As a team, we CAN address one more risk factor for SSI

By choosing the only available antibacterial suture

**Can’t control**

- Obesity
- Smoking
- Diabetes
- Reimbursement
- Type of procedure
- Open/lap surgery
- Patient’s age

**Can control**

- Bacterial colonization of the suture

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Our team’s choice is Plus Sutures

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**Sutures Plus**

Antibacterial Suture with IRGACARE® MP (triclosan)

One step closer to greater control of SSI risk factors at your hospital

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* Coated VICRYL® Plus Antibacterial (polyglactin 910) Suture; MONOCRYL® Plus Antibacterial (polyglactin 910) Suture; and PDS® Plus Antibacterial (polydioxanone) Suture are active in vitro against Staphylococcus aureus, methicillin-resistant S. aureus (MRSA), Staphylococcus epidermidis, and methicillin-resistant S. epidermidis (MRSE). MONOCRYL Plus Suture and PDS Plus Suture have also demonstrated activity against Pseudomonas aeruginosa and Escherichia coli in vitro.
There are many risk factors that can lead to SSI

As a team, you are committed to protecting your patients and reducing SSI-related costs

By using Plus Antibacterial Sutures, your team CAN address one more risk factor for SSI

Plus Antibacterial Sutures

- Proven in vitro to inhibit bacterial colonization of the suture for 7 days or more
  
- Reduces the risk of biofilm formation on the suture

- Effective against the most common organisms associated with SSIs

- Prospectively planned meta-analyses of randomized clinical trials were performed on the use of suture containing triclosan to lower surgical site infection rates

References


* The petri dish image is for illustrative purposes only. zone of inhibition testing results can vary.