



Prevena™
Incision Therapy

PROMISES study data suggests 3M™ Prevena™ Therapy can help advance the standard of care.

Promising new data from a randomized controlled trial further affirms that Prevena Therapy significantly reduces the risk of 90-day surgical site complications (SSCs) and postop readmissions.



The PROMISES (Post-market, Randomized, Open-Label, Multicentre Study to evaluate Effectiveness) Trial

The Effectiveness of Closed Incision Negative Pressure Therapy versus Silver-Impregnated Dressings in Mitigating Surgical Site Complications in High-Risk Patients After Revision Knee Arthroplasty.

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Study Design

Post-market, randomized, open-label, multicentre study.

Study Purpose

- Evaluate the effectiveness of closed incision negative pressure therapy (ciNPT) versus standard of care (SOC) dressings in reducing surgical site complications (SSCs).

Methods

- A total of 294 revision total knee arthroplasty (rTKA) patients (15 centers) at high-risk for wound complications were randomized to ciNPT or SOC (n=146 each) and stratified by revision type (aseptic vs. septic). Demographics, comorbidities, causes of revision and duration of treatment were similar between cohorts ($p>0.05$).
- 242 patients with incisions completed follow-up, including 124 patients treated with 3M™ Prevena™ Therapy (ciNPT) and 118 patients treated with an antimicrobial silver-impregnated dressing (SOC).
- Primary outcome was the 90-day incidence of SSCs with stratification in accordance with revision type. Secondary outcomes were the 90-day health care utilization parameters (readmission, reoperation, dressing changes, and visits) and patient-reported outcomes (PRO). Treatment-related adverse events were compared and stratified as severe and non-severe.

Results

- Compared to SOC, patients in the Prevena Therapy group demonstrated:
 - Significantly decreased rates of surgical site complications (ciNPT 3.4% vs. SOC 14.3%, $p=0.0013^*$)
 - Significantly lower readmission rates (ciNPT 3.4% vs. SOC 10.2%, $p=0.0208^*$)
 - Reduced dressing changes (ciNPT 1.1+0.29 vs. SOC 1.3 +0.96, $p=0.0003^*$)

Conclusions

- Prevena Therapy significantly mitigated 90-day surgical site complications, readmission rates, and reduced frequency of dressing changes compared with the standard of care among high-risk rTKA patients.
 - Treatment-related adverse effects were similar between both cohorts.
 - The benefit of ciNPT on specific SSCs and post-rTKA patient-reported outcomes (PRO) was not established and further studies are warranted.

Patients treated with Prevena Therapy were:

4X* less likely

to experience a post-operative 90-day surgical site complication.

3X* less likely

to be readmitted compared to the standard of care group.

*Calculation(s) are derived based on relative patient group incidence rate reported in this study. *Statistically significant ($p<0.05$)



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