

Reducing hospital acquired infections (HAIs) is now more critical than ever.

3M™ loban™ 2 Antimicrobial Incise Drape provides a powerful barrier to help reduce against microbial wound contamination.

To help guard against surgical site infections (SSIs), Ioban 2 Antimicrobial Incise Drape creates an optimised wound incision environment through continuous antimicrobial activity, immobilising bacteria and conformable adhesion that helps the drape stay in place throughout the surgical procedure.



Ioban 2 Antimicrobial Incise Drape provides continuous broad-spectrum antimicrobial activity to help reduce the risk of surgical site contamination.



Ioban 2 Antimicrobial Incise Drape immobilises and isolates residual bacteria on the skin, helping to prevent migration into the surgical incision area.



loban 2 Antimicrobial Incise Drape adheres and conforms to the operative site, allowing for limb manipulation during surgery.

A major source of surgical site infections is microorganisms on a patient's own skin.

Clinicians take great care to create a sterile field in order to prevent intraoperative contamination from skin bacteria. However, the surgical site is commonly left exposed. **Even with optimal skin preparation, total sterilisation of the skin is impossible.** You need more than a surgical prep to help prevent microbial regrowth or residual microbes from migrating into the wound or incision site.

Surgical site infections (SSIs)



A single SSI can cost 3.800€ to 31.231€ per patient.¹



SSI results in **length of stay**of 2.1 to 21 days¹ and SSI
patients are approximately
5X as likely to be readmitted.¹

Wound contamination



Nonhealing wounds, left untreated and unmanaged, can result in significant medical issues including infection.²



Stalled wounds may develop complications such as infection, resulting in higher costs and longer hospital stays.³

Yoshimura et al.

Rezapoor et al.

Casey et al.

Hesselvig et al.

40 years of strong clinical evidence.



Extensively researched and peer-reviewed

3M™ Ioban™ 2 Antimicrobial Incise Drape has been extensively researched and has more published peer-reviewed studies than any other antimicrobial incise drape competitor. (As of February 2023)



(As of February 2023)

Breadth of evidence

loban 2 Antimicrobial Incise Drape study publications have shown both clinical and economic results across a broad range of evidence ranging from poster presentations to randomised controlled clinical trials and global meta-analysis.



Strength of outcomes

loban 2 Antimicrobial Incise Drape is supported by evidence that met or exceeded the hypotheses across multiple endpoints including microbiological impacts that were associated with infection risk reduction outcomes as well as economic success when used as part of a comprehensive perioperative solution.^{4,5,6,7}



Yoshimura et al.

Rezapoor et al.

Casey et al.

Hesselvig et al.

Comparison of efficacy and cost of iodine impregnated drape vs. standard drape in cardiac surgery: Study in 5,100 patients.

Bejko J, Tarzia V, Carrozzini M, et al. Comparison of Efficacy and Cost of Iodine Impregnated Drape vs. Standard Drape in Cardiac Surgery: Study in 5100 Patients. J Cardiovasc Transl Res. 2015;8(7):431–437.

Study design

Retrospective study considered prospectively collected data from 5,100 cardiac surgery patients between January 2008 and March 2015.

Study purpose

- To evaluate the impact of the use of 2 incise drapes (iodine-impregnated and non-iodine-impregnated) on incidence of surgical site infection in cardiac surgery
- A detailed cost analysis was also completed

Methods

Using a propensity-matched analysis, 808 patients from each group were matched for available risk factors.

Result

Surgical Site Infection (SSI) rate reduction



71% SSI reduction

1.9% SSI rate (15/808) for patients receiving 3M[™] Ioban[™] 2 Antimicrobial Incise Drape vs. 6.5% (53/808) for the non-iodine-impregnated incise drape (*p*=0.001).*

Cost reduction

€773,495

The reason for this difference is the cost related to the treatment of the complications, such as negative pressure wound therapy, hospitalisation days, sternal wound revision, antibiotic therapy and antiseptics.

Key points

Summary

Ioban 2 Antimicrobial Incise Drape is a cost-effective intervention associated with a significantly lower incidence of SSI.

^{*}Percentage calculation(s) is/are derived based on relative patient group incident rate reported in this study.

Yoshimura et al.

Rezapoor et al.

Casey et al.

Hesselvig et al.

Plastic iodophor drape during liver surgery operative use of the iodophor-impregnated adhesive drape to prevent wound infection during high risk surgery.

Yoshimura Y, Kubo S, Hirohashi K, et al. Plastic iodophor drape during liver surgery operative use of the iodophor-impregnated adhesive drape to prevent wound infection during high risk surgery. World J Surg. 2003, 27:685–8.

Study design

Retrospective study of 296 patients undergoing liver resection for hepatocellular carcinoma (HCC).

Study purpose

To assess risk factors for wound infection after liver resection for HCC, with special attention to plastic adhesive drapes impregnated with iodophor.

Result

Wound infection rate reduction



74% wound infection reduction

Wound infections developed in 21 of 174 patients (12.1%) without the drapes and in 4 of 122 patients with the drapes (3.1%) (p=0.0096).

- Multivariate regression analysis showed that a low body mass index (BMI), smoking and nonuse of the iodophor drapes were independent risk factors for wound infections
- Separation of the iodophor drape from the skin did not occur in any of the patients during the operation
- ► None of the patients showed evidence of an allergic reaction to iodophor
- Most wound infections were caused by skin organisms, including Staphylococcus aureus and Staphylococcus epidermidis

Methods

- ▶ Retrospective regression analysis to assess risk factors for wound infection after liver resection surgery
- ▶ The presence or absence of wound infection was recorded up to 30 days after operation
- Variables examined included age, gender, BMI, alcohol abuse, smoking, systemic steroid use, DM, liver cirrhosis, laboratory test results, duration of preoperative hospital stay, preoperative transcatheter arterial embolisation, preoperative portal vein embolisation, type of skin incision, type of liver resection, operating time, intraoperative blood loss, autologous blood transfusion and use of the plastic iodophor drape

Key points

Summary

Plastic adhesive drapes impregnated with iodophor appear to be useful for decreasing intraoperative contamination with skin bacteria, which may decrease the rate of wound infection, although a prospective study is necessary to obtain any definitive conclusions.

Yoshimura et al.

Rezapoor et al.

Casey et al.

Hesselvig et al.

Incise draping reduces the rate of contamination of the surgical site during hip surgery: A prospective, randomised trial.

Rezapoor M, Tan TL, Maltenfort MG, et al. Incise Draping Reduces the Rate of Contamination of the Surgical Site During Hip Surgery: A Prospective, Randomised Trial. J Arthroplasty. 2018;33(6):1891–1895.

Study design

Prospective, randomised clinical trial, studying 101 patients undergoing open joint preservation procedure of the hip.

Study purpose

To evaluate the efficacy of iodophor-impregnated adhesive drapes for reducing bacterial count at the incision site.

Result

Bacterial contamination risk reduction



55% reduction of risk of bacterial colonisation of incision site 12% of incisions with iodophor-impregnated adhesive drape and 27% without adhesive drapes were positive for bacterial colonisation at closure of surgery (OR=2.38; 95% CI, 1.05-5.26; p=0.031).*

- Patients without an iodophor-impregnated drape were more likely to demonstrate a positive culture (adjusted OR 2.38; 95% CI, 1.053-5.263; p=0.031)*
- Patients without adhesive drapes were significantly more likely to have bacteria present at the time of skin closure and at all time points when swab cultures were taken
- Patients with no drape have increased odds (adjusted OR 5.89; 95% CI, 1.19–33.33; p=0.030) of bacterial contamination compared to those with drapes that demonstrated no lift off, whereas odds (adjusted OR 2.94; 95% CI, 0.24–33.33; p=0.397) seem to be reduced for patients with drape lift*

Methods

- Patients without adhesive drapes were significantly more likely to have bacteria present at the time of skin closure and at all time points when swab cultures were taken
- ▶ Half the patients had the adhesive drape applied to the skin prior to incision, while the remainder underwent the same surgery without a drape
- Culture swabs were taken from the surgical site at 5 points (pre-skin preparation, after skin preparation, post-incision, before subcutaneous closure, prior to dressing application) and sent for culture and colony counts
- Mixed-effects logistic regressions were used to estimate effects of time and drape application on contamination rate

Key points

Summary

- Iodophor-impregnated adhesive draping significantly reduces bacterial colonisation of the incision, specifically hip surgery
- Bacterial count at the skin was extremely high in some patients in whom adhesive drapes were not used, raising the possibility that a subsequent surgical site infection or peri-prosthetic joint infection could arise had an implant been utilised
- This study found that baseline bacterial colonisation predisposes the patient to an increased likelihood of colonisation at later time periods. However, the use of iodophor-impregnated drapes appears to mitigate this risk of colonisation. Furthermore, this study found that operative time was independently associated with culture positivity

References | Learn more

^{*}Percentage calculation(s) is/are derived based on relative patient group incident rate reported in this study.

Antimicrobial activity and skin permeation of iodine present in an iodine-impregnated surgical incise drape.

Casey AL, Karpanen TJ, Nightingale P, et al. Antimicrobial activity and skin permeation of iodine present in an iodine-impregnated surgical incise drape. J Antimicrob Chemother. 2015, 70:2255-60.

Study design

Ex vivo study on full-thickness human skin from 20 patients.

Study purpose

- To evaluate the antimicrobial efficacy of 3M™ loban™ 2 Antimicrobial Incise Drape against MRSA in a human skin model
- To assess the presence of iodine from loban 2 Antimicrobial Incise Drape in the deeper skin

Result

Antimicrobial activity

lodine concentration in skin layers

Skin prep 300µm 3M[™] loban[™] 2 Antimicrobial Incise Drape 1000µm 1×10 3 EMRSA-15 and incubation for 18h: Application of the iodine-impregnated drape resulted in the recovery of significantly fewer cfu compared with the non-use of a drape (p=0.014).

- ▶ 1×10^6 EMRSA-15 and incubation for 18h: No significant difference in the number of cfu recovered when an iodine-impregnated or non-antimicrobial-impregnated drape was used or when no drape was used (*p*=0.935)
- ► 1×10^6 EMRSA-15 and incubation for 5m: Cfu counts were significantly lower for the iodine-impregnated drape than for the non-antimicrobial drape (p=0.001) and nonuse of a drape (p=0.002) skin permeation
- lodine concentration in skin layers up to 1000 μm are above MIC and MBC values

Key points

Summary

lodine-impregnated adhesive incise drapes show antimicrobial activity on the skin surface as well as in deeper skin layers and may help to suppress microbial re-colonisation around the surgical site. The use of iodine-impregnated incise drapes is preferable over the use of a standard incise drape or nonuse of a drape.

Methods

- Donor skin was inoculated with either 1×10^3 or 1×10^6 cfu MRSA/cm^2 skin and mounted on Franz diffusion cells
- Skin was incubated at room temperature for 5 minutes or 18 hours
- ► The antimicrobial activity was assessed at 5 minutes, 2 hours and 6 hours after drape application, no additional skin antiseptic protocol done
- Permeation of iodine into the skin was determined by assessing iodine concentration in different skin layers by mass spectroscopy (ICP-MS) following application of the incise drape for 6 hours

Yoshimura et all.

Rezapoor et al.

Casey et al.

Hesselvig et al.

Does an antimicrobial incision drape prevent intraoperative contamination? A randomised controlled trial of 1,187 patients.

Hesselvig AB, Arpi M, Madsen F, Bjarnsholt T, et al; ICON Study Group. Does an Antimicrobial Incision Drape Prevent Intraoperative Contamination? A Randomised Controlled Trial of 1187 Patients. Clin Orthop Relat Res. 2020;478(5):1007–1015.

Study design

Prospective, multicenter, randomised clinical trial, of 1,187 patients undergoing primary knee arthroplasty between March 1, 2016 and April 13, 2018.

Study purpose

- ► To evaluate the effectiveness of antimicrobial surgical drapes reducing the risk of intraoperative microbial contamination in patients undergoing primary knee arthroplasty
- To determine if other factors, such as sex, season, age and type of arthroplasty are associated with an increased risk of contamination
- ► To determine if antimicrobial drape lift increases risk of contamination
- A detailed cost analysis was also completed

Result

Bacterial contamination risk reduction



33% reduction of risk of bacterial colonisation of incision site*

10% contamination detected when iodinated drapes were used vs. 15% when they were not used (OR 0.61; 95% CI, 0.43–0.87, p=0.005).*

Drape lift

Antimicrobial drape lift of more than 10mm separation from the skin had higher odds of contamination (OR 3.54; 95% CI, 1.64–11.05; p=0.0013).*

*Percentage calculation(s) is/are derived based on relative patient group incident rate reported in this study.

Key points

Summary

- The use of antimicrobial drape resulted in lower contamination risk than operating without an antimicrobial drape
- Procedures in females (OR=0.55; 95% CI, 0.39–0.80; p=0.002) and those performed in the central region were less likely to show contamination (OR=0.45; 95% CI, 0.25–0.78; p=0.006). No other factors were associated with the risk of contamination*

Methods

- Participants were patients older than 18 years undergoing primary knee arthroplasty
- > Patients were randomly assigned to operation with an antimicrobial drape (intervention group) or operation without (control group)

References | Learn more

A growing number of international guidelines recommend the use of antimicrobial drapes over non-antimicrobial drapes.

Guidelines are shifting to distinguish between the benefits of antimicrobial and non-antimicrobial incise drapes.

Organisation	Key guidance/recommendations
KRINKO (2018) ⁸	 Increase of surgical site infection due to the non-antiseptically impregnated incision drape is reversed with using an antimicrobial incise drape
ADCIC (0010)9	When using adhesive drapes, do not use non-iodophor-impregnated drapes for surgery as they may increase the risk of surgical site infection
APSIC (2019) ⁹	▶ In Orthopaedic and cardiac surgical procedures where adhesive drapes are used, consider using an iodophor-impregnated incise drape, unless the patient has an iodine allergy or other contraindication
NICE (2019) ¹⁰	▶ Do not use non-iodophor-impregnated incise drapes routinely for surgery, as they may increase the risk of surgical site infection
	▶ If an incise drape is required, use an iodophor-impregnated drape unless the patient has an iodine allergy
AORN (2023) ¹¹	Do not use adhesive incise drapes without antimicrobial properties. Iodophor-impregnated adhesive incise drapes may be used in accordance with the manufacturer's IFU, unless contraindicated by a patient's allergy to iodine
Organisation	Consensus statement for incise drapes
ICM (2018) ¹²	► Evidence indicates antimicrobial-impregnated incise drapes result in reduction in bacterial colonisation of the surgical site. "While bacterial colonisation of the incision may predispose to subsequent SSIs/PJIs, there is no literature to demonstrate that the use of incise drapes results in clinical differences in the rates of subsequent PJIs. Many surgeons prefer to utilise draping for physical isolation of sterile from nonsterile regions and to prevent migration of drapes during the procedure."

Throughout the surgical journey, 3M is here to help.

3M offers science-based solutions, developed for surgical needs, to help protect patients and staff while helping to deliver optimal outcomes. **Every patient, every time.**



- Nasal decolonisation
- Preoperative patient warming
- Hair removal



- Sterilisation assurance
- Vascular access
- ► Temperature monitoring
- Surgical hand hygiene
- Surgical skin antisepsis
- Antimicrobial incise draping
- Intraoperative patient warming



- Negative pressure wound therapy with and without instillation
- Postoperative incision management
- Closed-incision negative pressure therapy
- Postoperative patient warming

Clinical impact

Clinical evidence

Global guidelines

SSI bundle

Selection guide

Orthopaedic

Obstetrics/gynaecology

General

Vascular/cardiovascular/thoracic

Neurologic/spinal

A broad portfolio of antimicrobial incise drapes for your surgical protocol.



- Designed with continuous broad-spectrum antimicrobial activity in the drape adhesive where iodine can't be washed away
- Clinically proven to help reduce the risk of contamination and immobilise bacteria on the skin^{13,14}

3M™ Ioban™ 2 Antimicrobial Incise Drape with Easy Delivery (EZE)



- Polyethylene liner comes off with no tearing, allowing for easy drape application
- Drape and liner feature a full-width handle for control of liner release and drape application

Obstetrics/gynaecology

General

Vascular/cardiovascular/thoracic

Neurologic/spinal

Orthopaedic surgical procedures

Use this chart to see which $3M^{\text{\tiny M}}$ loban $^{\text{\tiny M}}$ 2 Antimicrobial Incise Drape may be appropriate for your surgical application based on product features and dimensions.

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6651EZE	3M™ Ioban™ 2 Antimicrobial Incise Drape EZE	60cm x 85cm	10	4														
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Specialty incise drape for your application.

Secondary option.

Obstetrics/gynaecology

General

Vascular/cardiovascular/thoracic

Neurologic/spinal

Selection guide

Obstetrics/gynaecology surgical procedures

Use this chart to see which 3M™ loban™ 2 Antimicrobial Incise Drape may be appropriate for your surgical application based on product features and dimensions.

3M code	Product	Adhesive area	Items/box	Boxes/case	p o	င်
6650EU	3M™ Ioban™ 2 Antimicrobial Incise Drape	56cm x 45cm	10	4		
6650EZE	3M™ Ioban™ 2 Antimicrobial Incise Drape EZE	60cm x 45cm	10	4		
6648EU	3M [™] Ioban [™] 2 Antimicrobial Incise Drape	56cm x 60cm	10	4		
6648EZE	3M [™] Ioban [™] 2 Antimicrobial Incise Drape EZE	60cm x 60cm	10	4		
6657	3M [™] Steri-Drape [™] Pouch with Ioban [™] 2 Incise Film	Overall size: 89cm x 76cm Incise area: 30cm x 30cm	10	4		
6658	3M™ Steri-Drape™ Pouch with Ioban™ 2 Incise Film	Overall size: 76cm x 76cm Incise area: 33cm x 43cm	5	4		
6659	3M™ Steri-Drape™ Pouch with Ioban™ 2 Incise Film	Overall size: 74cm x 87cm Incise area: 43cm x 52cm	5	4		

Specialty incise drape for your application.

Secondary option.

Obstetrics/gynaecology

Vascular/cardiovascular/thoracic

Neurologic/spinal

General surgical procedures

Use this chart to see which 3M™ loban™ 2 Antimicrobial Incise Drape may be appropriate for your surgical application based on product features and dimensions.								en colon resection	Open hernia repair	Laparotomy	Liver transplant	Kidney transplant
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Specialty incise drape for your application.

Secondary option.

References | Learn more

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Orthopaedic Obstetrics/gynaecology Vascular/cardiovascular/thoracic Neurologic/spinal General

Vascular/cardiovascular/thoracic surgical procedures

surgical procedures						aortic		bypass	bypass)	ectomy		bypass		ŧ	
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References | Learn more

Selection guide

Specialty incise drape for your application.

Secondary option.

If not using the 3M™ Steri-Drape™ Cardiovascular Sheet with 3M™ loban™ 2 Antimicrobial Incise Film 6681, you could use the 3M™ Steri-Drape™ Cardiovascular Sheet with 3M™ loban™ 2 Antimicrobial Incise Film 6677 in combination with either the large 3M™ loban™ 2 Antimicrobial Incise Drape 6648/6648EZE or extra-large 3M™ loban™ 2 Antimicrobial Incise Drape 6651/6651EZE.

Obstetrics/gynaecology

General

Vascular/cardiovascular/thoracic

Neurologic/spinal

Neurologic/spinal surgical procedures

Use this chart to see which 3M™ loban™ 2 Antimicrobial Incise Drape may be appropriate for your surgical application based on product features and dimensions.

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	3M code	Product	Adhesive area	Items/box	Boxes/case	Crani	VPs	Spir	H o H	(inte
	6640EU	3M™ Ioban™ 2 Antimicrobial Incise Drape	34cm x 35cm	10	4					
	6640EZE	3M™ Ioban™ 2 Antimicrobial Incise Drape EZE	35cm x 35cm	10	4					
- B- B	6617	Isolation Drape with 3M™ Ioban™ 2 Antimicrobial Incise Film and Pouch	Overall size: 320cm x 213cm Adhesive size: 50cm x 24cm	5	4					
	6619	Large Isolation Drape with 3M™ Ioban™ 2 Antimicrobial Incise Film and Pouch	Overall size: 378cm x 254cm Adhesive size: 70cm x 32cm	5	1					

Specialty incise drape for your application.

Secondary option.

References | Learn more

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For more information about how 3M[™] loban[™] 2 Antimicrobial Incise Drapes can help you fight SSIs, contact your 3M account representative or visit **3M.co.uk/loban**

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Specific indications, contraindications, warnings, precautions and safety information exist for these products and therapies. Please consult a clinician and product instructions for use prior to application.



