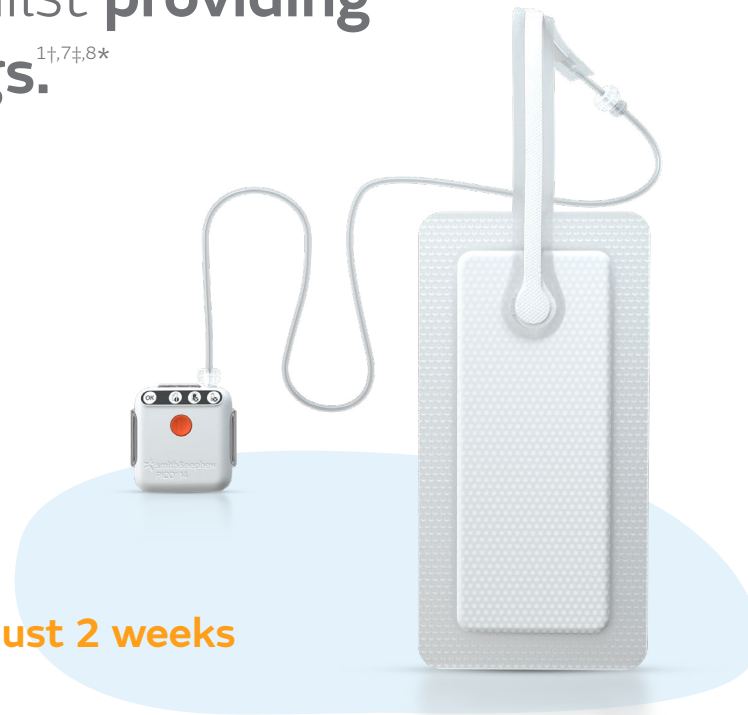
## Will your resources increase comparatively?

# Change your practice. Control your budget

The **PICO<sup>®</sup> 14 system** is **more effective** than standard dressings<sup>1†,7‡</sup> and tNPWT<sup>8\*</sup> whilst **providing resource savings.**<sup>1†,7‡,8\*</sup>

# 94%

success rate in  
healing with PICO  
(vs standard dressings)<sup>1</sup>

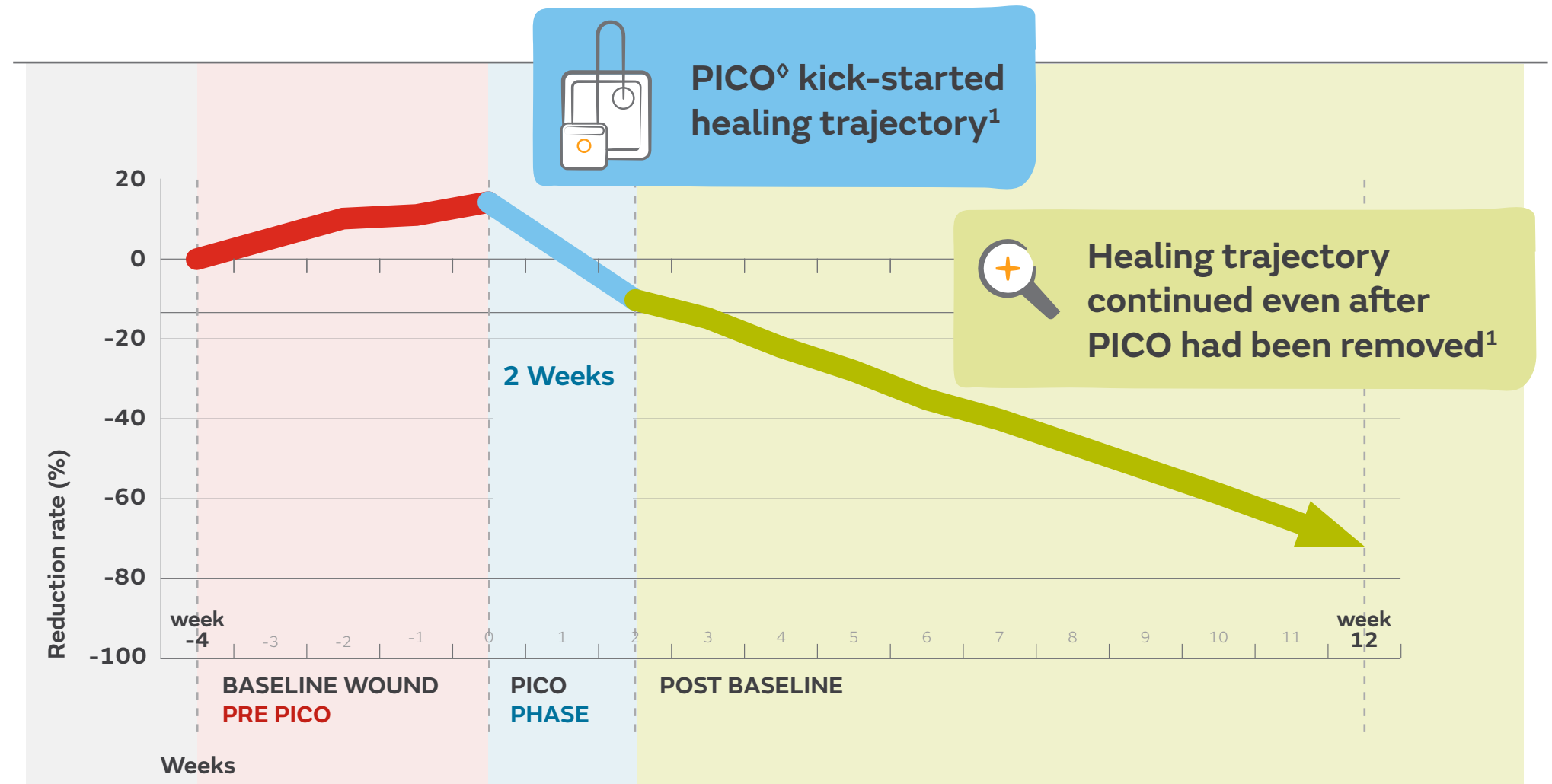


**Turn around healing in just 2 weeks**

**Footnote:** † p=0.001; 52 wounds (Dehiscent surgical wound, VLU, Pressure ulcer, Other, Traumatic wound, Mixed aetiology, DFU, Not specified, Arterial leg ulcer); ‡ DFU cases, n=4. Reduction per patient of 1-2 outpatient visits over 12-week treatment period and 1-3 home visits per week; \*n=161; Intention to treat analysis, at 12 weeks, combined population on a VLU and DFU study; p<0.001 for area and p=0.014 for depth.

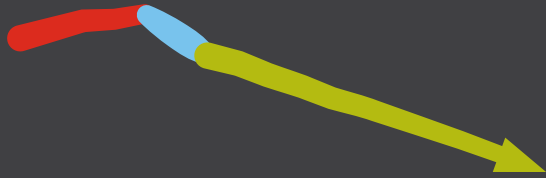
# Changed trajectory in just 2 weeks

Weekly area reduction rate (%)<sup>1</sup>





# Changed trajectory in just 2 weeks



## Kick start healing

**PICO**<sup>°</sup> significantly improved the healing trajectory by **11.7%** while applied,<sup>1\*</sup> a **13.4%** greater reduction than the pre **PICO** phase.<sup>1\*†</sup>

## Keep the healing trajectory

After **PICO** phase, a **9.6% greater** weekly reduction continued, compared to baseline.<sup>1\*‡</sup>

**Footnote:** \* n=52; † (p=0.006); ‡ (p=0.001).



Ask for PICO Pathway for effective use of PICO system

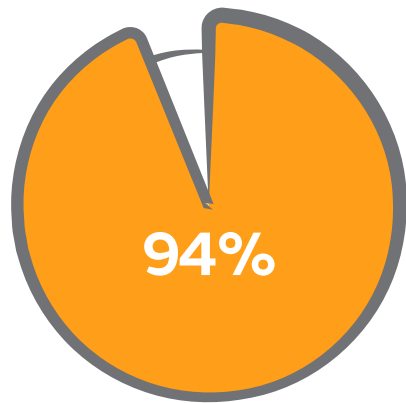


Ask for wound area calculator for healing rate assessments

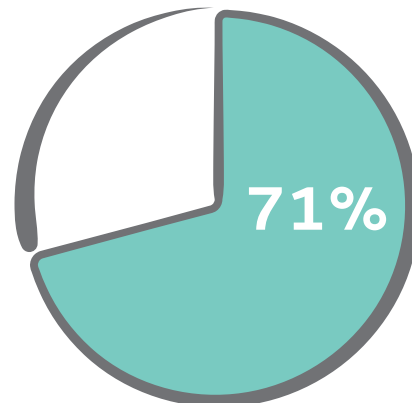


# Early intervention, successful healing

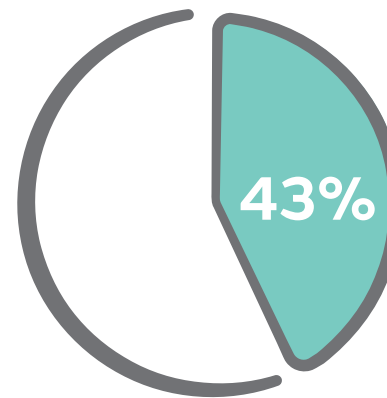
Healing rates by wound duration:<sup>1\*</sup>



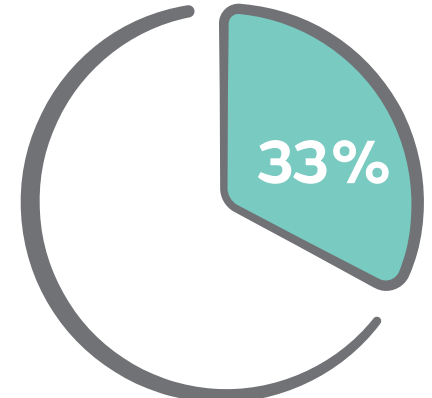
Less than  
3 months



3-6  
months



6-12  
months



Over  
1 year



**Early intervention.  
94% success rate in  
healing with PICO<sup>®</sup>**

Healing rates were nearly **x3**  
better among wounds treated  
<3 months-old, compared with  
treating those >1 year-old<sup>1\*</sup>



## PICO patient checklist

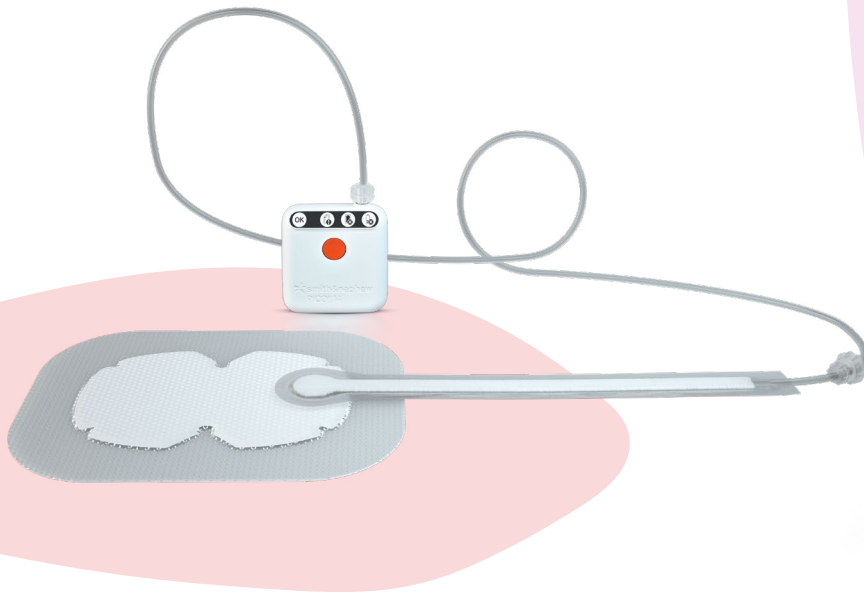
Ask for **PICO** patient checklist (18456) to  
identify patients who are likely to stall healing  
and become an expensive drain of resources

**Footnote:** \*n=52; 0-3 vs 12+ months starting wound duration.

# Improved healing. Improved lives

PICO<sup>®</sup> device vs standard dressings  
In hard-to-heal wounds that responded:

**61.5%** of wounds either healed or were on a projected healing trajectory within 12 weeks<sup>1\*</sup>



PICO was  
observed to  
heal wounds 10  
weeks earlier  
than predicted with  
standard dressings<sup>2†</sup>

**21%**

Reduced wound  
size by 21%  
each week<sup>2†</sup>



Footnote: \*n=52; †n=9, 5 wounds responding (56%) of 44 weeks mean duration.



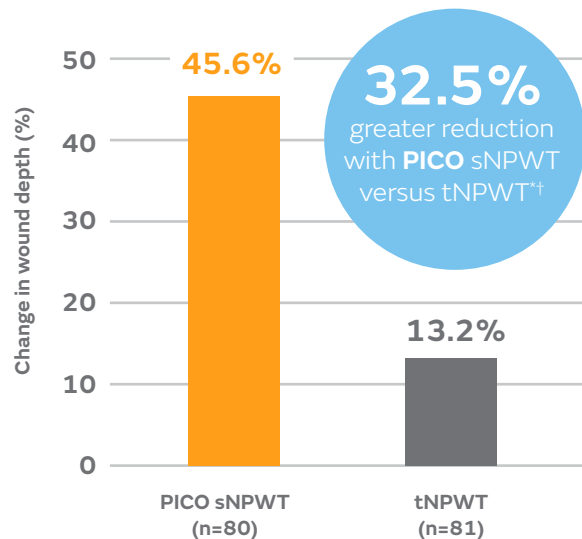
# Improved healing. Improved lives

## PICO<sup>®</sup> sNPWT vs traditional negative pressure:

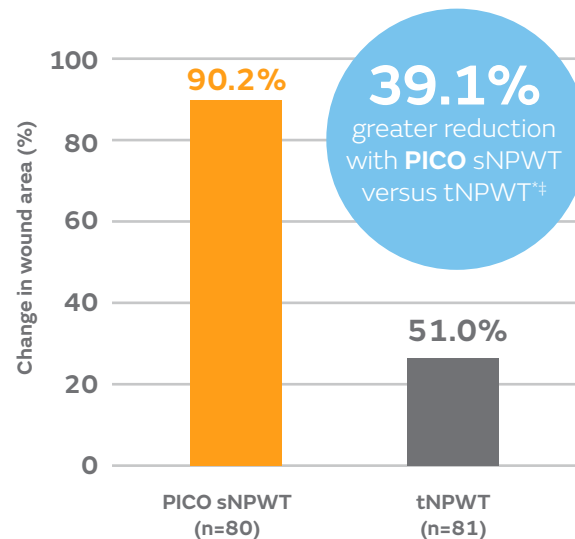
Over a 12-week treatment period for hard-to-heal venous leg ulcers (VLUs) and diabetic foot ulcers (DFUs).<sup>8</sup>



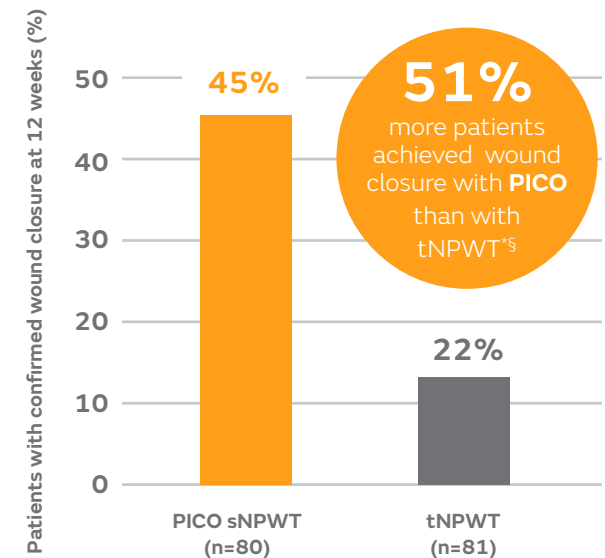
### Wound depth:



### Wound area:



### Wound closure:

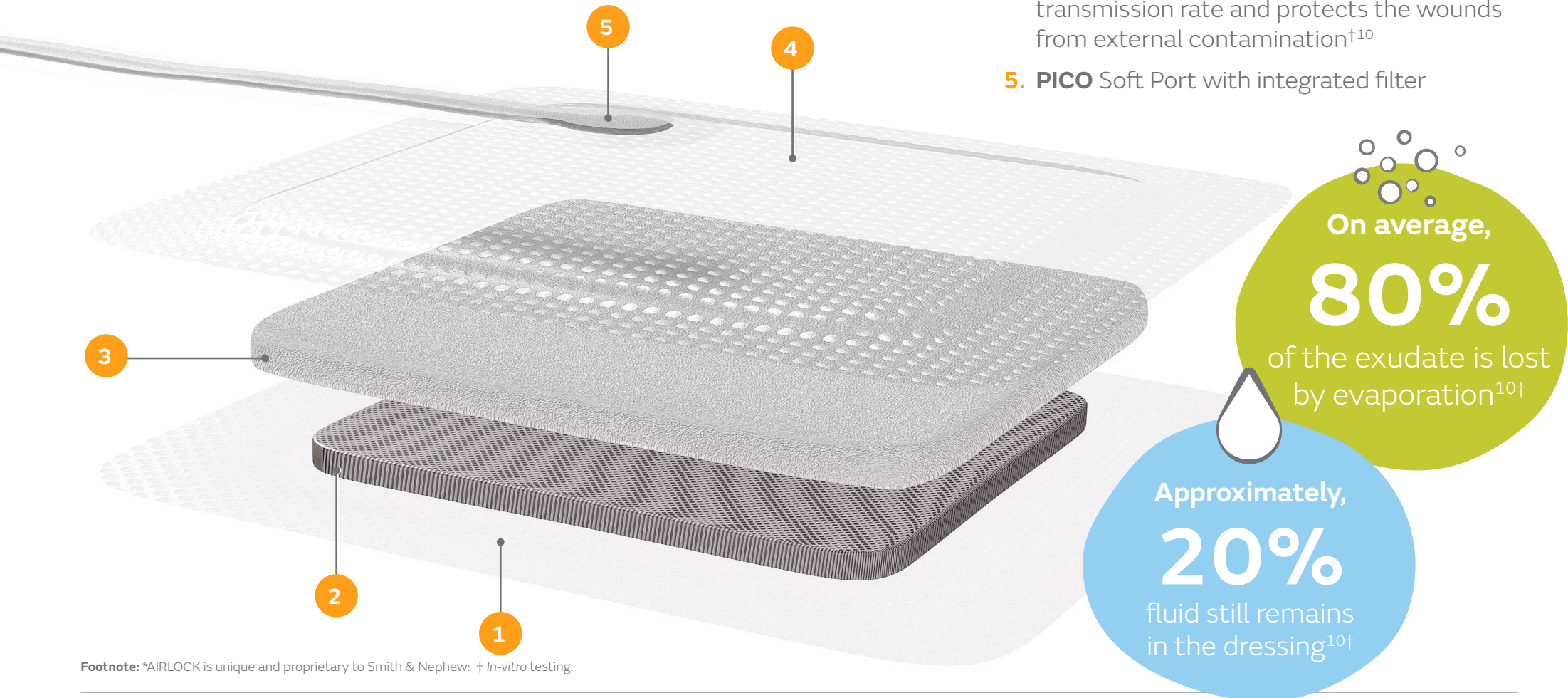


Footnote: \*n=161; Intention to treat analysis per protocol population; † p=0.001; ‡ p=0.014; § p=0.002.

# AIRLOCK<sup>◇</sup> Technology for effective outcomes

Only **PICO<sup>◇</sup>** sNPWT has a proprietary **AIRLOCK<sup>\*</sup>** Technology layer

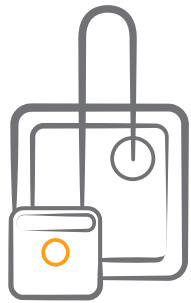
1. **Silicone adhesive layer** minimises pain on removal<sup>9</sup>
2. **Pioneering AIRLOCK Technology** transmits pressure evenly across the whole wound bed and surrounding zone of injury<sup>†10</sup>
3. **Super absorbent core** locking exudate away from wound<sup>†10</sup>
4. **Top film layer** has a high moisture vapour transmission rate and protects the wounds from external contamination<sup>†10</sup>
5. **PICO Soft Port** with integrated filter



**Footnote:** <sup>\*</sup>AIRLOCK is unique and proprietary to Smith & Nephew. <sup>†</sup> *In-vitro* testing.

# Successful intervention releases resources

PICO<sup>®</sup> sNPWT is cost effective, providing resource savings vs standard dressings<sup>1,7\*</sup> and tNPWT<sup>8</sup>:



## Cost savings

**33.1%**

PICO provided estimated cost savings of **33.1%** at **26 weeks**, compared with standard care:

**Standard care = £151,226<sup>†</sup>**

**PICO = £101,135<sup>†</sup>**



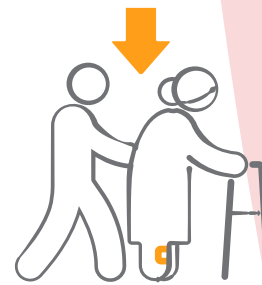
**49.7%**

of savings was attributed to reduced nursing and dressing costs<sup>1†</sup>



## Days saved

**120 nursing days** released over a **6-month** period compared with standard care<sup>1†</sup>



## Reduced LOS

PICO facilitates early mobilisation and discharge to help reduce length of stay and associated costs (vs standard care)<sup>11-14</sup>

**Footnote:** \*Reduction per patient of 1-2 outpatient visits over 12-week treatment period and 1-3 home visits per week); † n=52.

# Efficiency through design



## Dressing full indicator:

The **PICO**<sup>®</sup> dressing full indicator helped reduce outpatient and home visits, generating **potential savings of up to:**

# £600

**per patient**

**over a 12-week period**<sup>7,15\*</sup>

The dressing full indicator helped avoid dressings being left in place for too long and helped reduce maceration<sup>16</sup>

**6.5**

**PICO mean wear time was 6.5 days** compared with 3.1 days for tNPWT over 12-weeks<sup>8†</sup>



**50% less dressing changes**

**PICO** halved dressing changes from 4 times a week at baseline to 1.8<sup>2‡</sup>

Footnote: \*n=4; † n=161; ‡ n=9.



# Positive experiences + Enhanced wellbeing

You deserve to be satisfied (and so do your patients)



# 98%

of patients reported  
**no discomfort** during PICO<sup>◇</sup>  
application and **no pain**  
during wear<sup>17\*</sup>

Rapid healing may improve  
patient wellbeing<sup>1</sup>



Clinicians reported 'good' or 'excellent'  
experience of PICO use with:<sup>1</sup>

## 92%

for patient  
experience

## 90.9%

for device  
functionality

## 80.7%

for clinician  
feedback

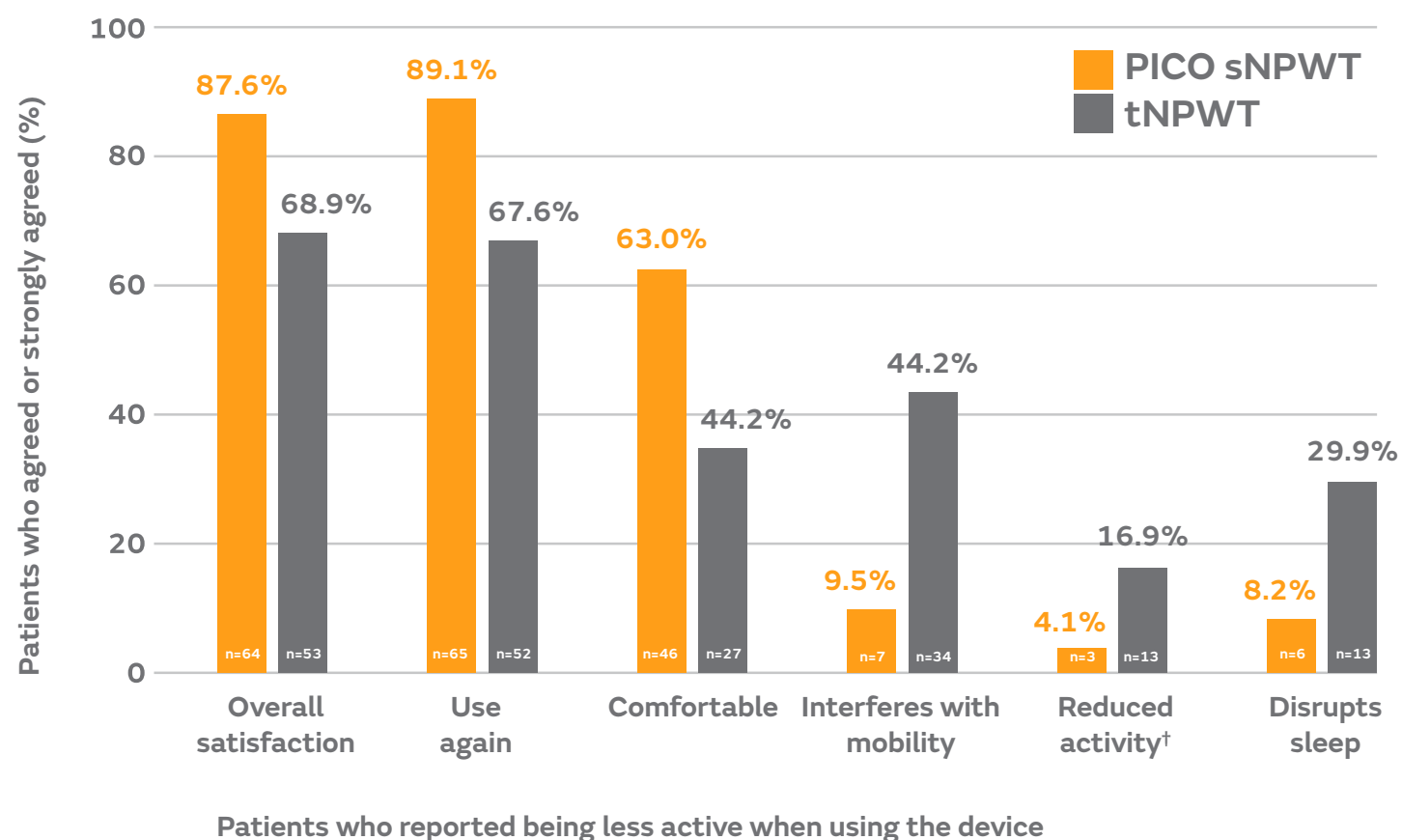
**Footnote:** \*A study involving 326 patients' wounds of mixed aetiology. No P values recorded.



PICO<sup>◇</sup> 14 for stalled wounds over 6 weeks old

# Positive impacts + Everyday

Positive impact of PICO<sup>◇</sup> on patients' everyday lives<sup>18\*</sup>



## Less impact on:

Mobility,<sup>‡</sup> activity levels<sup>§</sup> and on sleep,<sup>§</sup> compared with tNPWT<sup>18\*</sup>



## Better satisfaction

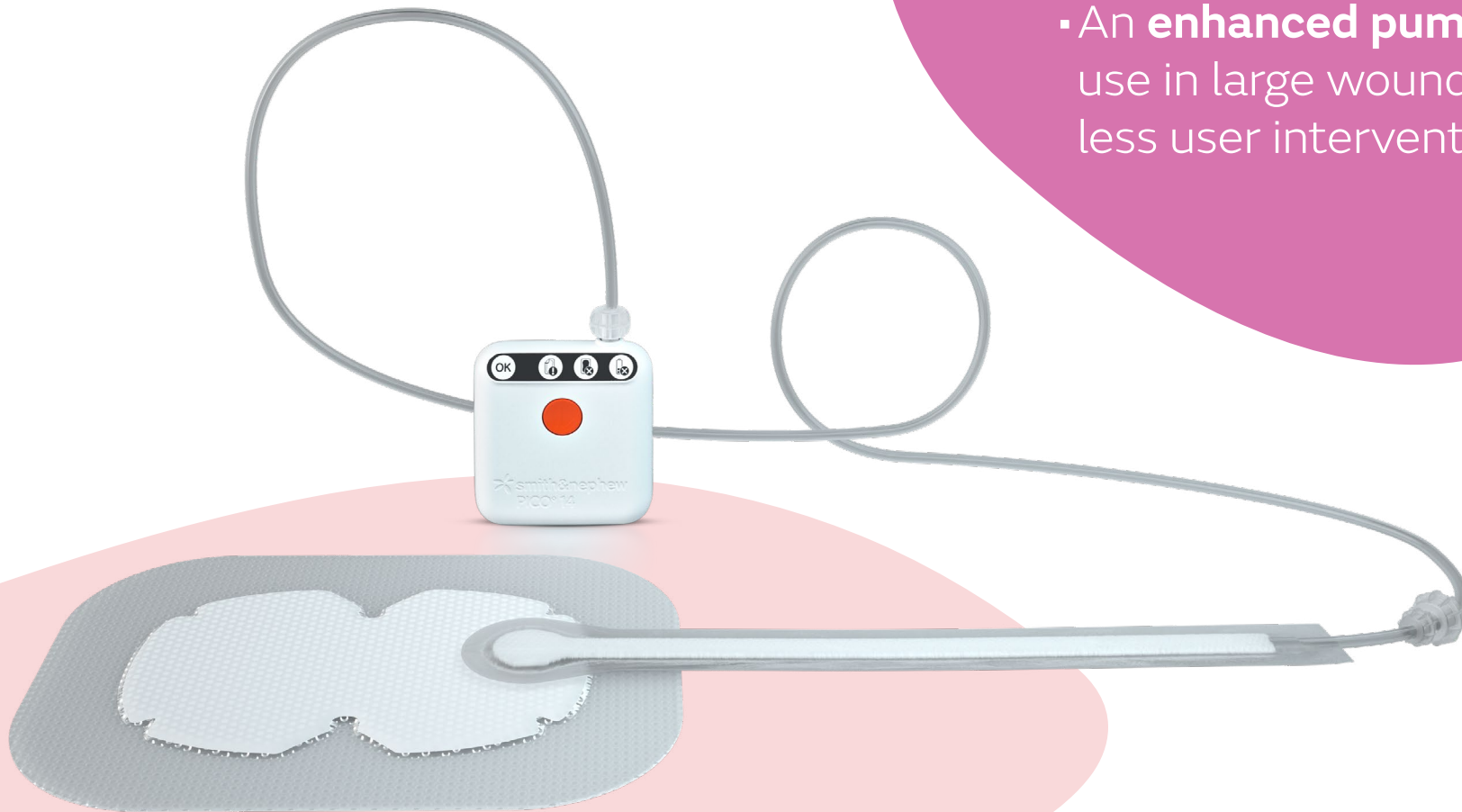
Greater satisfaction<sup>||</sup>, greater comfort and a greater willingness to use PICO again<sup>¶</sup>, compared with tNPWT<sup>18\*</sup>

Footnote: \*n=161; ‡ (p<0.001); § (p=0.017); || (p=0.006); ¶ (p=0.003).

# PICO<sup>®</sup> 14:

Designed to challenge  
hard-to-heal wounds

- Pump duration of up to **14 days**<sup>19</sup>
- Aimed for use on **deep wounds**  
(e.g. 7 centimeters deep)<sup>20</sup>
- An **enhanced pump** to aid use in large wounds with less user intervention<sup>21\*</sup>



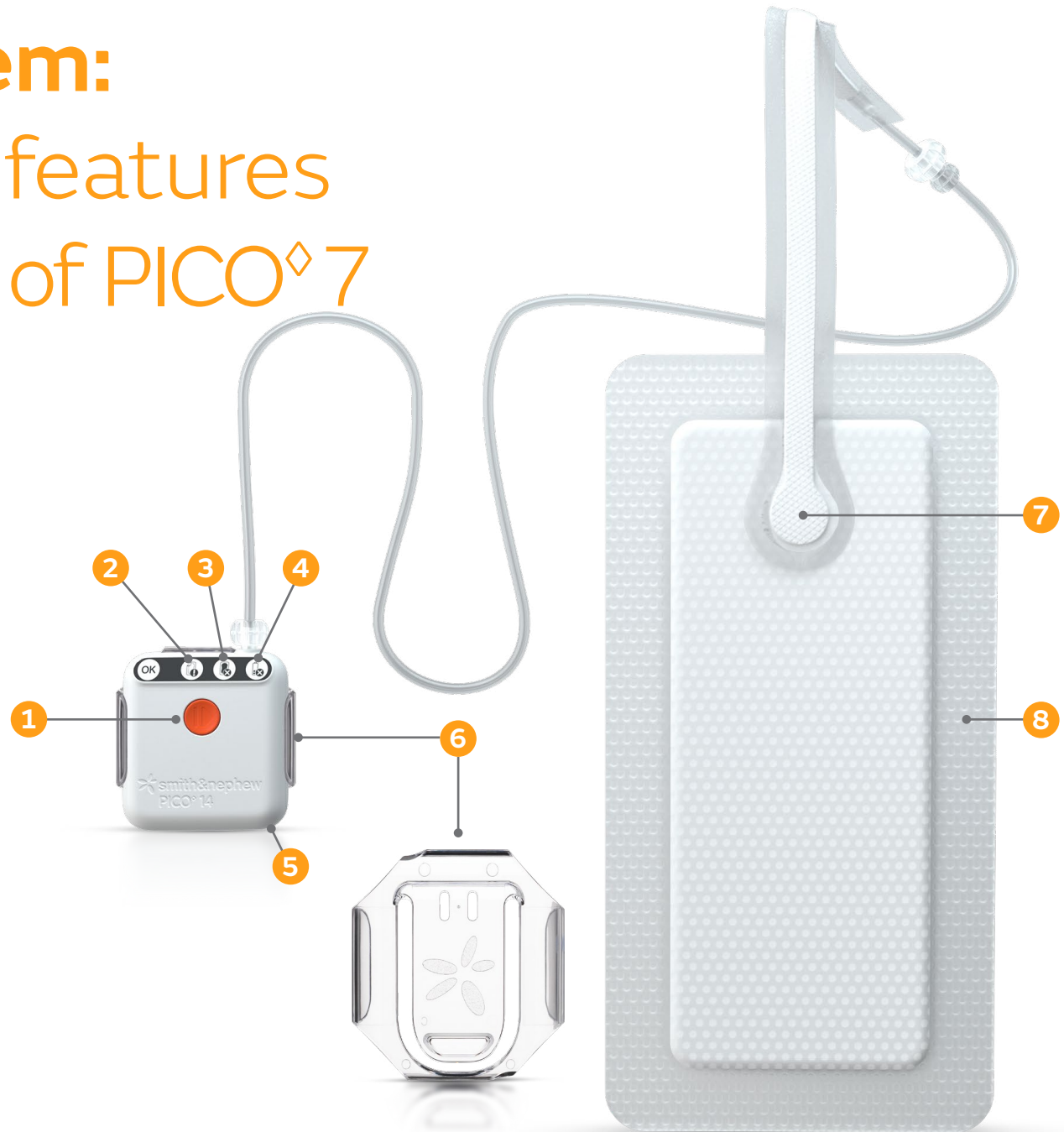
**Footnote:** \*Compared with previous versions.

# PICO<sup>◇</sup> 14 system:

## Building on the features and advantages of PICO<sup>◇</sup> 7

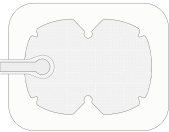
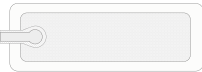

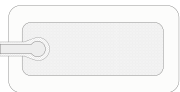
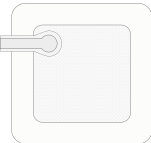


### PICO 14 features:

1. Single button operation for ultimate simplicity
2. Indicator for vacuum leak
3. Dressing full indicator
4. Low battery indicator
5. Operates on 2 x Alkaline AA batteries
6. Belt-clip for portability
7. Soft port with integrated filter
8. Revolutionary gentle dressing<sup>10,22-25</sup>





# Product ordering codes:

		PICO <sup>®</sup> 7 device + 1 dressing		PICO 14 device + 2 dressings	Multipack with 5 dressings	PICO 7Y device + 2 dressings
Dressing sizes		Code	Code	Code	Code	Code
	Multisite small 15cm x 20cm	66802010	66802000	66802040	66802020	–
	Multisite large 20cm x 25cm	66802011	66802001	66802041	66802021	66802031
	10cm x 20cm	66802012	66802002	66802042	66802022	–
	10cm x 30cm	66802013	66802003	66802043	66802023	–
	10cm x 40cm	66802014	66802004	66802044	66802024	–
	15cm x 15cm	66802015	66802005	66802045	66802025	–
	15cm x 20cm	66802016	66802006	66802046	66802026	–
	15cm x 30cm	66802017	66802007	66802047	66802027	–
	20cm x 20cm	66802018	66802008	66802048	66802028	–
	25cm x 25cm	66802019	66802009	66802049	66802029	–
Consumables			Code			
	Foam dressing filler	10cm x 12.5cm	66801021			
	5 Antimicrobial Gauze Rolls + 1 SECURA <sup>®</sup> NSBF Wipe	11.4cm x 3.7m	66802127			

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.

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AWM-AWD-20452 | GMC0839



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1. Dowsett C, et al. Use of PICO® to improve clinical and economic outcomes in hard-to-heal wounds. *Wounds International*. 2017;8, p53–58. 2. Hampton J. Providing cost-effective treatment of hard-to-heal wounds in the community through use of NPWT. *Br J Community Nurs*. 2015;20:S14–S20. 3. Vowden P. Hard-to-heal wounds made easy. *Wounds Int*. 2011;2(4):1–6. 4. Guest JF, et al. Health economic burden that different wound types impose on the UK's National Health Service. *Int Wound J*. 2017;14(2):322–330. 5. Guest JF, et al. The health economic burden that acute and chronic wounds impose on an average clinical commissioning group/health board in the UK. *J Wound Care*. 2017;26(6):292–303. 6. Anderson K, Hamm RL. Factors that impair wound healing. *J Am Coll Clin Wound Spec*. 2012;4(4):84–91. 7. Sharpe A, Myers D, Searle R. Using single use negative pressure wound therapy for patients with complicated diabetic foot ulcers: an economic perspective. *Wounds UK*. 2018;14:89–93. 8. Kirsner R, Dove C, Reyzelman A, Vayser D, Jaimes H. A prospective, randomized, controlled clinical trial on the efficacy of a single-use negative pressure wound therapy system, compared to traditional negative pressure wound therapy in the treatment of chronic ulcers of the lower extremities. *Wound Repair and Regeneration*. May 2019. <https://doi.org/10.1111/wrr.12727>. 9. Hudson DA, et al. Simplified negative pressure wound therapy: clinical evaluation of an ultraportable, no-canister system. *Int Wound J*. 2015;12(2):195–201. 10. Malmström M, et al. Biological effects of a disposable, canisterless negative pressure wound therapy system. *ePlasty*. 2014;14:113–127. 11. Edwards D, et al. Using portable, single-use, canister-free, negative-pressure wound therapy for plastic surgery wounds. *Wounds UK*. 2018;14(3): 56–62. 12. Selvaggi F, et al. New advances in negative pressure wound therapy (NPWT) for surgical wounds of patients affected with Crohn's disease. *Surg Technol Int*. 2014;24:83–89. 13. O'leary DP, et al. Prophylactic Negative Pressure Dressing Use in Closed Laparotomy Wounds Following Abdominal Operations: A Randomized, Controlled, Open-label Trial: The P.I.C.O. Trial. *Ann Surg*. 2017;265(6):1082–1086. 14. Karlakki SL, et al. Incisional negative pressure wound therapy dressings (iNPWTd) in routine primary hip and knee arthroplasties: A randomised controlled trial. *Bone Joint Res*. 2016;5(8):328–337. 15. Myers D, Sharpe A. EP549 Service Delivery in Complex DFU Patients using Single Use NPWT - A UK Perspective. Paper presented at: EWMA; 2018; Krakow. 16. Smith & Nephew December 2018. PICO v2 (PICO 7 and PICO 14) Indicator Activation Test Report. Internal Report. RD/18/133. 17. Hurd T, et al. Clinical performance of PICO Single-Use, Disposable Negative Pressure Wound Therapy in wounds of mixed aetiology: A case series. Presented at Wounds UK, Harrogate November 2012. 18. Kirsner R, Dove C, Reyzelman A, Vayser D, Jaimes H. Randomized controlled trial on the efficacy and acceptance of a single-use negative pressure wound therapy system versus traditional negative pressure wound therapy in the treatment of lower limb chronic ulcers (VLU and DFU). Poster presented at the 10<sup>th</sup> Annual Abu Dhabi Wound Care Conference, March 23–24, 2019. Jumeirah Etihad Towers, Abu Dhabi, United Arab Emirates. 19. Smith & Nephew December 2018. PICO 14 Service Life Testing: 14 Day Device Lifespan. Internal Report. RD/18/132. 20. Smith & Nephew 2018. The review of evidence supporting the use of PICO in wounds ≥2cm in depth. Internal report EO AWM. PCS230.001 v2. 21. Smith & Nephew 2019. Research & Development Report. PICO 14 and PICO 7 Initial Pump Down and Maintenance Pump Down Time Outs RD/19/084. 22. Payne C, Edwards D. Application of the Single Use Negative Pressure Wound Therapy Device (PICO) on a Heterogeneous Group of Surgical and Traumatic Wounds. *ePlasty*. 2014;152–166. 23. Smith & Nephew May 2015. A prospective, open, non-comparative, multi-centre study to evaluate the functionality and dressing performance of a new negative pressure enhanced dressing (NPED) in acute wounds (CT09/02). Internal Report. ST865 CT09/02. 24. Sharp E. Single use NPWT for the treatment of complex orthopaedic surgical and trauma wounds. *Journal of Wound Care*. 2013;22(10):S5–S9. 25. Stryja J, Staffa R, Řiha D, Stryjová K, Nicelníková K. Cost-effectiveness of negative pressure wound therapy in outpatient setting. *Prolekare*. 2015.