Please note: These studies may involve findings that exceed the claims currently cleared by the FDA for the product. Bravida Medical is not intending to make performance claims about its product. The intent is to disseminate the scientific literature on these products. We encourage you to read these studies to understand the strengths and limitations of the data. For some claims, Bravida is seeking to broaden theindications with the FDA in the future using data, such as these studies, to provide the substantiation.

ACCEPTABILITY AND USABILITY OF A TRI-ASSOCIATE FACTOR ANTIMICROBIAL WOUND CLEANSER AND GEL ACROSS ALL CARE SETTINGS

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Abstract

Aim:

Objective: Evaluate clinical acceptability, usability, safety, and performance of a 0.057% sodium hypochlorite antimicrobial cleanser/gel vs. current standard antimicrobial alternatives.

- **Scope**: Chronic and acute wounds of various etiologies across acute, outpatient, long-term, and home-care settings.

Method:

- **Design:** Prospective observational study (Feb–Nov 2025).
- **Population:** N = 50 patients.
- **Wound Types:** Venous leg ulcers, pressure injuries, diabetic foot ulcers, and other etiologies.
- **Intervention:**
  - Cleanser: Wound irrigation/soaking at every dressing change (3 cases also used for NPWT instillation).
  - Gel: Applied as primary dressing for pressure injuries, venous leg ulcers, and diabetic foot ulcers.
- **Assessment Tools:** Wound characteristics, MolecuLight imaging (bacterial fluorescence), odour/pain scales, debridement progress, and 5-point Likert satisfaction surveys.

Results / Discussion:

- **Baseline Status:** Majority of wounds presented with critical colonization/infection, moderate-to-strong malodour, and significant slough/necrotic tissue.
- **Clinician Satisfaction:** Consistently "excellent" mean scores for ease of use, lack of pain/stinging, bioburden reduction, and odour control.
- **Clinical Observations:**
  - Rapid reduction of devitalised tissue within the first week.
  - Marked decrease or elimination of malodour within the first week.
- **Adjunctive Therapy Outcomes:**
  - Gel Group: Complete healing achieved in all treated pressure injuries.
  - NPWT Instillation: Clear improvement in bacterial fluorescence confirmed by MolecuLight imaging.
- **Safety/Tolerability:** Formulation proved safe and well-tolerated across all care settings.

Conclusion:

- **Performance:** Demonstrated excellent acceptability and clinical performance across diverse wound types.
- **Key Benefits:** Rapid bioburden/odour control, minimal pain, effective debridement support, and compatibility with NPWT instillation.

Figures

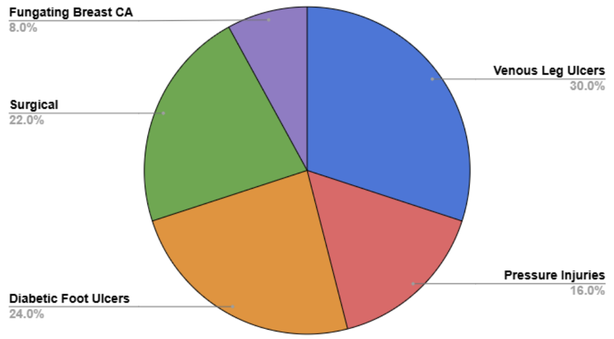

Figure 1. Wound Types Represented in Study Cohort
Distribution of wound etiologies treated in the study (N=50). The cohort represented a diverse range of acute and chronic wounds including diabetic foot ulcers, venous leg ulcers, pressure injuries, surgical wounds, and malignant fungating breast cancer wounds.

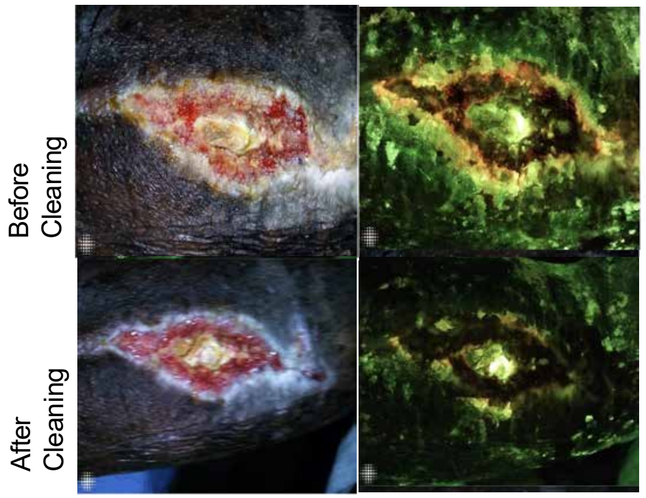

Figure 3. MolecuLight Imaging: Baseline vs. Post-Cleansing Bacterial Burden
Representative MolecuLight imaging from a study patient. Baseline image (left) displays elevated bacterial fluorescence indicative of critical colonization. Follow-up image (right) demonstrates substantial reduction in bacterial burden after treatment with the antimicrobial cleanser regimen.

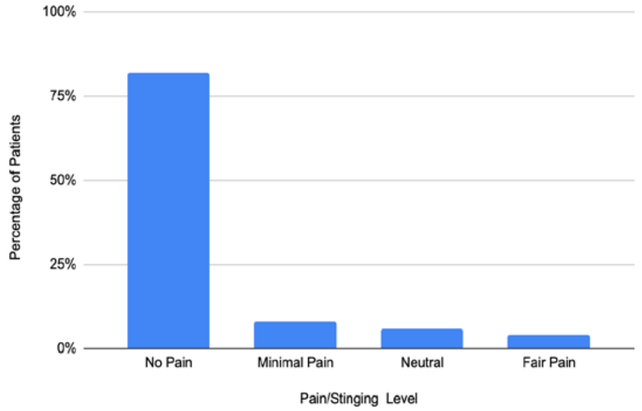

Figure 2. Patient Response To Product Use
Patient-reported tolerability of the 0.057% sodium hypochlorite cleanser (N=50). Responses demonstrated high tolerability, with most patients experiencing no pain or stinging during application. A minority of patients reported mild or fair sensations.

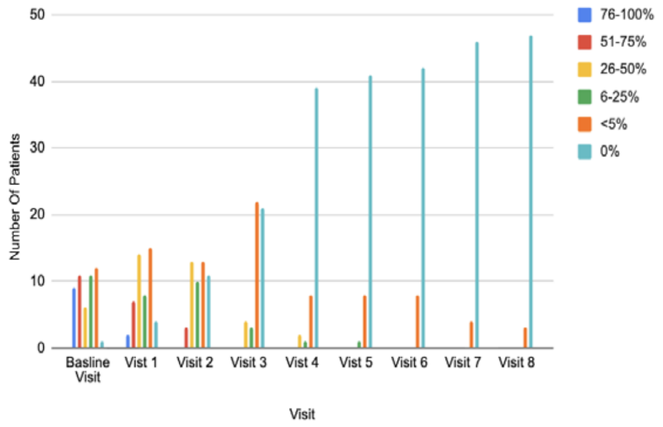

Figure 4. Necrotic Tissue Reduction Over Time
Distribution of patients by necrotic tissue interval across visits (N=50). At baseline, the majority of patients presented with >50% necrosis. By the final visit, patients in the 51–100% intervals decreased to zero, and the number of patients with minimal or resolved necrosis (<5%) increased progressively at each visit interval.

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Contact me!

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