

Aluminized Low-Adherent Wound Dressing in Acute Wound Management: An International, Prospective, Multicentre, Observational Study

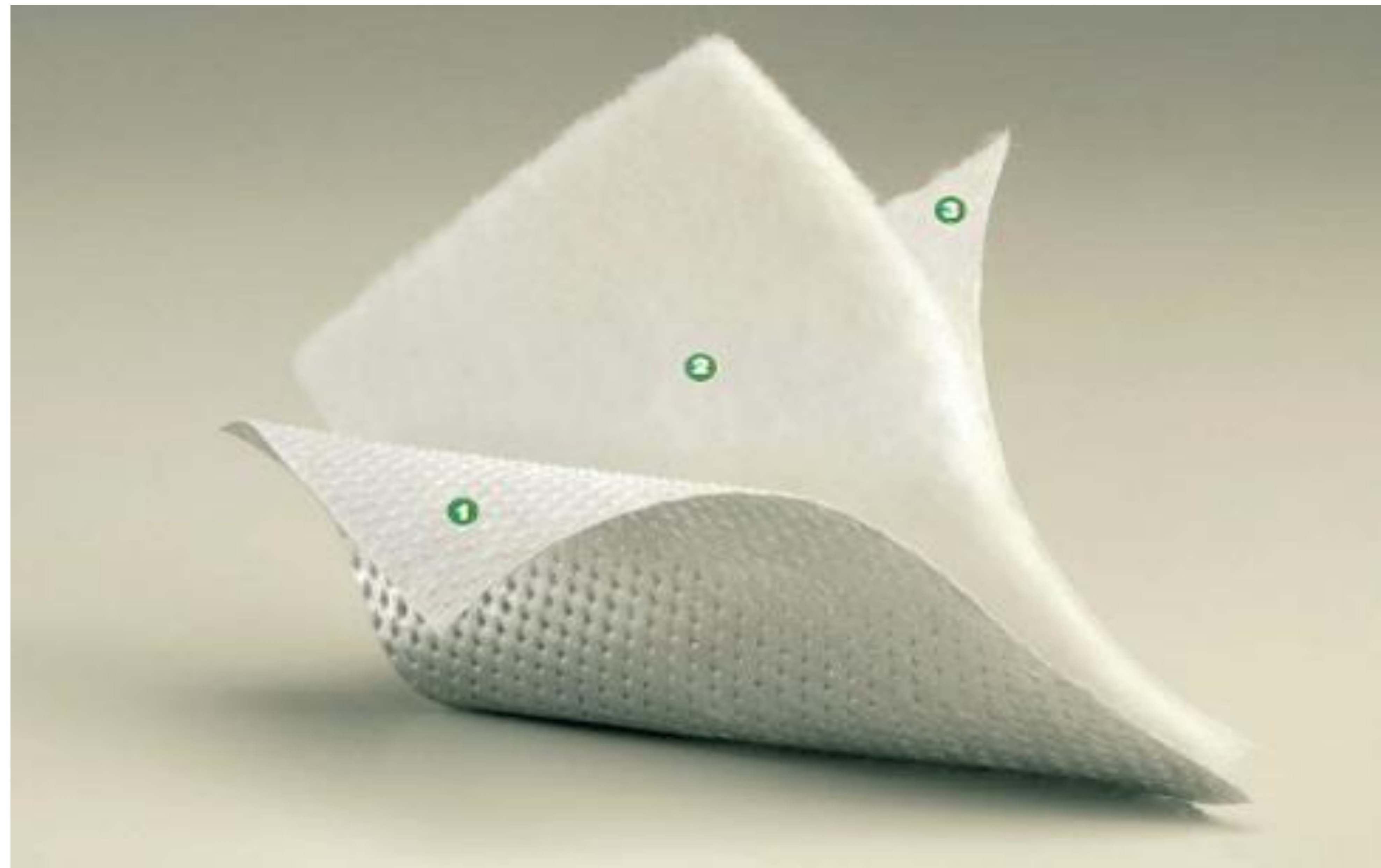
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BREMEN, GERMANY 6 - 8 MAY 2026

The 36th Conference of the European
Wound Management Association
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Aluminized Low-Adherent Wound Dressing in Acute Wound Management: An International, Prospective, Multicentre, Observational Study

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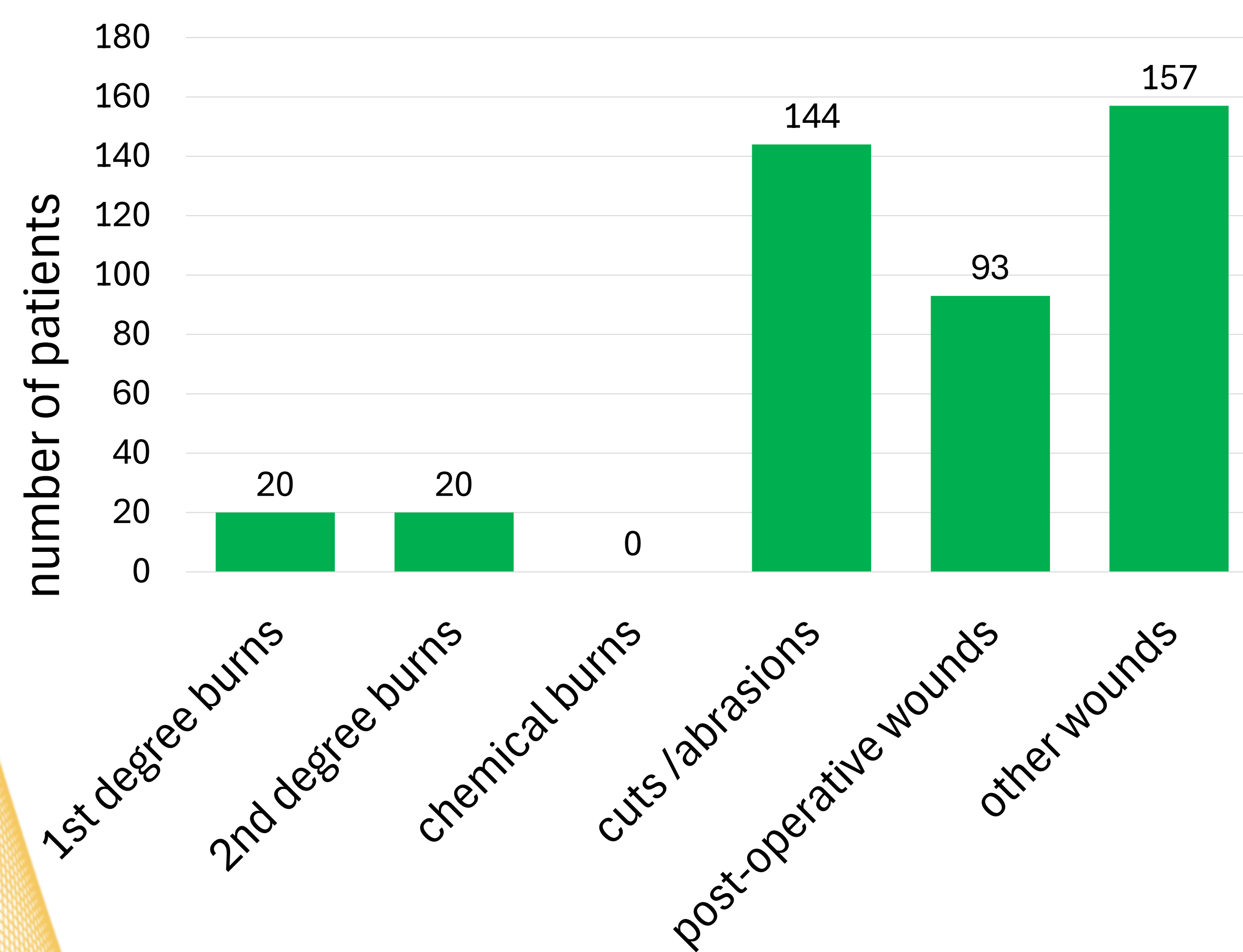
To evaluate the safety and performance of an aluminized, low-adherent wound dressing¹ for the treatment of acute wounds in routine clinical practice.

METHOD:

A prospective, multicentre, observational Post-Market Clinical Follow-up (PMCF) study was conducted involving 63 healthcare professionals (HCP) (nurses with a specialisation in wound management) who treated 434 patients—primarily with acute wounds—according to standard clinical practice in Germany, Austria, Belgium, and Colombia. After treatment with the wound dressing, participants completed a questionnaire (online or paper-based) assessing key parameters such as performance, quality, usability, and safety.

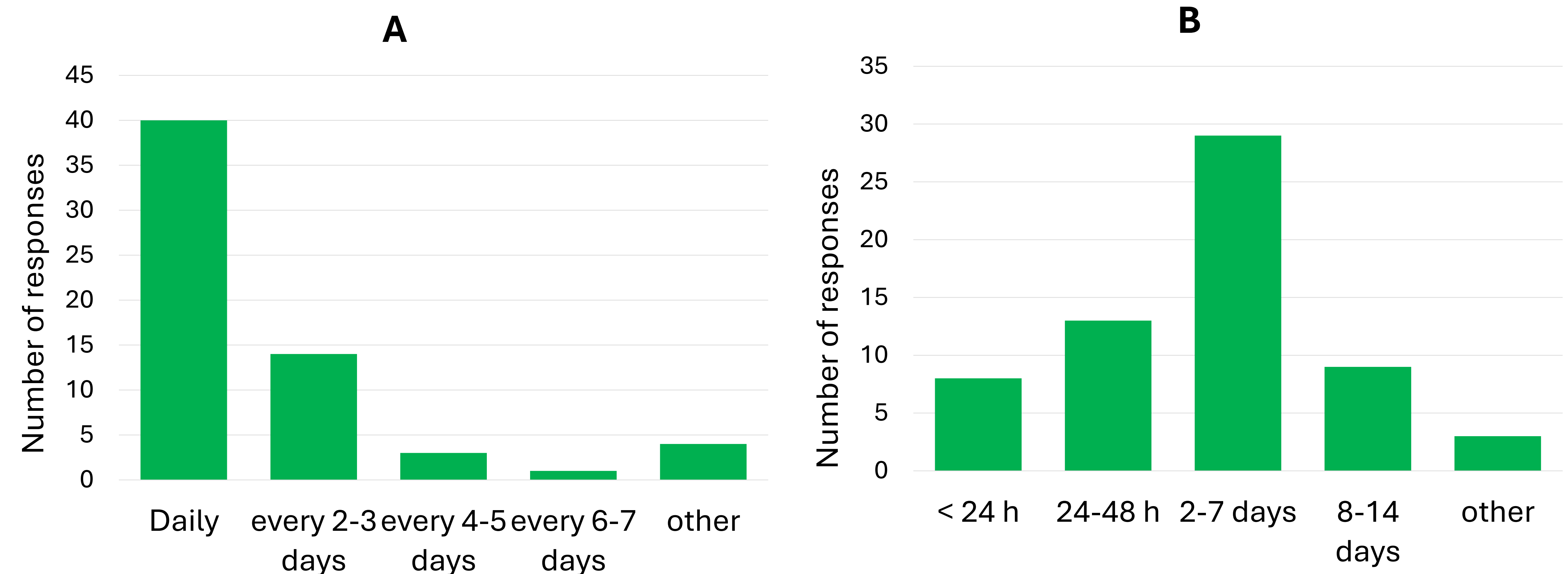
RESULTS:

Most treated wounds (82.5%) were acute with low-to-moderate exudate, requiring daily dressing changes and an average application time of up to 7 days.



GRAPH 1: Type of wounds

82.5% of the treated wounds were acute, while 17.5% were chronic, such as leg ulcers, diabetic ulcers, or decubitus.



GRAPH 2: Dressing change frequency (A) and duration of application per patient (B)

¹Metalline® Wound Dressing – Lohmann & Rauscher GmbH & Co. KG

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RESULTS:

The wound dressing¹ provided consistent and reliable wound coverage, effectively managed exudate, and minimized the risk of adhesion, enabling atraumatic dressing changes when evaluated on a six-point scale.



n = number of HCPs

GRAPH 3: Performance assessments for the different indication groups

A- 18 HCPs treated 40 burn wounds (1st and 2nd degree). At least, 66.7% assessed parameters as “satisfactory” or better (mean = 2.58 ± 0.60 or “satisfactory”).

B- 32 HCPs treated 93 post-operative wounds. At least, 81.3% assessed parameters as “satisfactory” or better (mean = 2.18 ± 0.47 or “good”).

C- 41 HCPs treated 144 cuts or abrasions. At least, 78.0% assessed parameters as “satisfactory” or better (mean = 2.43 ± 0.57 or “good”).

D- 37 HCPs treated 157 other wound types. At least, 73% assessed parameters as “satisfactory” or better (mean = 2.54 ± 0.59 or “satisfactory”).

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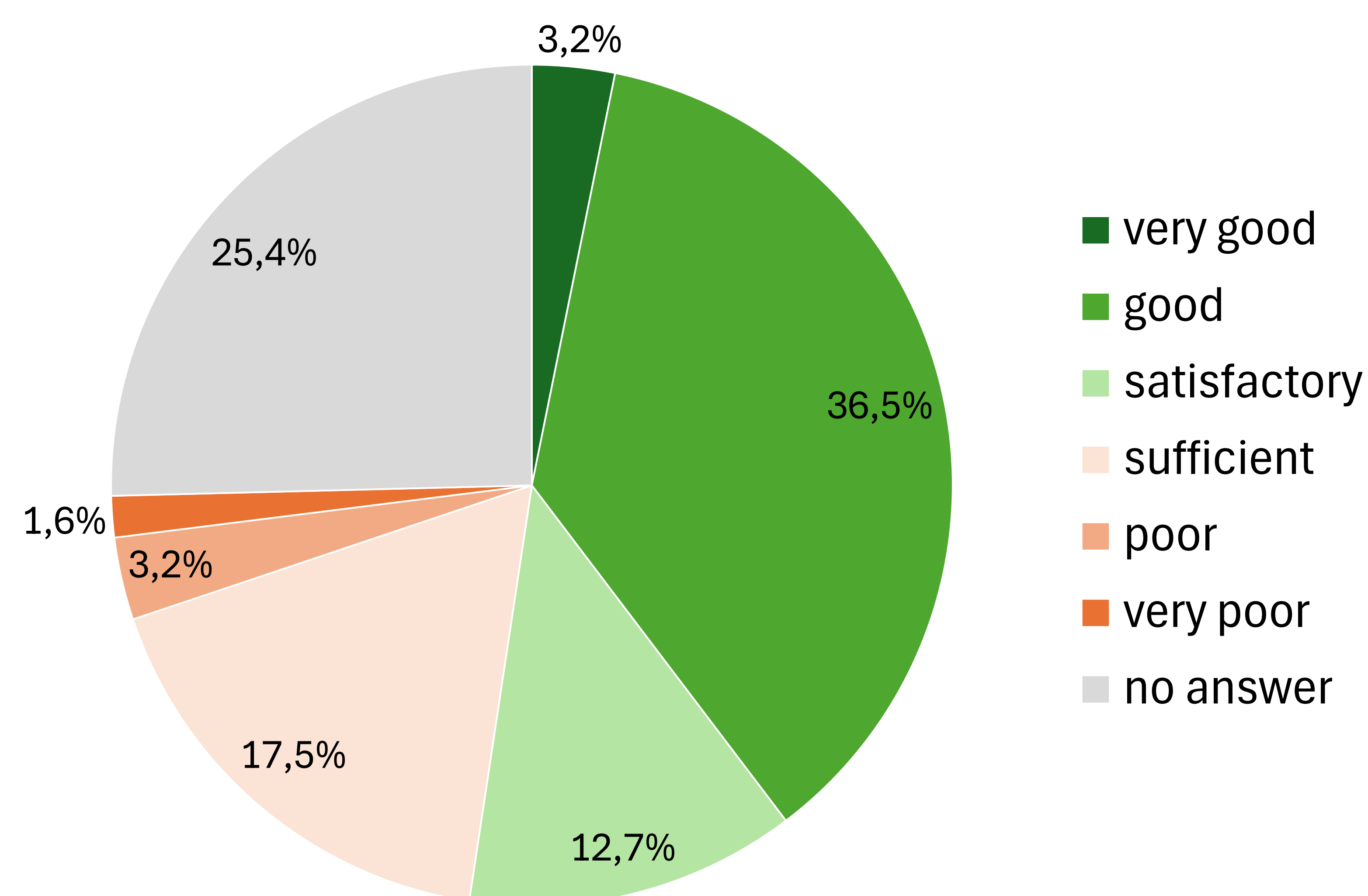
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RESULTS:

85.7% of the HCPs reported that the atraumatic dressing changes and the established wound rest provided by the wound dressing¹ positively influenced the healing process. Clinicians described the dressing¹ as soft (87.3%), smooth (82.5%), and gentle on the wound (76.2%). The dressing's cushioning properties was satisfactory (mean 2.81). Overall general ratings on a six-point scale were favorable: performance (mean 2.25), safety (mean 2.21), and usability (mean 2.26). While seven side effects were reported, no severe adverse events occurred.

CONCLUSION:

The aluminized, low-adherent wound dressing¹ proved to be a **safe, well-tolerated and effective** product for treating acute wounds in routine clinical practice.



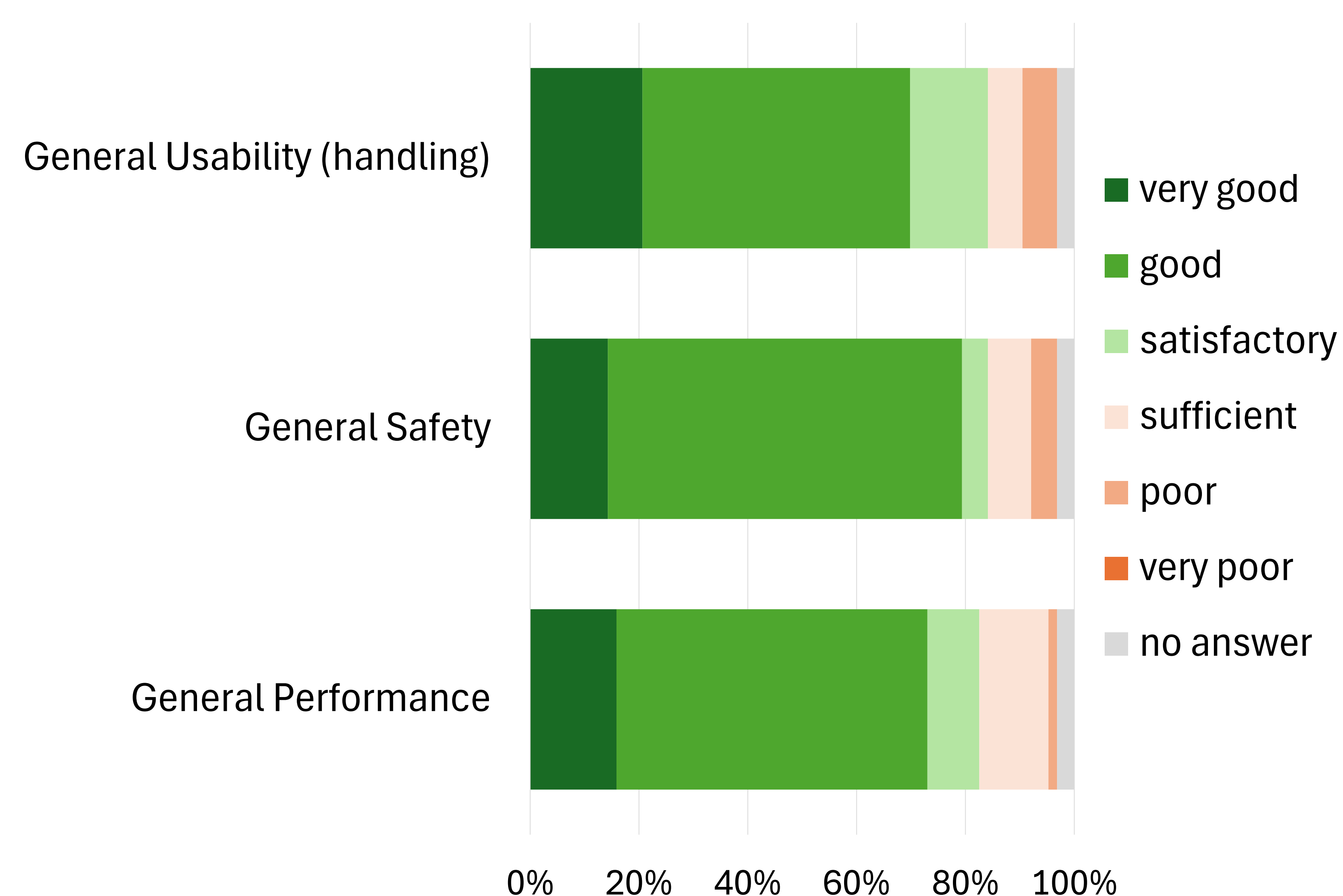
GRAPH 4: Dressing's cushioning properties
47 out of 63 HCPs responded with 52.4% of them assessing the parameter as "satisfactory" or better (mean = 2.81 or "satisfactory").

GRAPH 5: General assessment

84.1% of HCPs rated the general usability as "satisfactory" or better (mean = 2.26 or "good").

84.1% of HCPs rated the safety as "satisfactory" or better (mean = 2.21 or "good").

82.5% of HCPs rated the performance as "satisfactory" or better (mean = 2.25 or "good").



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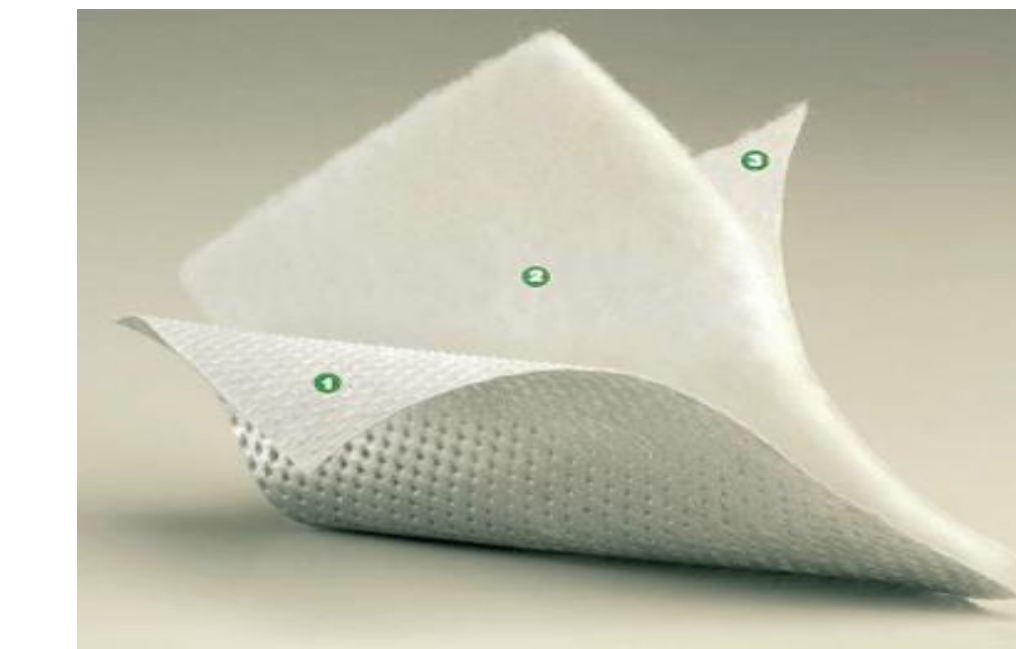
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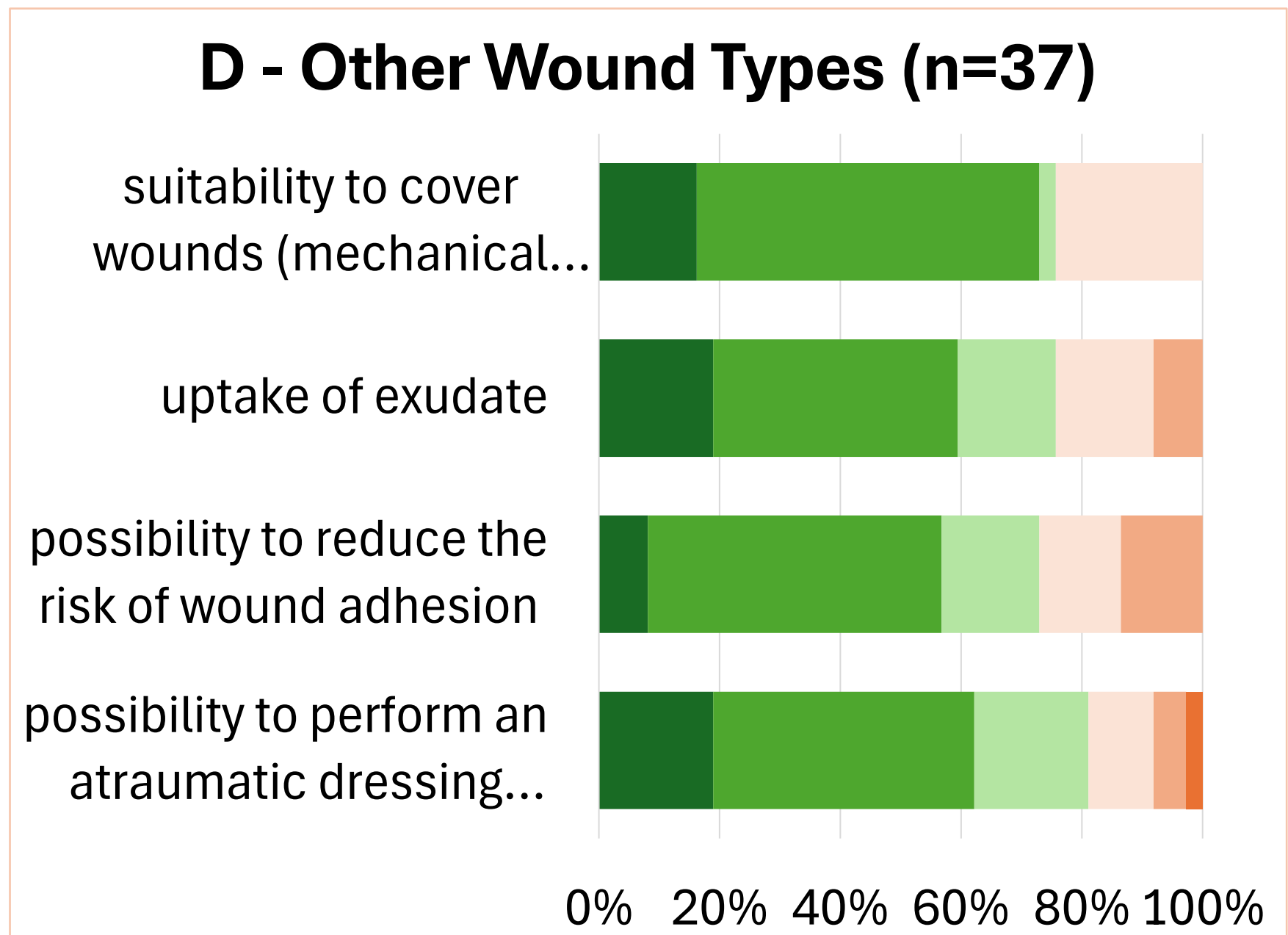
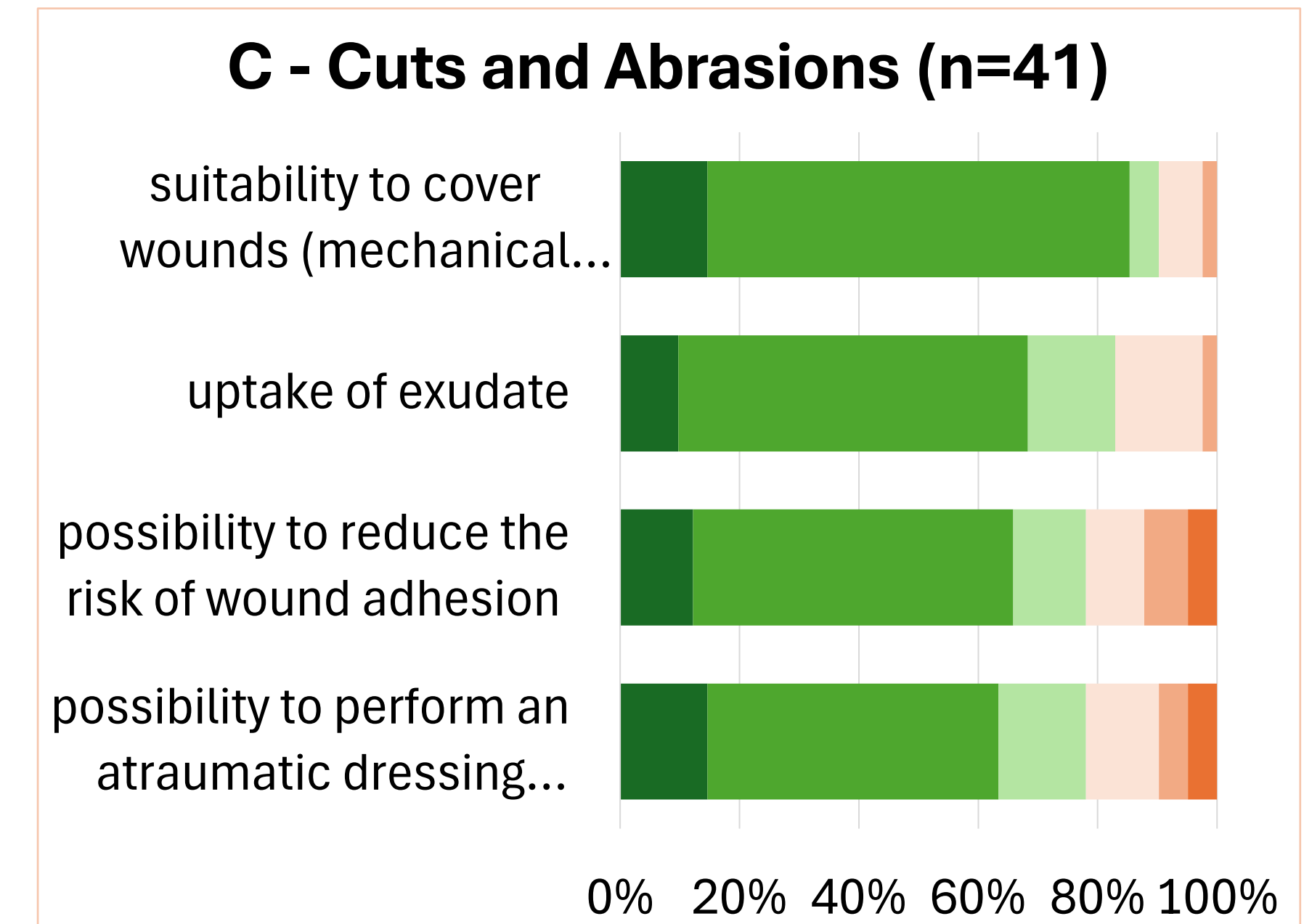
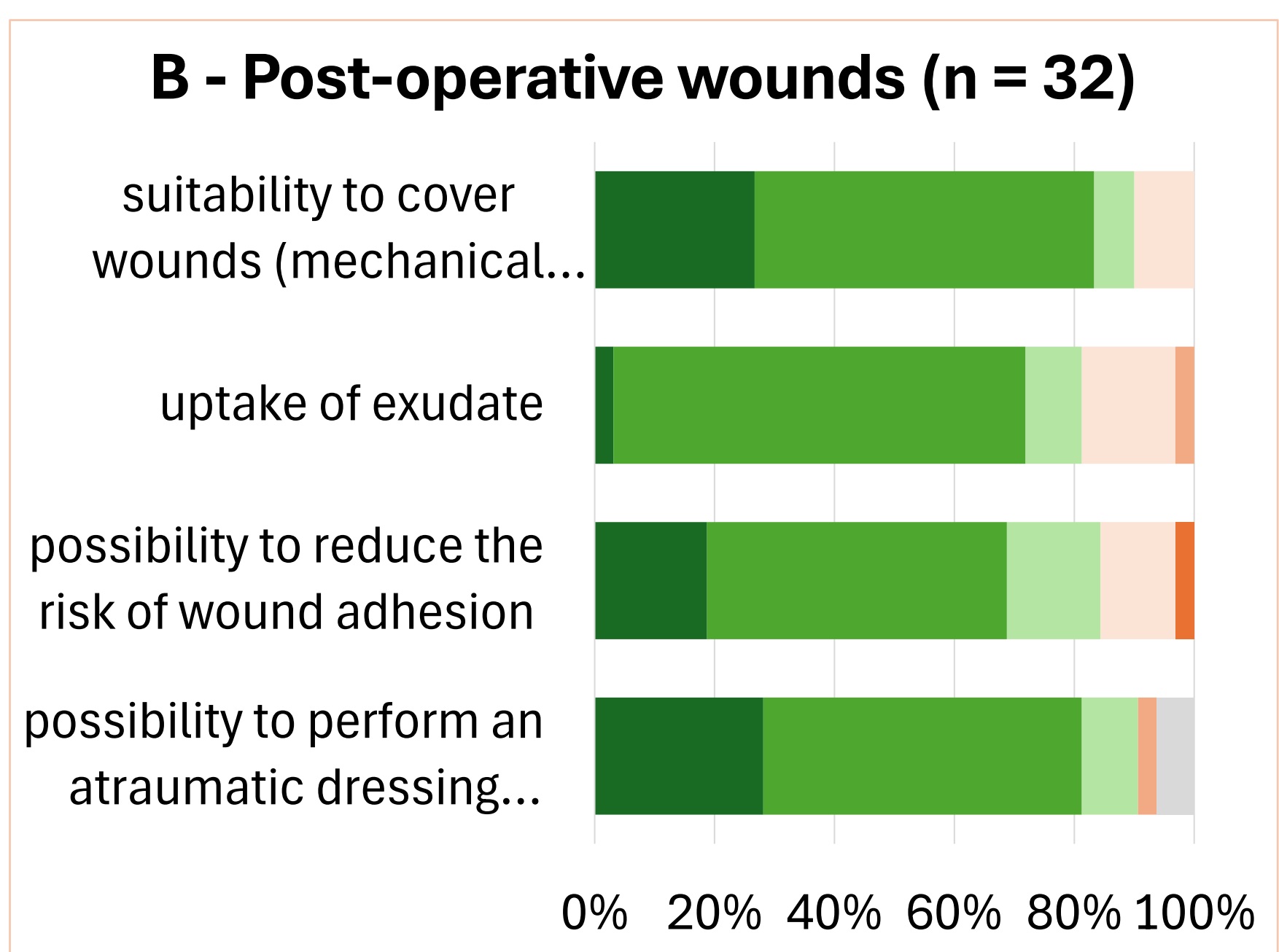
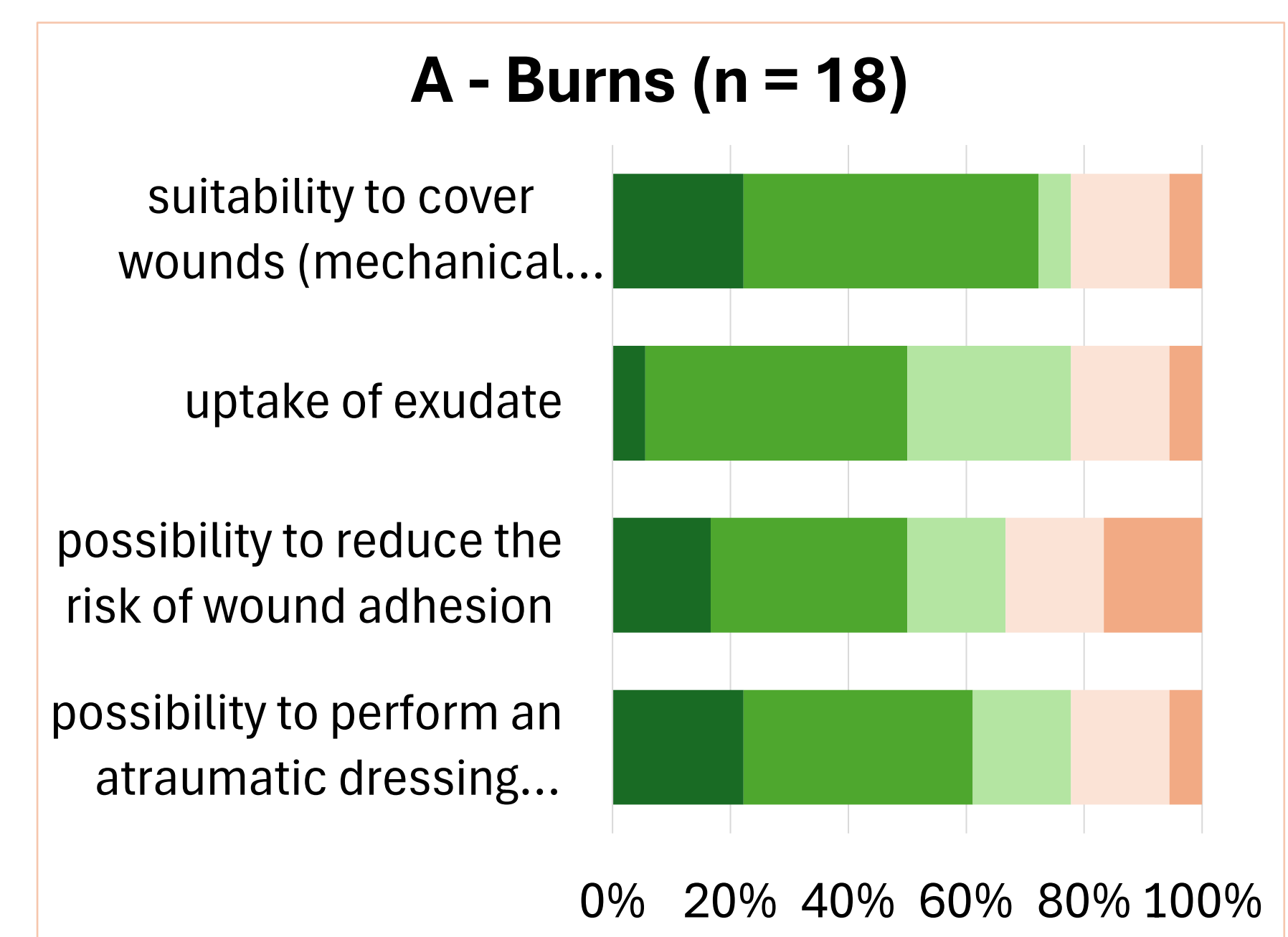
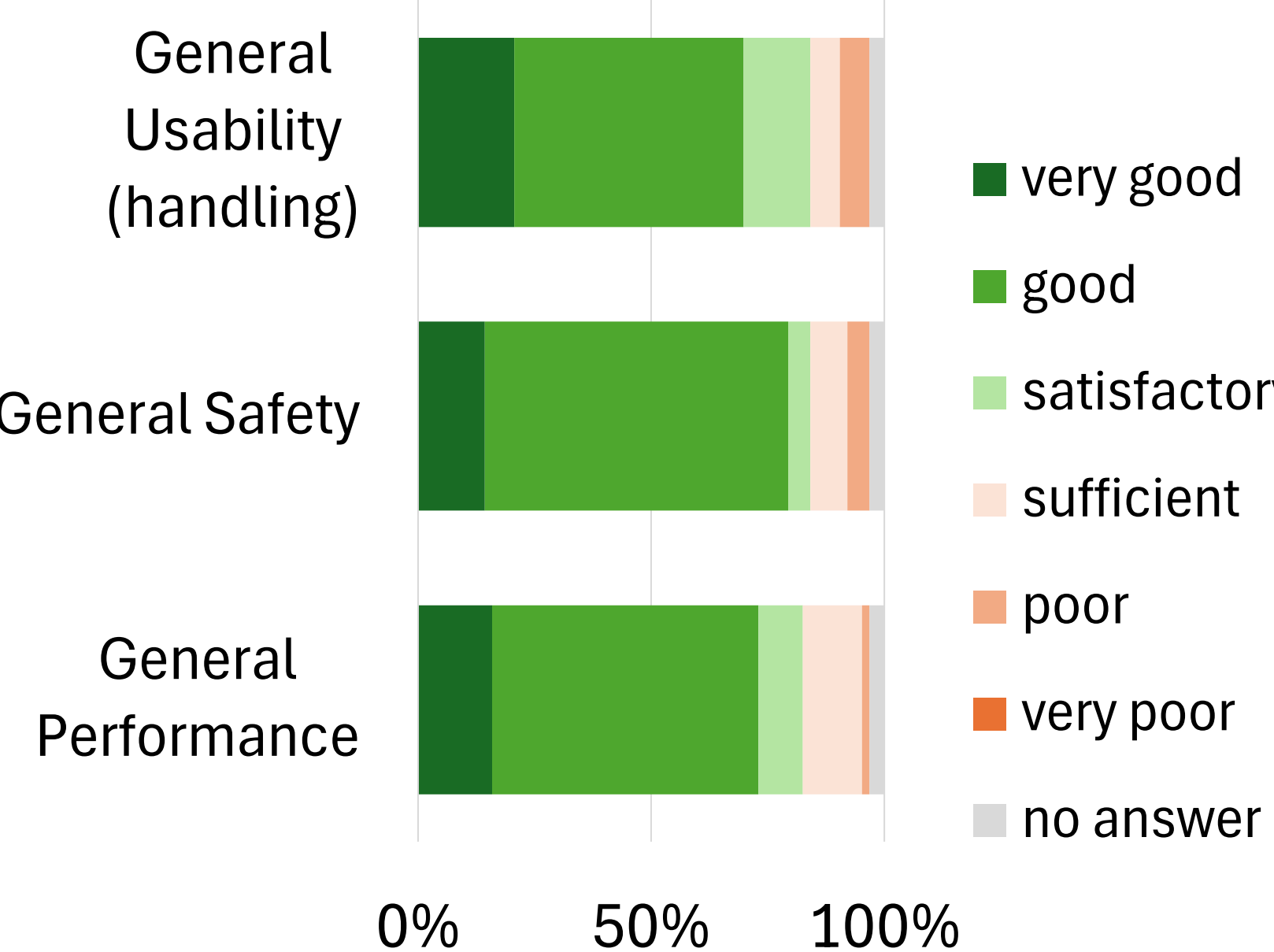
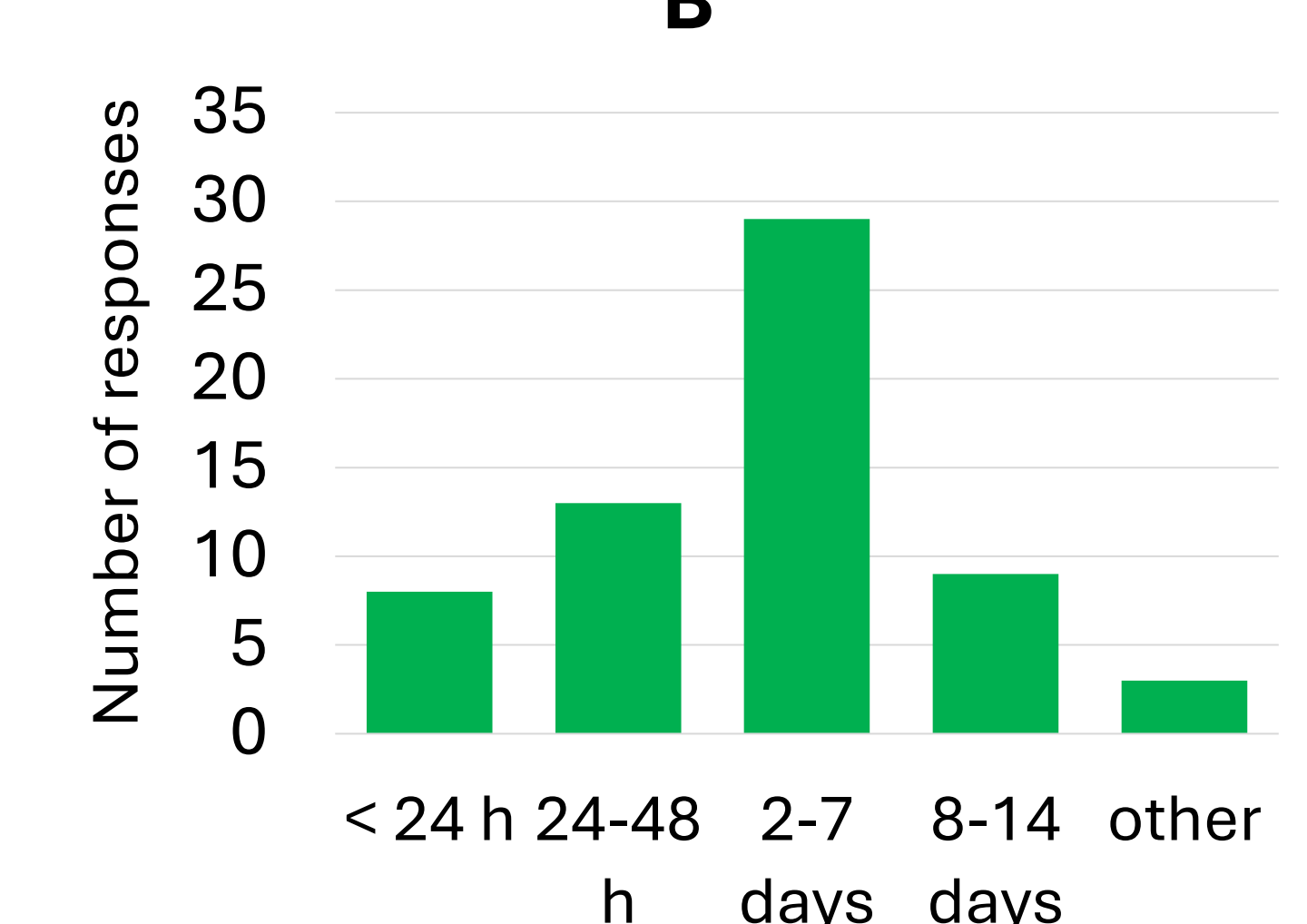
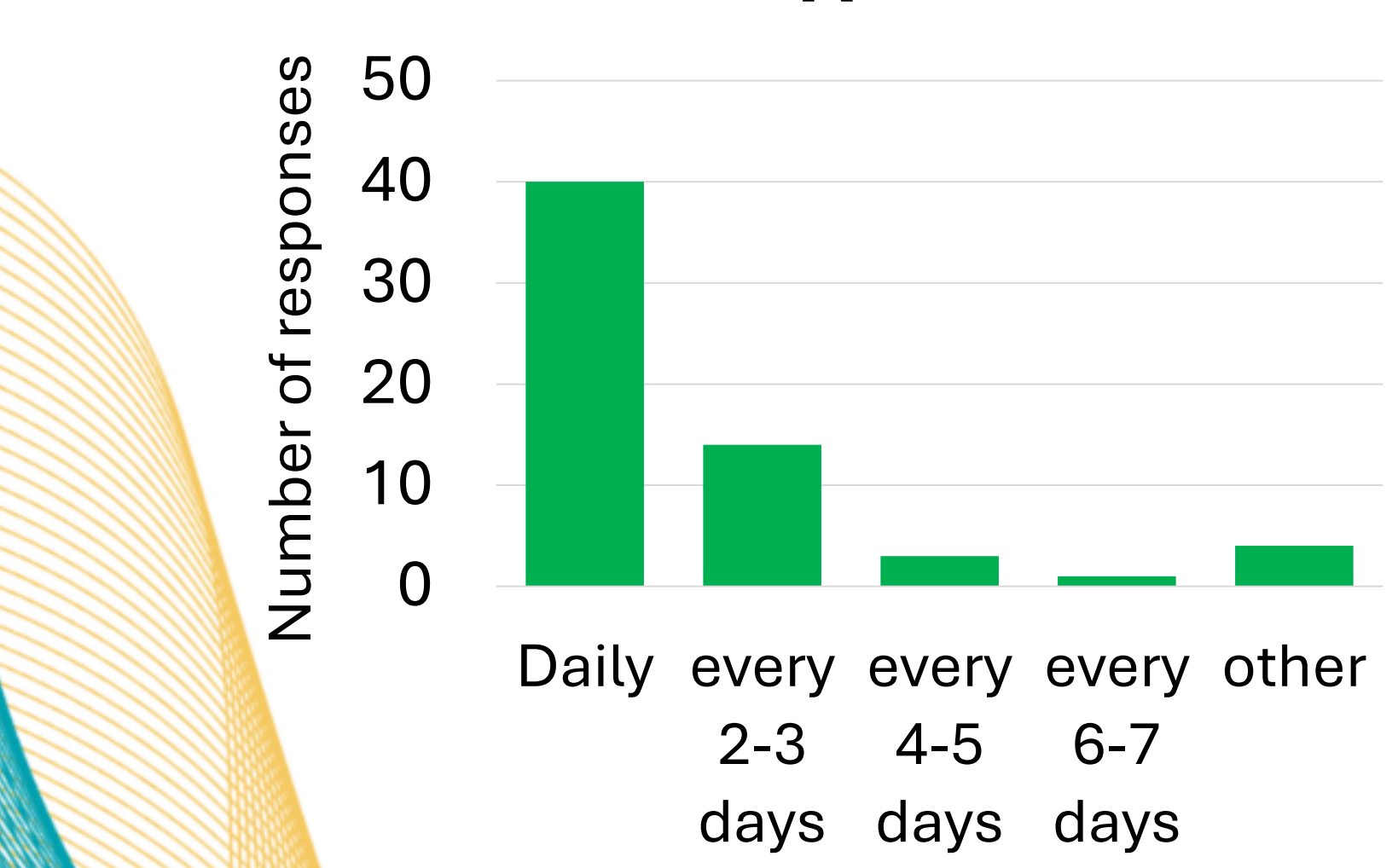
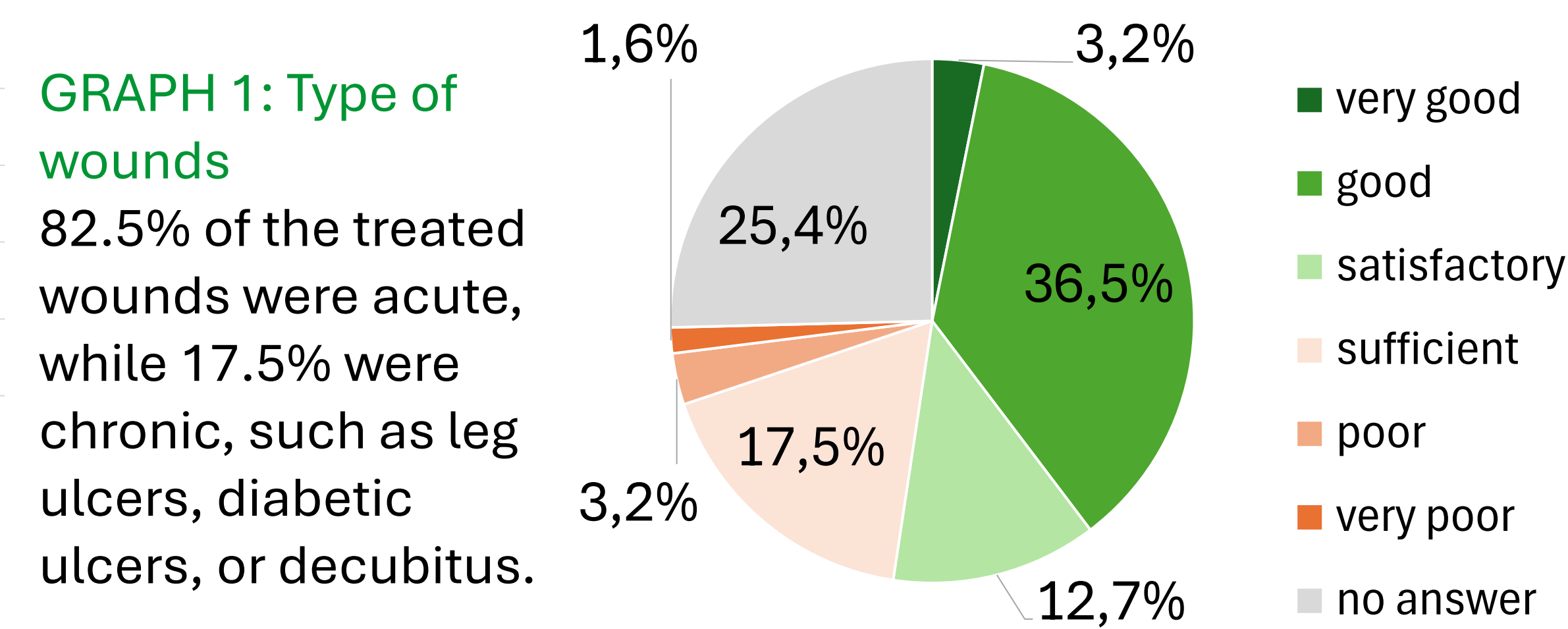
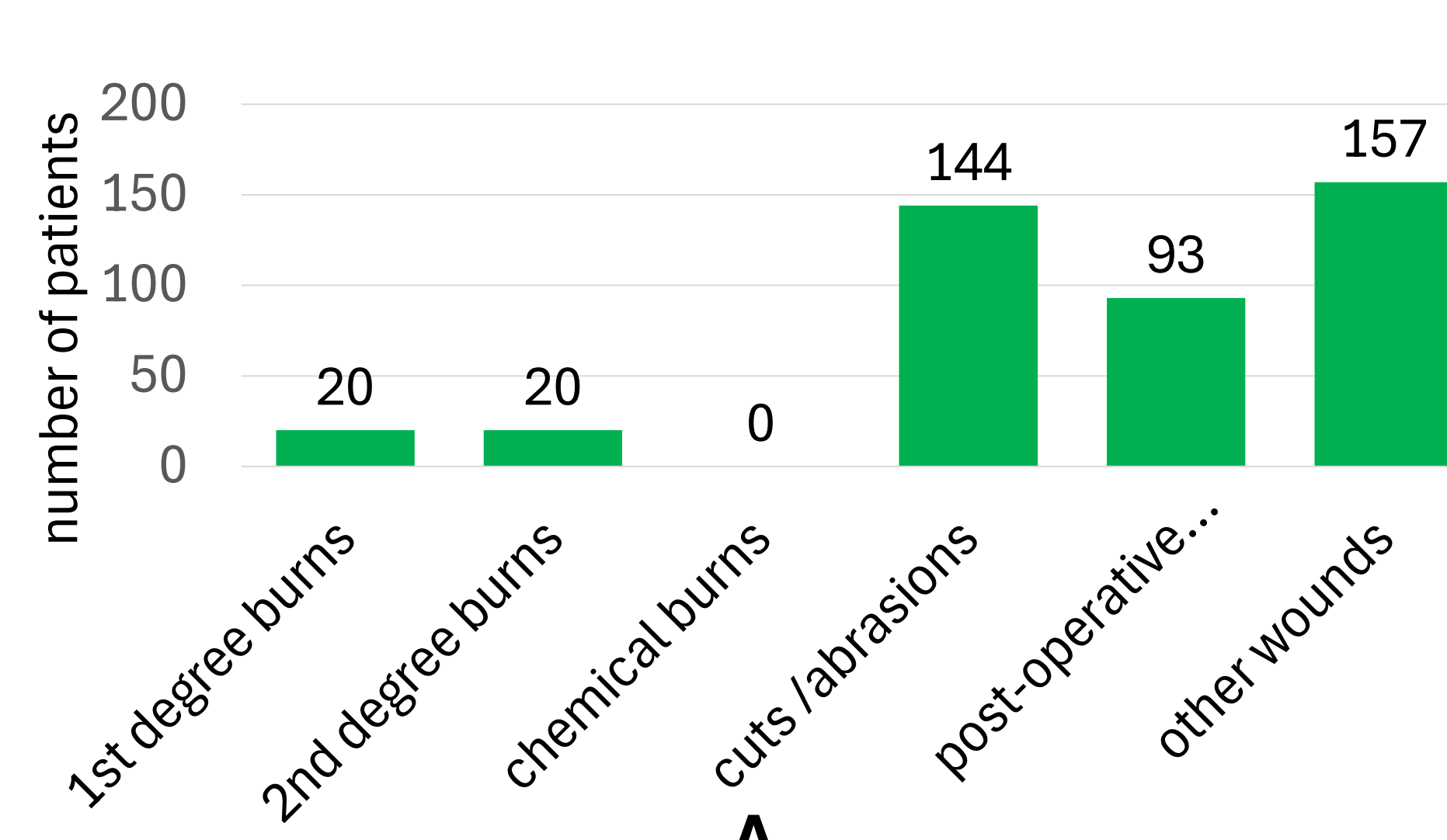
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