

What is the Profend™ Nasal Decolonization Kit?

The **Profend** Nasal Decolonization Kit is a pack of four swabsticks that are pre-saturated with 10% (w/w) Povidone-iodine antiseptic solution and are applied to the nostrils/ anterior nares of the nose to proactively defend patients against *Staphylococcus aureus* (*S. aureus*), Methicillin-resistant *Staphylococcus aureus* (MRSA) and other bacteria that can cause Surgical Site Infections (SSIs) and other Hospital-acquired infections (HAIs).

Why is this solution used?

Up to 30 percent of adults are nasally colonized with *S. aureus* and/or MRSA. *S. aureus* and MRSA account for over 30% of SSIs¹ and are also a key contributor to other HAIs such as CLABSI and VAP. Nasal colonization with these bacteria increases the patient risk of developing an SSI by 9 times.² To help reduce this risk, Povidone-iodine is used as it is a broad-spectrum antiseptic that has been proven effective in reducing both *S. aureus* and MRSA. It offers an added advantage over the widely-used nasal antibiotic, mupirocin, in that there is no known bacterial resistance to it³, thereby supporting antibiotic stewardship within the healthcare environment. By offering the **Profend** Nasal Decolonization Kit, you are ensuring that customers receive the product they need to help support their SSI and other HAI reduction goals.

How is it used?

The **Profend** Nasal Decolonization Kit swabsticks are designed to be applied to the circumference of the patient nostrils and anterior nares. Two swabsticks are applied to each nostril for 15 seconds per swabstick. Thus, using 4 swabsticks, total treatment time is 60 seconds.

Where is it used?

The **Profend** Nasal Decolonization Kit can be used anywhere in a healthcare facility where there are patients who may be nasally colonized with *S. aureus* and MRSA and therefore have an elevated risk of developing an SSI or other HAIs.

Who uses it?

Perioperative nurses who care for patients prior to surgery and nursing staff in other areas of the hospital, ie. ICU, are the primary users of the **Profend** Nasal Decolonization Kit. **Profend** offers unique features valued by clinicians – a preference study showed that over 90% of nurses preferred **Profend** over other PVP-I nasal antiseptic products.⁴

When is it used?

The **Profend** Nasal Decolonization Kit can be used on patients who have tested positive for *S. aureus* and/or MRSA. As an alternative to a “test and treat” strategy, the ease and speed of application and economical design make **Profend** suitable for universal decolonization of all patients, saving time and money spent on patient testing. Regardless of decolonization strategy, **Profend** has proven efficacy—in a study of healthy volunteers, the **Profend** Nasal Decolonization Kit reduced *S. aureus* by 99.7%⁵ at 1 hour and 99.9%⁵ at 12 hours post-application. With this in mind, for pre-operative use, clinicians may choose to apply the product to the patient 1-2 hours prior to surgery depending on hospital protocol.

Features & Benefits

- Easy-to-use, pre-saturated swabstick with unique “snap & swab” design
- Efficacy and antibiotic stewardship through broad-spectrum activity and no bacterial resistance³
- Quick, 60 second total treatment time
- Neat, dry-handle design minimizes mess
- Assured treatment compliance as product is applied by clinician



	REORDER NO.	COUNT	CASE PACK	TI/HI	CASE WEIGHT	CASE CUBE
Profend™ Nasal Decolonization Kit						
Patient Kit	X12048	48 pateint units/case	4 swabs/patient pack, 12 patient packs/shelf unit, 4 shelf units/case	35/5	2.7 lbs	0.263 ft ³

¹ VandenBergh MF, Yzerman EP, van Belkum A, Boelens HA, Sijmons M, Verbrugh HA. Follow-up of *Staphylococcus aureus* nasal carriage after 8 years: redefining the persistent carrier state. *J Clin Microbiol.* 1999;37:3133–3140.

² Price CS, Williams A, Philips G, Dayton M, Smith W, Morgan S. *Staphylococcus aureus* nasal colonization in preoperative orthopaedic outpatients. *Clin Orthop Relat Res.* 2008;466(11):2842-2847.

³ Houang ET et al. Absence of bacterial resistance to povidone iodine. *J Clin Pathol.* 1976 Aug;29(8):752-5.

⁴ PDI user acceptance study.

⁵ PDI in vivo Study 0113-CTEVO.