Melgisorb Ag FAQ

FAQ

What is Melgisorb® Ag?
Melgisorb Ag is a highly absorbent, antimicrobial, alginate dressing. It consists of:

- Calcium alginate with a high guluronic acid and carboxymethylcellulose (CMC) content
- An ionic silver compound that provides a sustained antimicrobial effect for up to 21 days

When is Melgisorb® Ag indicated
Melgisorb Ag is suitable for moderate to heavily exuding infected wounds and cavity wounds, and wounds at risk of infection, such as:

- post-operative wounds
- trauma wounds (dermal lesions, trauma injuries or incisions)
- leg ulcers
- pressure ulcers
- diabetic ulcers
- graft and donor sites
- cavity wounds
- superficial and partial thickness burns

How does Melgisorb® Ag work?
As wound exudate is absorbed, the alginate forms a gel, which aids autolytic debridement, whilst maintaining a moist environment for optimal wound healing. The gel ensures that the dressing can be easily removed, without causing damage to healing tissue.
The silver ions released in the presence of wound exudate are an effective antimicrobial agent against a broad spectrum of microorganisms frequently associated with the bacterial colonisation and infection of wounds, for up to twenty-one (21) days, based on in-vitro testing. Melgisorb Ag can also reduce the odour of infected wounds as a result of its effective antimicrobial properties.
Melgisorb Ag provides an effective barrier to penetration by microorganisms.

What are the advantages of Melgisorb® Ag?
Melgisorb Ag combines the advantages of a calcium alginate dressing with the antimicrobial properties of silver.

- High absorbency
- Easy to use and remove
- Sustained antimicrobial action

Can Melgisorb® Ag be used under compression?
Yes, Melgisorb Ag can be used under compression.

Technical Questions

How should Melgisorb® Ag be stored?
Melgisorb® Ag should be stored dry, at room temperature (under 25°C).
Do unpleasant odors develop when Melgisorb® Ag is used?
No, quite the opposite. As the number of bacteria in the wound is reduced, odors are also reduced.
Can Melgisorb® Ag be steam-sterilized?
No. Melgisorb Ag is sterilized using gamma radiation. It should not be re-sterilized.
Can Melgisorb® Ag be used in conjunction with oxidizing agents?
No. (Hypochlorite solutions and hydrogen peroxide are examples of oxidizing agents.)

Questions on Silver

Does Melgisorb® Ag release silver?
Yes. Melgisorb Ag contains a silver compound which, in the presence of wound exudate, releases silver ions.

How long does Melgisorb® Ag's antimicrobial effect last, and how quickly does it act?
Melgisorb Ag has been shown in in-vitro laboratory tests to provide an effective antimicrobial barrier for up to 21 days. It has also been shown in vitro that Melgisorb Ag has an antimicrobial effect within 4 hours.

How does the silver in Melgisorb® Ag work?

When absorbed, wound exudate comes into contact with the silver and silver ions (Ag+) are released. When these come into contact with bacteria, they have an antimicrobial effect:

- When Ag+ binds to proteins in the bacterial cell wall, the latter might break and the contents of the cell leak out, resulting in death of the bacterial cell.
- Ag+ might also bind to bacterial cell DNA and interfere with cell division and the replication process
- Ag+ might also bind to bacterial enzymes, resulting in the inability of the bacterial cell to carry out processes necessary for respiration or to take in or process nutrients.

Silver ions strive for balance; they spread evenly throughout the wound exudate, both in and under the dressing. This means that silver ions are also released into the wound and can have an antimicrobial effect where this is most needed.

Medical Questions

Should Melgisorb® Ag be used on infected wounds?
For clinical infection, topical silver does not replace the need for systemic therapy or suitable infection treatment. Melgisorb Ag can be used on infected wounds as established by the patient's treating physician. Melgisorb Ag can be used on wounds at increased risk of infection, and on wounds with increased signs of a growing infection (increasing unpleasant odor, pain, exudate), to decrease bacteria levels.

When should Melgisorb® Ag not be used?
Melgisorb Ag is not indicated to be used on patients with:

- dry or lightly exuding wounds
- sensitivity to alginates or silver
- heavy bleeding
- surgical implants

During electronic examinations such as electrocardiograms (ECGs) or electroencephalograms (EEGs), contact with electrodes or conductive gels should be avoided. Melgisorb Ag must be removed before the patient undergoes magnetic resonance imaging (MRI) scanning.

Can Melgisorb® Ag cause maceration?
To avoid maceration, apply Melgisorb directly to the wound bed, loosely fill deep wounds, and ensure that the dressing does not overlap the wound margin. Melgisorb Ag should be changed when the secondary dressing has become saturated.
To reduce the risk of maceration to a minimum, we recommend using Mepilex Border as an outer dressing.

Is there a risk of drying out the wound with Melgisorb® Ag?
No. Alginates maintain moist wound environments.

Does Melgisorb® Ag debride the wound?
Yes. Melgisorb Ag aids autolytic debridement and inactivates a broad spectrum of wound-specific pathogens and ensures a rapid and sustained antimicrobial effect.

Does the exudate level change when treatment with Melgisorb® Ag is initiated?
There can sometimes be an increase in exudate levels when switching to a new type of treatment. In most cases, however, this can be seen as a positive development as a sign of wound healing progress. Increased amount of exudate can also be a sign of bacterial burden and then the exudation will decrease when Melgisorb Ag is applied.

Can Melgisorb® Ag be used in conjunction with ointments?
Dressing performance may be impaired by excessive use of ointments or dressings containing oil or paraffin on the wound bed prior to the application of Melgisorb Ag.

Can Melgisorb® Ag be used on dry wounds?
This is not recommended. Melgisorb Ag is indicated for exuding wounds, as it releases silver ions in the presence of wound exudate to kill microorganisms. If an alginate is used on dry wounds, there is also a risk of the dressing adhering to the wound.

Questions on Handling

When should Melgisorb® Ag dressing be changed?
How often the dressing needs to be changed depends on the condition of the wound and the level of exudate. Initially it may be necessary to change the dressing every 24 hours. However, Melgisorb Ag can generally remain on the wound for several days, as advised by health care professional. Change Melgisorb Ag when the secondary dressing has become saturated, or when indicated by normal clinical practice.

Is Melgisorb® Ag waterproof?
No. Melgisorb Ag must be combined with a secondary dressing.

Can Melgisorb® Ag be cut?
Yes. It is advisable to fold Melgisorb Ag to the required size. However, if necessary the dressing can also be cut to the required size with sterile scissors.

What size of Melgisorb® Ag should be used?
Choose a size of Melgisorb Ag slightly bigger than the wound. Fold or cut the dressing if necessary so that the wound is completely covered. Ensure that the dressing does not overlap the wound margins.

How is Melgisorb® Ag secured?
We recommend covering Melgisorb Ag with Mepilex Border. Alternatively, Melgisorb Ag can be covered with an absorbent dressing, which can then be secured by a retention dressing for example Mefix® or Tubifast®.