

Classification of Wound Dressings

General and Plastic Surgery Devices Advisory Panel

Meeting September 20-21, 2016

Dr Jon Hopper FRCSEd



Objective

- Review ConvaTec's written comments
 - Clarify the intended purpose of antimicrobial dressings
 - Brief review of safety and effectiveness
 - Discuss resistance concerns
 - Propose optimal regulatory pathway for antimicrobial dressings (Class II)

Intended purpose

- Primary purpose of antimicrobial dressings
 - exudate management
 - optimize wound environment
- Secondary purpose
 - Antimicrobial barrier
 - Control bioburden within dressing
- No therapeutic action
- Intended for short term use to gain control
 - Where wound infection is already established
 - Where excessive wound bioburden may be contributing to delayed closure

Safety and Effectiveness

- Peer reviewed controlled studies on thousands of patients published
 - A 76% reduction in surgical site infection following joint arthroplasty¹.
 - A reduction in surgical site infections from 16% to 4% in cases of excised pilonidal sinus².
- Post Market Surveillance data reveals that Adverse Events are infrequent (0.0007%), well characterized and similar to Class I dressings.

1 Cai, J, et al. Aquacel Surgical Dressing Reduces the Rate of Acute PJI Following Total Joint Arthroplasty: A Case-Control Study, J Arthroplasty. 2014 Jun; 29 (6), 1098-1100.

2. Marinovic M, et. al. Application of Wound Dressing Molndal Technique in Clean and Potentially Contaminated Postoperative Wounds – Initial Comparative Study, Coll. Antropol. 2011; 35(2): 103-106

Silver Resistance

- Antiseptics in general have a far lower propensity to induce bacterial resistance than antibiotics (multiple target sites)
- Ionic silver has a broader spectrum of antimicrobial activity than antibiotics and is effective against antibiotic resistant bacteria such as MRSA, VRE, ESBL, CRE, KPC^{3,4}.
- No evidence to suggest cross-resistance between silver and antibiotics

3 Percival, Prevalence of Silver Resistance in Bacteria Isolated from Diabetic Foot Ulcers and Efficacy of Silver Containing Wound Dressings, *Ostomy Wound Management*, 2008, 54 (3), 30-40

4 Bowler, Multidrug-resistant organisms, wounds and topical antimicrobial protection, *International Wound Journal*, 2012 (9), 387-396

Recommendations on Classification

- Case for upregulating to Class III has not been made
 - Widespread evidence confirming safe and effective
 - No evidence that they pose serious risk to health
- Class II with special controls is appropriate for antimicrobial dressings
 - Allows appropriate scrutiny and robust evidence from manufacturer to demonstrate safety and effectiveness
 - Upholds least burdensome principle
- Recommend FDA develops specific, special controls for antimicrobial dressings, in conjunction with all relevant stakeholders, to ensure transparent and consistent approach to regulating these devices

Conclusion

- Antimicrobial dressings are designed as barriers that manage exudate: they are not intended to be therapeutic
- Safety and effectiveness has been established
- No evidence that antibiotic resistance is being driven by silver
- No evidence that up-regulation of **antimicrobial** dressings to class III will decrease **antibiotic** resistance