Wounds UK

Barrier products EXPLAINED

Everything you need to know about but were afraid to ask

Supported by CliniMed®

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Glossary

BARRIER PRODUCTS: Skin barrier products, such as LBF® (CliniMed), are recommended in practice to protect the skin from moisture damage; for more information on the LBF range, see page 3

DRESSING ADHESION: Adhesion (sticking) of dressing materials to the wound bed and periwound skin

MARSI: Medical adhesive-related skin injury, trauma caused by the repeated removal of dressings, tapes, and other medical adhesive devices

MASD: Moisture-associated skin damage, which can be caused by bodily fluids such as wound exudate and perspiration, in conjunction with pressure, friction, and shear

SKIN INTEGRITY: Skin being whole, intact, and undamaged

Overview of barrier products

Barrier products, such as skin barrier films, are designed to protect the skin by minimising its exposure to excessive moisture and irritants. These may be topical preparations (available in a spray, foam applicator or wipe format) that can be applied to the skin without stinging, and dry quickly to create a breathable and transparent film. They provide a protective water-repellent barrier against irritants and harmful bodily substances, such as urine and faeces.

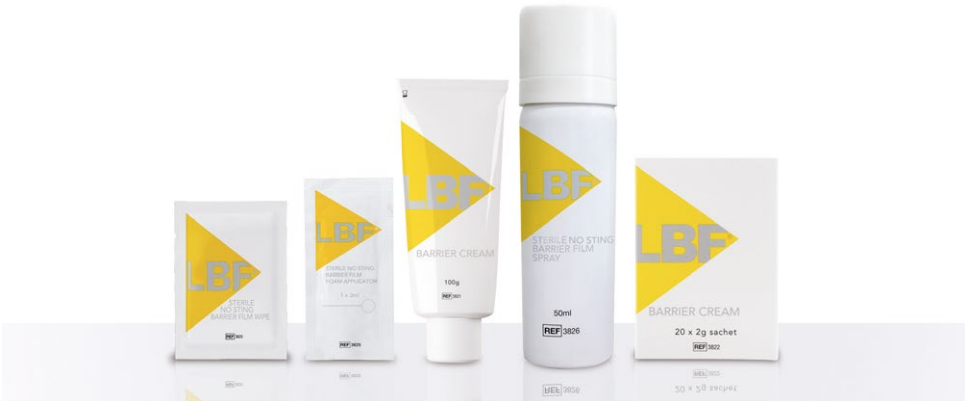
Barrier films will not affect dressing application and are simple for both healthcare providers and patients/carers to use. Sterile products are particularly useful as they can be used on both intact and injured skin and are recommended for use in patients with a high risk of infection (Fumarola et al, 2020).

The LBF® Sterile Barrier Film Range (CliniMed) uses healthcare-grade silicones to protect both intact and injured skin from moisture, such as from wound exudate or other fluids, as well as from friction, shear, and medical adhesive-related skin injury (MARSI). The LBF® Barrier Cream (CliniMed) provides an effective barrier to protect intact skin from the harmful effects of bodily fluids, such as stoma output and excessive perspiration.

The LBF range includes applications suitable for different clinical scenarios and wound types:

- LBF Sterile Barrier Film Foam Applicator (1ml and 2ml)
- LBF Sterile Barrier Film Spray (30ml and 50ml)
- LBF Sterile Barrier Film Wipes (30 pack)
- LBF Barrier Cream range (100g, 30g and 2g sachet).

The LBF Sterile Barrier Film Range is the only full sterile barrier film range available on the market in the UK, providing long-lasting skin protection and an ideal surface for dressing adhesion. The LBF Barrier Cream is highly concentrated, non-greasy and pH-balanced; individually packaged sachets are available for quick and easy use, which may help to prevent overuse of resources and generate cost savings.



Protecting at-risk skin

Patients with fragile or aged skin are at risk of skin complications such as moisture-associated skin damage (MASD) and MARSI, as well as other issues such as pressure ulcers, skin tears, and infections. These can lead to pain, reduced mobility, poor quality of life, further health complications and increased healthcare costs (Moncrieff et al, 2013).

WHAT IS MASD?

MASD – including incontinence-associated dermatitis (IAD), peristomal dermatitis, intertriginous dermatitis (intertrigo) and periwound maceration – represents a significant problem and can have a negative effect on patient wellbeing and quality of life (Fletcher et al et al, 2020).

It is important to note that development of MASD involves more than bodily fluids alone. MASD can involve multiple factors, including mechanical factors such as friction (Gray et al, 2011). Therefore, protecting the skin is key.

Interventions are advised to protect the skin and prevent MASD, including the use of skin protection products, such as barrier films, to create a protective layer on the skin surface that simultaneously maintains hydration levels while blocking external moisture and irritants (Gray et al, 2011; McNichol et al, 2018).

Emerging evidence now highlights the links between MASD and other skin conditions such as cutaneous infection and pressure ulcers (Jones et al, 2008; Beeckman et al, 2014). The importance of taking interventions to protect the skin, in order to improve outcomes and avoid costly complications in individuals with vulnerable skin, cannot be overstated.

WHAT IS MARSI?

MARSI is a prevalent but under-recognised and largely preventable complication (McNichol and Bianchi, 2016). MARSI can occur across all care settings, age groups and patient types; however, those with underlying illness, at extremes of age, with immunosuppression, skin changes and/or existing skin injuries, and undergoing treatments for other medical conditions are likely to be at elevated risk (McNichol et al, 2013).

Guidelines for preventing MARSI recommend the use of barrier films, to provide protection between the skin and adhesives, as well as providing protection against body fluids, wound exudate, urine, and faeces (McNichol et al, 2013; Fumarola et al, 2020). Sterile barrier films are particularly recommended for high-risk patients, and additionally can be used on injured skin.

MARSI not only affects the patient's skin integrity and causes pain, but increases risk of infection, and potentially increases wound size and delays healing (Moncrieff et al, 2013). Not taking practical steps to reduce the risk of MARSI, such as use of barrier film products, can potentially result in harm to the patient (Fumarola et al, 2020).

Using the LBF range in practice

Selection of an appropriate barrier film or barrier cream will depend on the nature of the problem. The LBF Sterile Barrier Film Range is indicated for the protection of intact and injured skin that is at risk or likely to be compromised by corrosive bodily fluids (including urine and faeces) or adhesives. The Barrier Cream is indicated for the protection of intact skin that is at risk or likely to be compromised by corrosive bodily fluids (including stoma output and excessive perspiration). The products:

- May be used on adults and children
- Should be applied to clean and dry skin
- Dry quickly and, once dried, will not affect any further adhesion of appliances.

LBF Sterile Barrier Film Foam Applicator – remove the foam applicator from the sachet and gently apply a uniform coating over the intended area. Sterile gloves should be worn to maintain sterility when using this product.

LBF Sterile Barrier Film Spray – hold the spray nozzle 10–15cm away from the skin and gently apply a uniform coating over the intended area in a sweeping motion.

LBF Sterile Barrier Film Wipes – remove the wipe from the sachet and gently wipe over the intended area. Sterile gloves should be worn to maintain sterility when using this product.

LBF Barrier Cream – apply a uniform coating over the intended area and allow the cream to dry before covering. Application can be repeated if required.

Summary of benefits of LBF in practice

- Only full sterile barrier film range available on the market in the UK
- Easy to apply
- May reduce the risk of cross-infection, i.e. individually packaged and single use applications (wipe/foam applicator and 2g sachet)
- Economical
- Safe.

Tips for assessment and prevention of skin damage (Wounds UK, 2018; Fletcher et al, 2020)

- ✔ Basic care strategies should focus on risk assessment and prevention of skin damage, using a structured care pathway, to maintain skin integrity
- ✔ Supported self-care should be encouraged wherever possible, with the individual encouraged to engage with their treatment and be educated about the importance of skin integrity and protection
- ✔ A detailed patient history should be documented, including patient and wound-related risk factors, skin condition history and skin texture and temperature
- ✔ If there is any change in condition or circumstances, the patient should be reassessed.

Evidence and cost benefits for LBF

A laboratory-based study found that silicone-based barrier products such as LBF were more effective at protecting the skin and lasted longer (up to 72 hours) than the other products tested (Issberner and Schuren, 2004). Clinical studies have also found that silicone-based films outperform zinc oxide preparations and have the advantage of being easier to apply (Neander and Hesse, 2003; Cameron et al, 2005).

Evidence in the literature firmly supports the continued and wider use of silicone non-sting barrier films, such as LBF, and highlights the cost savings, both through direct economic benefits and savings in nursing time (Voegeli, 2008).

For more information about LBF products and to order a free sample, visit: www.clinimed.co.uk

Product selection and suitability

As primary users of many products in the NHS, nurses are uniquely placed to judge whether products are fit for purpose. They can directly inform the procurement team of the exact specifications required for each product procured nationally and have detailed knowledge of:

- How products work and fit together
- Problems and solutions that arise with products in practice
- How these solutions can be built into procurement itself.

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