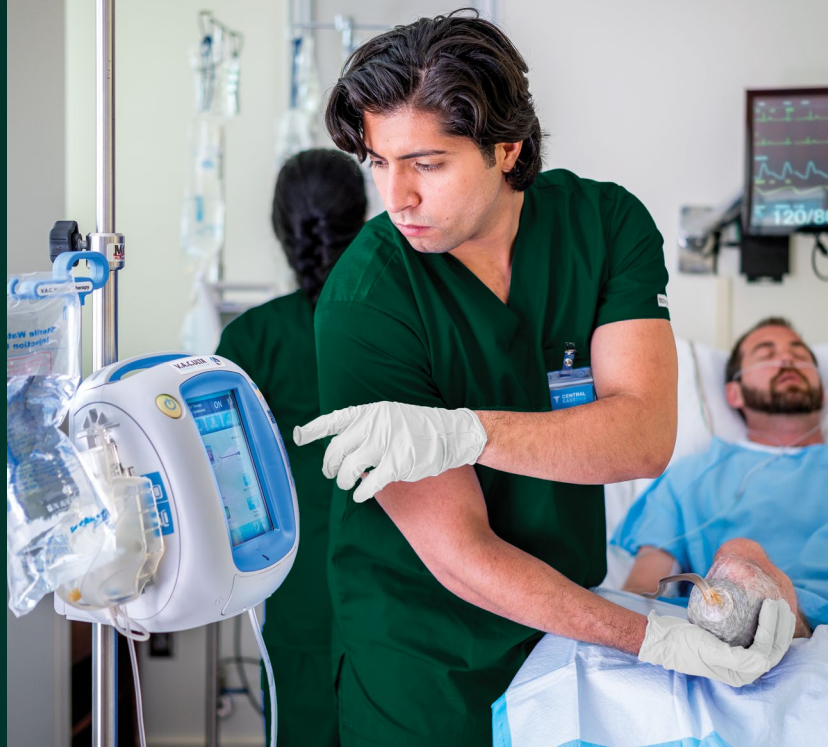
solventum

Help give your patients the best chance to heal

Solventum™ Veraflo™ Therapy significantly outperforms traditional dressings[1]



Faster closures, fewer surgeries—better outcomes

In a randomized controlled trial of 120 patients with traumatic wounds* conducted at Hospital das Clínicas de São Paulo, it was shown that Veraflo Therapy can improve patient outcomes in acute complex traumatic wounds.

Traditional care group (n=40)		NPWTi-d Group (n=39)	
Traditional care — gauze layer dressing		**NPWT with instillation and dwell (NPWTi-d)**	
11.7 days wound closure time	vs	**6.1 days** wound closure time	Shorter time to wound closure (p<0.001) **48%**
6.2 surgical procedures		**3.0** surgical procedures	Fewer number of surgical procedures (p<0.001) **51%**
Dressing change: 24-48 hours		Normal saline 0.9% instilled every 2 hrs with 20 minute dwell time at -125 mmHg; surgical debridement and dressing changes every 3 days	

Calculations are derived based on the relative patient group means reported in the study as statistically significantly different (p<0.05).

Help lower the numbers that matter with Veraflo Therapy

→ Learn more at **go.solventum.com/Veraflo**

* A randomized controlled trial (Milcheski, et al 2025) demonstrated Veraflo™ Therapy can improve patient outcomes in acute traumatic complex wounds. Following random assignment, 120 patients were assessed with 39 patients undergoing Veraflo™ Therapy (NPWTi-d), 41 patients undergoing NPWT, and 40 patients treated with gauze (traditional) dressing. Surgical debridement and dressing changes varied by treatment.

[1] Milcheski D, Clivatti G, Santos R, González C, Monteiro A, Gemperli R. Effectiveness of negative-pressure wound therapy with instillation compared to standard negative-pressure wound therapy and traditional gauze layer dressing for the treatment of acute traumatic wounds: A randomized controlled trial. Journal of Plastic, Reconstructive & Aesthetic Surgery. Vol.10. 208–218. Retrieved from https://doi.org/10.1016/j.bjps.2024.11.005. (https://www.sciencedirect.com/science/article/pii/S1748681524007010)