







vashe wound solution





8.5 fl. oz. (250 ml)

There's only one

vashe

wound solution



MOST AVAILABLE OPTIONS FORCE YOU TO **COMPROMISE...**

THE RIGHT BALANCE

COMPETING FACTORS BETWEEN WOUND CLEANSERS CURRENTLY AVAILABLE MAKES FINDING THE RIGHT BALANCE DIFFICULT.



SAFETY

EXAMPLE: Normal saline

COMPROMISE: Safe, but lacks proven efficacy

When the safest (or non-preserved) options are used, patients are not proactively protected from their predisposed risk of infection.^{1,3} This may predispose them to infection and/or delayed wound closure.³

EFFICACY

EXAMPLE: Hypochlorite preservative-based/blended solutions, Polyhexanide/PHMB, or CHG

COMPROMISE: Some evidence of effectiveness, but strong evidence of damage to healthy cells

When some cytotoxic, traditional options are used (e.g. Dakin's), even with dilution, patients may end up sacrificing the key cells necessary to promote healing of skin and wound closure.²



... BUT WHAT IF YOU **DIDN'T HAVE TO?**

INNATE IMMUNITY

ONE OF THE MOST POWERFUL PHENOMENA IN BIOLOGY, AND WE ARE LIVING PROOF.⁴

The Human Inflammatory Response

- 1 2 3 4 5
- Pathogen is targeted by chemotaxis
- Neutrophil forms pseudopods that engulf the pathogen
- Neutrophil then forms a phagosome, which surrounds the pathogen
- Hypochlorous acid (HOCI) is generated
- 5 The pathogen is killed by HOCl action
- 6 Residual material including the remaining hypochlorous acid is removed by exocytosis

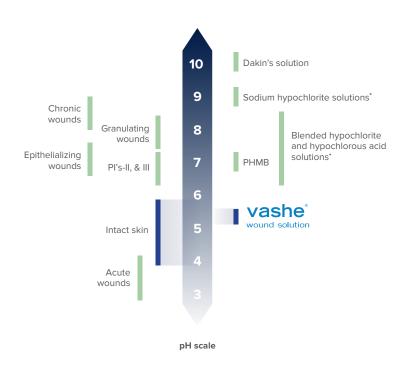
Vashe Wound Solution contains 0.033% (330 ppm) of hypochlorous acid as an antimicrobial preservative.





WHY pH MATTERS

THE ROLE OF pH IN CHRONIC WOUNDS AND SOLUTIONS



Wound Progression

- As chronic wounds heal, there is a significant decrease in the wound pH
- Protease activity and oxygen release
- Reduced toxicity of bacterial end products
- Enhanced destruction of abnormal collagen
- Angiogenesis
- Increased macrophage and fibroblast activity and control of enzyme activity

Wound pH and healing are related.6-9

"...pH has the greatest influence on the antimicrobial activity of chlorine in solution. An increase in pH substantially decreases the biocidal activity of chlorine, and a decrease in pH increases this activity." It can take twice as long for hypochlorite solutions to kill when pH increases from 6 to 8. Certain studies demonstrated that lowering pH from 9 down to 4.4 was not only effective against bacteria but spores as well."⁵

*Preservative within solution

THE BEST OF BOTH WORLDS

THE SAFETY OF SALINE¹⁰...

Biocompatibility and Toxicity Data for Vashe Wound Therapy^{10,11}

Animal Model	Results	
Eye Irritation (Rabbit)	No ocular irritation	
Skin Sensitization (Guinea Pig)	No skin sensitization, no delayed- contact hypersensitivity	
Primary Dermal Irritation (Rabbit)	No dermal irritation, no erythema or edema	
Acute Oral Toxicity (Rat)	No oral toxicity (LD50>5g/kg)	
Cell-Based Assay		
Bacterial Mutagenicity	Non-mutagenic	
Cytotoxicity	Biocompatible with fibroblasts and keratinocytes	

The column to the right shows hypochlorous acid (at 4 times the normal % of Vashe Wound Solution) is non-cytotoxic (Grade 0), in contrast to other commonly used cleansers that had significant cytotoxic effects (Grade 3).¹⁰

Comparative Cytotoxicity Testing of Hypochlorous Acid* and Commonly Used Wound Irrigants Against Human Dermal Fibroblasts and Keratinocytes (n=5 per group, p<0.01)¹⁰

Wound Irrigant	Results	Grade
Hypochlorous Acid (@ 4 times the normal % of Vashe Wound Solution)	Pass	0
Saline (0.9% NaCl, pH 5.0)	Pass	0
Dakin's Solution (0.25%)	Fail	3
Dakin's Solution (0.5%)	Fail	3
Chlorhexidine gluconate (4%)	Fail	3
Hydrogen peroxide (3%)	Fail	3
Povidone iodine (7.5%)	Fail	3
Povidone iodine (10%)	Fail	3

...WITH A POWER BEYOND DAKIN'S¹²

Vashe Wound Solution has been tested against many common pathogens, including fungi, spores, and multi-drug-resistant bacterial strains. In clinical studies, the organisms are mechanically removed from the wounds in great numbers, allowing the immune system to sustain the reductions. 12-14

Organism	Time to kill	% Reduction
MRSA	15 seconds	99.999%
VRE	15 seconds	99.999%
Escherichia coli	15 seconds	99.999%
Acinetobacter baumannii	15 seconds	99.999%
Bacteroides fragilis	15 seconds	99.999%
Candida albicans	15 seconds	99.999%
Enterobacter aerogenes	15 seconds	99.999%
Enterococcus faecium	15 seconds	99.999%
Haemophilus influenzae	15 seconds	99.999%
Klebsiella oxytoca	15 seconds	99.999%
Klebsiella pneumoniae	15 seconds	99.999%

Organism	Time to kill	% Reduction
Micrococcus luteus	15 seconds	99.999%
Proteus mirabilis	15 seconds	99.999%
Pseudomonas aeruginosa	15 seconds	99.999%
Serratia marcescens	15 seconds	99.999%
Staphylococcus epidermidis	15 seconds	99.999%
Staphylococcus haemolyticus	15 seconds	99.999%
Staphylococcus hominis	15 seconds	99.999%
Staphylococcus saprophyticus	15 seconds	99.999%
Streptococcus pyogenes	15 seconds	99.999%
Staphylococcus aureus	15 seconds	99.995%
C. difficile endospores	15 seconds	99.93%

^{*}Preservative within solution

THE RESULTS



When compared to normal saline, treating wounds with Vashe resulted in a **19.5% reduction** in OR visits, **13.7% faster** wound closure, and a **36% reduction** in length-of-stay.¹⁵



Compared to an HOCl-preserved solution, treating wounds with normal saline alone **increased the treatment cost** of debridements by 24% and **increased the average daily hospital cost** (including interventions) by 56%.¹⁵



The use of Vashe with collagenase results in more efficient wound bed preparation and debridement versus saline with collagenase.¹⁶



Vashe assists in the management of hard-to-heal chronic wounds by **penetrating and disrupting** the polysaccharide/protein matrix of wound pathogen biofilms.¹⁷⁻¹⁸



Effective mechanical reduction wound bioburden – Compared to other commonly used wound solutions, Vashe represents an alternative antimicrobial preservative option without concerns of emergent antibiotic resistance.¹³



In a study using Vashe for general wound cleansing with 31 patients in an outpatient wound care center: **86% of chronic wounds healed** at evaluation end, a remarkable **reduction in pain**, and **wound odor** was eliminated.¹⁹



Vashe soaks as a home care treatment protocol resulted in **reductions of 1.9 and 1.0 visits per episode** for VLU's and PU's respectively.²⁰

For more information on the results of these studies, please contact your local Vashe account manager or refer to the references below.

WAYS TO USE VASHE





General wound cleansing





HOW TO GET VASHE

Bottle Size/Pack Size	Vashe Wound Solution	Vashe Wound Solution for Instillation Applications*
4.0 fl. oz. (118 mL) Bottles/24-Pack	00312	Not available
8.5 fl. oz. (250 mL) Bottles/12-Pack	00313	00316
16.0 fl. oz. (475 mL) Bottles/12-Pack	00314	00317
34.0 fl. oz. (1 liter) Bottles/6-Pack	00322	00323

15. Gallagher, K., Hermans, M., Cardenas, L. Alberto, E. A retrospective health economic analysis of a stable hypochlorous acid preserved wound cleanser versus 0.9% Saline Solution as Instillation for Negative Pressure Wound Therapy in Serious and Infected Wounds. Poster presented at SAWC Spring 2021. 16. Miller, C., Moultals, A. Significant cost savings realized by changing debridement protocol. Ostomy Wound Management, 2014; 60 (9): 8-9. 17. Robson, M. Treating Chronic Wounds with Hypochlorous Acid Disrupts Biofilm. Today's Wound Clinic, 2014, Nov/Dec. 18. Harriott MM, Bhindi N, Kassis S, Summitt B, Perdikis G, Wormer BA, Rankin TM, Kaoutzanis C, Samaha M, Stratton C, Schmitz JE. Comparative Antimicrobial Activity of Commercial Wound Care Solutions on Bacterial and Fungal Biofilms. Ann Plast Surg. 2019 Oct;83(4):404-410. 19. Niezgoda JA, Sordi PJ, Hermans MH. Evaluation of Vashe Wound Therapy in the clinical management of patients with chronic wounds. Adv Skin Wound Care. 2010;23(8):352-357. 20. Wheeler, A. Improving Clinical and Fiscal Outcomes in the Home Care Setting with Hypochlorous Acid. Ostomy Wound Management. 2020; 66 (2): 8-119.

