

Contact:

Punnie Donohue ConvaTec 908-904-2151 punnie.donohue@convatec.com

BACKGROUNDER: Ostomy Skin Complications and ConvaTec Moldable Technology™

An ostomy (or stoma) is a surgical opening made in the skin as a way for waste products to leave the body. An ostomy can allow wastes to leave from the intestines (ileostomy or colostomy) or from the bladder (urostomy). "Ostomate" is a term used for someone who has a stoma.

Half of All Ostomates Have Skin Issues

Research shows that 50 percent of ostomates experience skin complications, the majority of which are related to leakage.¹

- 34% of ostomates had skin complications within the first 3 weeks after surgery²
- 47% within the first two months³
- 52% within the first year⁴

Clinical Studies Demonstrate Powerful Protection of Moldable Technology

In a large multinational observational study conducted over a period of two months:

- Over 95 percent (95.6%) of new ostomates started on Moldable Technology maintained healthy skin.⁵
- Over 86 percent (86.2%) of ostomates with pre-existing skin disorders had improved skin after switching to Moldable Technology.⁵
- Both patient groups reported high levels of satisfaction in the areas of comfort; ease of molding, application and removal; reliability; and overall performance and satisfaction.⁵

In an independent comparative study versus a "stretch-to-fit" skin barrier (Hollister Forma-Flex[™]), Moldable Technology also demonstrated:

- Reduced skin exposure (by 78%) and erosive skin lesions (by 86%)⁶
- 22 percent longer wear time⁶

Leakage and Skin Issues Contribute to High Levels of Hospital Readmissions, Costs

Ostomy patients are three times more likely than other patients to be readmitted within 30 days after discharge.⁷ In the U.S., lowering overall readmissions is a key goal for hospitals under the Affordable Care Act.⁷

Preventing skin issues can also reduce healthcare costs—for patients, hospitals and payers. For a hospital system conducting 1,000 ostomy procedures per year, the costs associated with treating these skin issues can add up to \$138,000 annually.^{8,9}

"Moldable Technology can dramatically improve the quality of life for a person with an ostomy," said Steve Bishop, Vice President of R&D at ConvaTec.



"It can also reduce readmission rates and provide significant cost savings for healthcare providers and payers."

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REFERENCES:

¹Herlufsen P, Olsen AG, Carlsen B, et al, Ostomy skin study: a study of peristomal skin disorders in patients with permanent stomas. Br J Nurs 2006;15(16):854-862.

²Bosio G, Pisani F, Lucibello L. A Proposal for Classifying Peristomal Skin Disorders: Results of a Multicenter Observational Study. OWM. 2007; 53(9): 38-43.

³Cottam J, Richards K, Hasted A, Blackman A. Results of a nationwide prospective audit of stoma complications within 3 weeks of surgery. Colorectal Dis 2007; 9: 834-8.

⁴Ratliff CR. Early Peristomal Skin Complications Reported by WOC Nurses. J Wound Ostomy Continence Nurs. 2010; 37(5): 505-510.

⁵ Szewczyk, MT. OSMOSE Study: Multinational Evaluation of the Peristomal Condition in Ostomates Using Moldable Skin Barriers. Poster presented at: The Congress of the European Council of Enterostomal Therapy (ECET); June 23-26, 2013; Paris, France.

⁶Durnal A. A Clinical Comparison of a Moldable Skin Barrier versus a Shape-to-Fit Skin Barrier in Healthy Volunteers. Presented at the WOCN conference, Seattle, WA, June 2013.

⁷Wick EC, Shore AD, Hirose K, et al. Readmission rates and cost following colorectal surgery. Dis Colon Rectum. 2011 Dec;54(12):1475-9.

⁸Meisner S, Lehur PA, Moran B, Martins L, et al. Peristomal Skin Complications Are Common, Expensive, and Difficult to Manage: A Population Based Cost Modeling Study. *PLoS ONE* 2012; 7(5). Conversion rate EUR-USD: 1.35503

⁹Erwin-Toth P, Thompson SJ, Stoia Davis J. Factors impacting the quality of life of people with an ostomy in North Americal. *J Wound Ostomy Continence Nurs.* 2012;39(4):417-422