

Case study

Preventing IAD and enhancing care efficiency

The impact of Swash® Perineum Gloves in four Belgian hospitals



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Providing care for incontinence is labor-intensive and presents various challenges, including managing issues like IAD and pressure ulcers. The estimated prevalence of IAD in Belgian hospitals ranges from 5% to 50%.¹

In his job as regional Sales and project Manager for Deforce Medical, part of the Asker Group, Ian Hollevoet has been working with the healthcare sector for over 10 years. He is familiar with the challenges hospitals are facing when it comes to IAD management.

Swash® Perineum impregnated gloves and wipes simultaneously clean, care for and protect the skin in a single step. The lotion impregnated in the cloths contains all the necessary ingredients for performing the three steps of traditional care. After learning more about the product, Ian was convinced that it could benefit many hospitals in Belgium. Being a trained nurse, Ian knew that many hospitals still relied on traditional, time-consuming incontinence care methods that failed to prevent a major issue: Incontinence-Associated Dermatitis.

Problem

In the geriatric ward, incontinence is a common condition. Patients affected by incontinence are more prone to develop Incontinence-Associated Dermatitis (IAD), a skin condition caused by the contact of the fragile skin with urine and faeces.

Incontinent patients can develop red skin within three minutes from a faecal incontinence episode. Providing incontinence care to a patient with reduced mobility is time-consuming, making it challenging for nurses to attend to another patient within three minutes after an incontinence episode.

The development of IAD significantly impacts a patient's quality of life. IAD wounds cause pain and pose a high risk of infection. Hospitals invest significant time in managing patients with IAD. However, there are products available that can help prevent IAD. Unfortunately, oftentimes hospitals lack the time and resources required to measure the prevalence of IAD and its impact on patients and hospital resources.

Ian identified **three major obstacles in implementing** new and more efficient methods for incontinence care in hospitals:

Four Belgian hospitals:

Jan Yperman Hospital

- Beds: **532**
- Employees: **1,300**
- Admissions: **16,217**
- Day admissions: **26,215**

AZ Jan Palfijn Ghent

- Beds: **519**
- Employees: **1,100**
- Admissions: **13,299**
- Day admissions: **16,352**



O.L.V. van Lourdes Hospital Waregem

- Beds: **266**
- Employees: **768**
- Admissions: **11,436**
- Day admissions: **16,268**



Sint Jozefskliniek

- Beds: **270**
- Employees: **625**
- Admissions: **24,000**



1. a lack of extensive knowledge in differentiating between IAD and pressure ulcers;
2. hospital protocols focus on treatment and overlook the impact of prevention;
3. implementing a new way of working requires time, energy and commitment from the nurses.

Solution

The efficacy of the 3-in-1 Incontinence care method has proven in various independent clinical studies, therefore the testing of **Swash® Perineum Gloves** was a comparative study of different methods and not an experimental activity.²

The duration of the study conducted by Ian together with the four hospitals was around 4 months. The actual testing and monitoring of the products was done during 3 to 6 weeks, varying from a hospital to another.



Step 1

With over 10 years of experience of working with the health-care sector, Ian knew that the IAD topic is not sufficiently explored and analyzed during nursing education. Therefore, when he got the green light from hospitals to test **Swash® Perineum**, the first action he took was to organize knowledge-sharing sessions with the nurses on the topic of IAD. During those sessions, he discovered that some nurses struggled to understand the difference between Incontinence-Associated Dermatitis and pressure ulcers (Decubitus).

Step 2

Setting up the study:

- a control group of patients continued to receive the traditional way of incontinence care.
- an experimental group, where the new 3-in-1 incontinence care method was used - **Swash® Perineum Gloves**.

Nurses were guided on how to measure and collect the data. In the first day of a patient admission, they would fill out a form where they'd record if the patient had already an IAD or not. For the experimental group, if the patient was incontinent, nurses would use Swash® Perineum Gloves preventively, from day one of admission.

Step 3

In the final step, Ian and the Swash® team analyzed the data received from the hospital and created an individualized report for each of the participating hospitals on IAD incidence and prevention. In-between these steps, Ian visited the wards regularly to ensure that the product is available and that nurses in the experimental group could address all the questions and concerns they had.

Results

The results obtained indicate that the use of Swash® Perineum Gloves for incontinence care reduces the prevalence of IAD by 43

percentage points, compared to conventional hygiene methods.

Moreover, the IAD resolution of the patients who received incontinence care with Swash® Perineum Gloves was 25 percentage points higher than for the patients who received traditional incontinence care. Therefore Swash® Perineum Gloves are an effective prevention and IAD resolution method.

Besides the proven efficacy of the Swash® Perineum, hospitals noticed an improved adherence to the protocol of incontinence care. Therefore, within the first 2 months after conducting this study, two hospitals implemented Swash® Perineum Gloves in their protocols, as a standard method for incontinence care and IAD prevention. When this case study was written, the two other hospitals in the study were in the transitioning phase to Incontinence care with **Swash® Perineum Gloves**.

Additional benefits

The hospitals that participated in the testing of the new method for incontinence care and IAD prevention experience some additional benefits:


- hospitals gaining a more accurate understanding of the IAD problem, supported by data.
- nurses and hospital management could recognize the benefits of investing time in preventive measures.
- protocols have been adjusted to incorporate preventive actions for patients at risk of developing IAD.
- standardization of the incontinence care. Instead of using numerous expensive barrier creams, nurses now use a single patient-specific product uniformly.

Interested in testing Swash® Incontinence care products in your unit?


send us an email at: info@arion-group.com

Study results

Swash® Perineum (Experimental group)

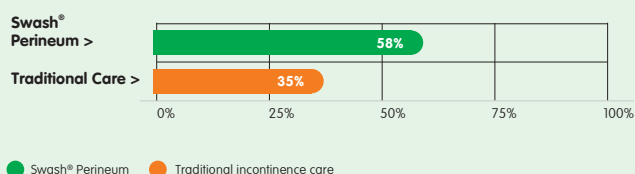
Sample: 86 patients 

Traditional Care (Control group)

Sample: 42 patients 

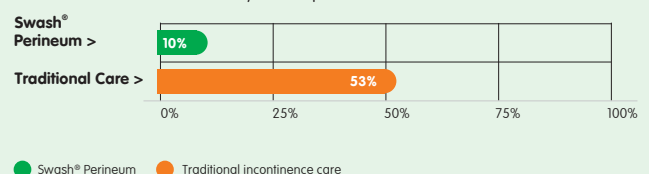
IAD RESOLUTION

IAD resolution refers to the case of IAD that have been resolved during the hospitalization.



IAD PREVENTION

IAD prevention refers to the percentage of patients who developed IAD during hospitalization compared to the total number of patients with IAD (both on admission and newly developed).



1. Best practice recommendations: Prevention and management of Moisture-associated skin damage (MASD) Anna Boyles, David Voegeli, Dimitri Beekman, Jacqui Fletcher, Jan Kottner, Laurie McNichol, Madeleine Stenius, Nikki Sarkar, Sian Fumarola, Zena Moore.
 2. Beekman D, Verhaeghe S, Defloor T, Schoonhoven L, Vanderwee K. A 3-in-1 perineal care washcloth impregnated with dimethicone 3% versus water and pH neutral soap to prevent and treat incontinence-associated dermatitis: a randomized, controlled clinical trial. J Wound Ostomy Continence Nurs. 2011 Nov-Dec;38(6):627-34. doi: 10.1097/WON.0b013e31822efe52. PMID: 21952346.