



UrgoStart Contact



FLEXIBLE CONTACT LAYER WITH TLC-NOSF

Indication: chronic wounds located in cavity or awkward areas

- Accelerates wound healing
- Re-balances the metabolic environment in chronic wounds
- Ideal for awkward locations, cavity and deep wounds
- Painless and atraumatic removal

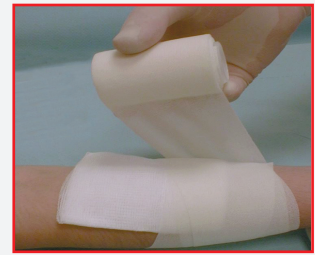
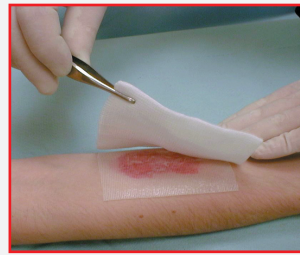
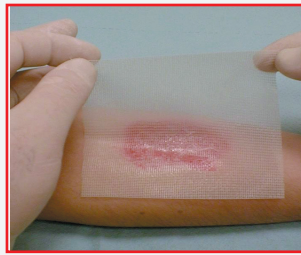
UrgoStart Contact

Supplied in boxes of individually pouched and sterile dressings, ready to use

Sizes	5 x 7 cm
	10 x 10 cm
	15 x 20 cm



UrgoStart Contact



DESCRIPTION

■ **UrgoStart Contact** is a non-adhesive, non-occlusive lipido-colloid matrix with TLC-NOSF, an innovative Technology developed by the Laboratoires Urgo.

COMPOSITION: **UrgoStart Contact** is made of a polyester mesh

impregnated with a formulation of hydrocolloid particles (Carboxymethylcellulose), petroleum jelly and NOSF (Nano-Oligo Saccharide Factor).

METHOD OF STERILIZATION: Sterilized by ionizing radiation.

PROPERTIES

■ In contact with wound exudate, the TLC combined with NOSF gives the matrix specific properties, triggering the optimum healing process.

- Thanks to its hydrocolloid particles, the TLC forms a lipido-colloid gel, creating a moist environment that promotes the healing process, so that key cells involved in the repair process (fibroblasts, keratinocytes, macrophages) can exert their action.

- NOSF provides properties in addition to those of the TLC: in contact with wound exudate, NOSF forms a gel which binds preferentially to damaged areas to interact with the wound micro-environment by limiting the harmful action of MMPs (Matrix Metallo Proteases).

- The TLC-NOSF combination leads to the restoration of conditions promoting the granulation of chronic wounds, in which a metabolic imbalance due to an excess of MMPs has led to a continuous degradation of the extra-cellular matrix, and possibly to delayed healing.

- **UrgoStart Contact** is flexible and comfortable; it helps ensure a good fit of the dressing to all wound shapes (leg ulcers, pressure ulcers, diabetic foot ulcers).

- **UrgoStart Contact** does not adhere either to the wound or the surrounding skin: the dressing changes are painless for the patient and atraumatic for the newly formed tissues in the wound.

INDICATIONS

- **UrgoStart Contact** is indicated for chronic wounds (leg ulcers, pressure ulcers, diabetic foot ulcers, long standing acute wounds).

- Flexible and very comfortable, **UrgoStart Contact** is especially

suitable for lining cavity or awkwardly placed wounds and for wicking deep wounds.

DIRECTIONS FOR USE

METHOD OF USE

- Preparation of the wound:

- Clean the wound with normal saline.
- If an antiseptic is used first, rinse the wound thoroughly with saline solution before applying **UrgoStart Contact**.

- Application of the dressing:

- Remove the protective wings from **UrgoStart Contact**.
- Apply **UrgoStart Contact** to the wound.
- **UrgoStart Contact** can be cut using sterile equipment to fit the dressing to the wound.
- Cover **UrgoStart Contact** with a secondary dressing suitable to absorb the level of wound exudate and hold the secondary dressing in place with a conforming bandage, adhesive tape or an elasticated tubular bandage.
- For exuding wounds, use **UrgoStart**, the soft adherent hydrocellular version of **UrgoStart Contact**.

- Dressing changes:

- **UrgoStart Contact** dressing may be changed every 2 to 4 days, and left in place for up to 7 days depending on the level of exudate and the wound condition.
- The recommended treatment duration for **UrgoStart Contact** is a minimum of 4 to 5 weeks.

PRECAUTIONS

- **UrgoStart Contact** adheres to latex surgical gloves. It is therefore recommended that gloves be moistened with saline in order to make the handling of **UrgoStart Contact** easier.

- If there are clinical signs of local infection and depending on clinical judgement, the wound can be treated with an antibacterial

dressing before applying **UrgoStart Contact**.

- In the absence of clinical data as a first line treatment in acute wounds, and in the treatment of Epidermolysis Bullosa (even for long standing lesions), it is not recommended to use **UrgoStart Contact**.

- In the case of an atypical ulcer presenting induration or overgranulation, **UrgoStart Contact** should only be used after checking the absence of wound-related malignancy in order not to delay the diagnosis.

- In the case of deep wounds and fistula wounds, a section of the **UrgoStart Contact** dressing should be left visible to enable easy removal.

- The product's action on retriggering the healing process may possibly cause stinging or painful sensations on commencement of treatment with **UrgoStart Contact**. This rarely warrants suspension of treatment.

- Do not re-sterilise the dressing.

- Store **UrgoStart Contact** dressings flat.

- Single use sterile individual packaging: re-using a single use dressing may lead to risks of infection.

CONTRAINDICATIONS

- In order not to delay any optimal treatment, **UrgoStart Contact** is contraindicated in wounds which are not likely to heal such as:

- Cancerous wounds,
- Fistula wounds which may reveal a deep abscess.