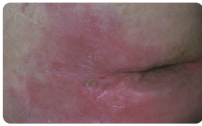

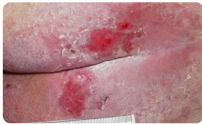







+ IAD differentiation, classification and treatment

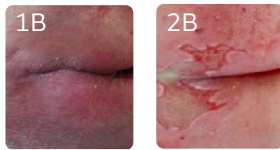
	Incontinence-Associated Dermatitis ^{1,3}	Pressure Injury ^{1,3}
Cause	Moisture (urinary, faecal, urinary-faecal)	Pressure/Ischaemia
Location	 Perineal* (buttocks, natal cleft, perineum, perianal)	 Over bone
Depth	 Superficial	 Superficial to deep
Tissue colour	 Pink/red *	 Pink/red, black, yellow
Edges/Shape	 Diffuse/wandering/irregular*	 Well defined
Associated factors	Urinary and/or faecal incontinence	Reduced mobility/Sensory impairment

*Images courtesy of Professor Dimitri Beekman, Ghent University, Belgium

IAD Categorisation tool²

Category 1A	Persistent redness without signs of infection. A variety of tones may be present (could be pale or purple in dark skin)
Category 1B	Persistent redness WITH clinical signs of infection - such as white scaling of skin or satellite lesions
Category 2A	Skin loss without clinical signs of infection - such as excoriation, denudation or skin erosion
Category 2B	Skin loss WITH clinical signs of infection - white scaling skin/slough may be visible, shiny wound with excess exudate, green appearance may suggest Pseudomonas

Choosing the right product

Skin condition	 Healthy skin with exposure to urine/faeces	 Category 1A	 Category 2A	 1B 2B Category 1B/2B
Product selection				
Intervention³	<ul style="list-style-type: none"> Use PROSHIELD® Foam & Spray Cleanser to gently clean soiled area. Apply PROSHIELD Plus Skin Protectant. Avoid rubbing or friction. Reapply as often as necessary. 	<ul style="list-style-type: none"> Use PROSHIELD Foam & Spray Cleanser to clean soiled area. Apply PROSHIELD Plus Skin Protectant. Re-apply after each incontinence episode or as often as necessary. 	<ul style="list-style-type: none"> Use PROSHIELD Foam & Spray Cleanser to clean soiled area. Apply PROSHIELD Plus Skin Protectant with a gentle patting motion, or SECURA® No-Sting Barrier Film Spray. Re-apply as often as necessary. 	<ul style="list-style-type: none"> Use PROSHIELD Foam & Spray Cleanser to clean soiled area. Apply appropriate treatment for identified infection. Once resolved treat as per 1A or 2A as appropriate.

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References: 1. Doughty, D et al. Incontinence-associated dermatitis. Consensus statements, evidence-based guidelines for prevention and treatment, and current challenges. J Wound Ostomy Continence Nurse. 2012;39:303-315. 2. Beekman D, et al. The Ghent global IAD categorization tool (GLOBIAD). Skin integrity research group.- Ghent University 2017. 3. Beekman D, et al. Incontinence-associated dermatitis: moving prevention forward. London: Wounds International; 2015. Please consult product labels and inserts for any indications, contraindications, hazards, warnings, cautions and instructions for use. Products listed and outline of care are examples only. Product selection and management should always be based on comprehensive clinical assessment.

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