### ADVANCIS ACTIVON

Manuka Honey
Barrier Cream



### **NHS & Clinician Requirements for Barrier Cream**

• Create an effective moisture barrier must remain in place after 1 'wash'



- Easy to apply using nitrile gloves
- Dries within 1 minute
- Leaves a non-tacky residue
- Effective moisturiser
- Leaves a residue that secondary dressings will adhere to
- Non flammable
- Does not stain clothing or bedding

ACTIVON
BARRIER CREAM

Manuka Honey Barrier Cream

Activon Manuka Honey Barrier Cream is an effective barrier against perspiration, urine and stool and wound exudate that lasts up to 24 hours.\*

The formula is designed to assist with the prevention of Moisture Associated Skin Damage (MASD), it contains Medical Grade Manuka Honey to reduce soreness and Cocoa Butter to aid with moisture retention.





### Formulation - What do the ingredients do?

- Base ingredient is Aqua. As with all emollients and barrier creams,
   it needs to be a liquid, the amount of water effects viscosity
- Manuka honey (25%). Anti inflammatory and therapeutic benefits
- **Glycerine**. Primary moisture barrier ingredient
- Cocoa butter, Castor Oil and Cetyl Alcohol. Moisturises and helps form a moisture barrier
- Sodium Stearoyl Lactylate, Glyceryl Stearate, Xanthan Gum.
   Emulsifying thickening and stabilising.
- Phenylethyl Alcohol & Ethylhexylglycerin. Preservatives



#### 25% Medical Grade Manuka Honey

- Barrier cream USP (almost)
- Anti-inflammatory properties
- Reduced odour
- Aids the healing process
- Antibacterial???



#### No highly flammable ingredients

- Many barrier creams contain paraffin or petrolatum
- This is dangerous around any naked flame (cooking, smoking etc)
- Incompatible with oxygen therapy
- Note: MHRA warning about fabric buildup



#### 99% Natural Ingredients

- Only preservatives are chemicals
- No parabens or phthalates
  - Potential risks to hormone production and fertility
- No added fragrances
  - Reduced risk of allergic reactions



#### **Easy to Apply**

- Even, smooth texture
- Pea to palm size ratio
- Spreads easily with naked hand or using nitrile gloves
- Easy to achieve an even distribution of a thin layer



#### **Dries quickly**

- Sub 1 minute drying time
- Leaves a visible 'shiny' barrier film on the skin surface
- Easy to clean off and quickly re-apply if neccessary



#### Creates a stable moisture barrier

 Survived wash test and immersion test with visible residue remaining



#### **Moisturises**

- Contains Cocoa Butter
- Skin hydration levels increased during testing



# Compatible with secondary dressings and Ostomy solutions

 Does not prevent adhesion of other products



## **Honey Barrier Creams Comparison**



- Contains Peanut Oil
- Not Manuka honey honey origin and type undisclosed
- Takes a long time to dry if at all
- Hard to attach secondary dressing or ostomy
- Small tubes
- Will Revamil survive the MDR transition?



- 30% Manuka honey
- Contains Coconut oil
- Less natural, contains silicone and Cetomacrogol
- Doesn't dry quickly
- Reportedly unpopular aroma
- 50g tubes and sachets only
- Uncertain future
- Availability issues



- 25% Manuka honey
- Dries in less than 1 minute
- 100g tubes for community use
- 99% natural
- New
- Zero availability issues
- MDR compliant

# **Incumbent Barrier Creams Comparison**



Natural with therapeutic benefits

Chemical based, no therapeutic benefits

- Contains Petrolatum (flammable)
- Contains
   Trimethylsiloxysilicate
   (silicone resin)
- Contains Paraffin (flammable)
- Contains Diisooctyl Adipate (plastinator)



 Contains Glycerine and Castor Oil (natural)

# Non-Sterile Barrier Cream Application Guide

Skin Condition	Risk Factors	Primary treatment Focus	Secondary Treatment Focus	Treatment Choice
NORMAL INTACT SKIN	Dry skin, elderly skin, oedema, feacal and or urinary incontinence, peristomal and periwound care	Preventing moisture	Protection from risk factors	Barrier Cream
ERYTHEMA OR MODERATE DERMATITIS WITH NO BROKEN SKIN	Dry skin, elderly skin, oedema, feacal and or urinary incontinence, peristomal and periwound care	Protection from further damage	Prevention (maintain moisture balance)	Barrier Cream
BROKEN, SEVERE DERMATITIS, EXCORIATED WEEPOING SKIN, PRESSURE ULCERS GRADE 2 & 3	Dry skin, elderly skin, oedema, feacal and or urinary incontinence, peristomal and periwound care	Protection from further damage	Prevention (maintain moisture balance)	Sterile Barrier Film, wipes or spray