


Strataderm gel for professional scar therapy

Strataderm®
scar therapy gel

A close-up photograph of a woman's face, focusing on her eyes and the right side of her face. A white, semi-transparent gel patch is applied to her cheek, partially covering her eye. The patch has a white, wavy, scribbled pattern on it. The background is a solid orange color.

Scars - more than
just a cosmetic problem

Scars – a common and undermanaged problem

Scars can have both – a physical and psychological impact on sufferers. Scars may cause **physical problems** like severe itching, tenderness or pain. A wound that crosses a joint or a skin crease may also lead to a scar contracture. Similarly with scars that continue to grow (hypertrophic scars and keloids), they can limit movement and can even be functionally disabling.

The **physical appearance** of some scars may also be more obvious as they can continue to be red and raised. Some problematic or abnormal scars may continue to grow past the wound boundaries or may take many years to soften and fade.



At times the **psychological aspects** can outweigh the physical ones for even the smallest of scars. For some people a scar is a constant reminder of the traumatic event that caused it. This can result in distress, poor self-esteem and difficulties in social

situations, all leading to a diminished quality of life.¹

People with scars may feel different and stigmatized and the reaction of others can be hurtful, particularly at impressionable ages. For children and teenagers, scarring can have a major psychological impact. At these ages, there is a need to feel normal or attractive and anything out of the norm can single out the individual. To be different because of scarring may lead to loss of self-confidence and feelings of inferiority.²

Scar treatment and prevention

To date, scars cannot be removed completely. But with effective treatment and good management, the appearance and side effects of a scar can be improved significantly in most cases. In addition, the likelihood of developing abnormal scars can be reduced effectively if treatment **starts shortly after wound closure**.³

Any scar can be perceived as a personal problem. Some may learn to accept their scar, but many never forget it. It is widely accepted by psychologists that proactively treating to reduce the visibility of a scar can actually help boost self-esteem.

What is a scar?

Scars almost always result from trauma of some kind (surgery, accident, disease) and are a natural part of the healing process. The more and the deeper the skin is damaged, the longer and more complicated the rebuilding process – and the greater chance that the patient will be left with a noticeable scar.

A **normal scar** usually develops during the first 48 hours after wound closure and can fade between 3 and 12 months with an average time of 7 months.⁴ Various factors can interfere with the wound-healing process and alter it in some way to cause an “overhealing” or continuation of the scarring process. As a result, an **abnormal scar** develops, which may have the following effects:

- Grow bigger
- Remain red/dark and raised without fading
- Cause discomfort, itching or pain
- Restrict the movement of a joint
- Cause distress because of its appearance

Common types of abnormal scars³



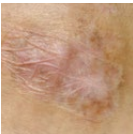
Widespread stretched scars

Appear when the fine lines of surgical scars gradually become stretched and widened. Typically flat, pale, soft and symptomless scars. No elevation, thickening or nodularity which distinguishes them from hypertrophic scars.



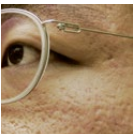
Linear hypertrophic scars

Red, raised and sometimes itchy. Confined to the border of the original surgery or trauma. Mature to have an elevated, slightly rope-like appearance with increased width. Full maturation can take up to two years.



Widespread hypertrophic scars

Common after a burn. Widespread red, raised and sometimes itchy scars that remain within the borders of the original burn. Can develop contractures if they cross joints or skin creases at right angles.



Atrophic scars

Flat and depressed below the surrounding skin. Generally small and often round with an indented or inverted center. Commonly arise after acne or chickenpox.



Keloid scars

Focally raised, itchy scars that extend over normal tissue. May develop up to several years after injury and do not regress without treatment. Surgical excision is often followed by recurrence.

Treatment options for scars

A wide range of options is available for the treatment of abnormal scars. Though the selection of the most appropriate treatment can only be made after a thorough assessment of the scar and the effects that it is having on the patient. Concerned patients should consult their physician when considering more radical therapy options.

Invasive options include surgery, injected steroids, cryotherapy, laser therapy and dermal abrasion, which all can be very painful.

Noninvasive options include compression therapy, topical steroids and a large number of different creams and lotions. But the evidence base for many of these treatments is poor, and some may only have a placebo benefit.¹

The primary role of silicone gel³

With silicone gel, there's an easy, safe and convenient way to improve abnormal scars without the need for going through painful invasive procedures.

Silicone gel therapy has a primary role in scar management and has been **proven to be safe and effective** for many years. It was first used in the form of silicone gel sheets to apply uniform pressure to scars in combination with compression bandages.

Silicone gel is the only noninvasive option for which evidence-based recommendations have been made for both **scar treatment and the prevention of abnormal scars** by leading specialists worldwide and is **recommended as first-line therapy** for a wide range of scars.



Before treatment



After 2 months treatment

Linear hypertrophic scar after surgery (nevis extraction)

Location: chest, 25 mm length
Age of scars before treatment: 14 months

Left scar remained untreated



Before treatment



After 3 months treatment

Linear hypertrophic scar after trauma

Location: head, 45 mm length
Age of scar before treatment: 2 weeks

Strataderm – the next-generation scar therapy gel

The new formulations of silicone gel applied from a tube (like **Strataderm**) are **applied in a thin layer to the affected skin** to form a self-drying, transparent, flexible and gas-permeable silicone gel sheet that adheres to the skin. This ensures a constant contact time to the entire surface of the scar allowing it to work 24 hours a day.



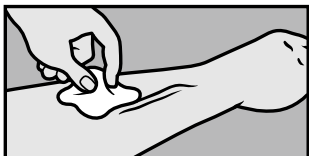
Recent clinical trials have shown that self-drying silicone gel applied from a tube has **the same efficacy and the same excellent results** in scar treatment and the prevention of abnormal scar formation as traditional silicone gel sheeting. At the same time its usage is much easier and it does not have the same limitations in its application.⁶

Strataderm delivers silicone gel technology in a rapidly drying, non sticky and odorless formulation. It is ideal for any irregular skin/scar surfaces, the face, moving parts (joints and flexures) and any size of scar. It can be used **on new and old scars**.

Strataderm does not lead to secondary side effects such as maceration, rashes, pruritus and infection and is therefore **suitable for people with sensitive skin and for children**.

Strataderm is not only considered as first-line therapy for scars but it is also recommended for **use in conjunction with other therapy options**, such as steroid injections and pressure garments to increase overall efficacy (results).

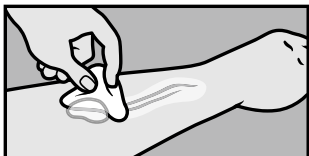
How to use Strataderm



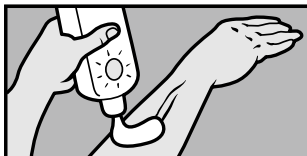
1 Ensure that the scar is clean and dry.



2 Apply a very thin layer of Strataderm to the scar and allow to dry. When applied correctly, Strataderm should be dry in 3-4 minutes.



3 If it takes longer to dry you have probably applied too much. Gently remove the excess with a tissue and allow the drying process to continue.



4 Once dry, Strataderm can be covered by sunscreen, cosmetics, pressure garments or casts.

Strataderm **should be applied once daily**, or twice daily to exposed areas. For best results Strataderm should be maintained in continuous contact with the skin (24 hours a day).

Strataderm is recommended as **minimum treatment of 60-90 days** (24 hours a day/7 days a week). Larger and older scars may take longer. **Continued use is recommended until no further improvement is seen.**

How thin to apply?

Strataderm does not soak into the skin, rather it dries to form a very thin layer that is less than the thickness of this piece of paper or as if you stretch a piece of household clingfilm over your skin.

How much Strataderm do I need?

Strataderm gel tube size	Scar size, which can be treated with one tube for over 90 days
5g (0.17oz)	linear scar, 2-3 cm (1-2 inch) length
10g (0.35oz)	linear scar, 5-7 cm (2-3 inch) length
20g (0.7oz)	linear scar, 10-14 cm (4-5 inch) length
50g (1.75oz)	widespread scar, 6×12 cm, (2.5×5 inch) area

Abnormal-scar prevention and additional scar care

How to avoid abnormal scars

It is important to remember that a wound does not become a scar **until the skin has completely healed**. Until that point a clean, warm, moist environment should be maintained and movement should be restricted in order not to place tension on the wound or surgery. **Consultation should be sought from your health professional** should you have any concerns.

Abnormal scarring occurs more often in **higher-risk groups** which include people with darkly pigmented or very fair skin, those who have previously suffered from abnormal scarring, during hormonal changes (e.g. puberty, pregnancy) or when the wound or injury is more severe such as with burns and major trauma.

The main principles of wound management for optimum scarring include the following:

Defining the cause of the wound – Mostly obvious, but in some cases this may prove more difficult (e.g. defining a pressure ulcer from a diabetic ulcer).

Control factors affecting healing – For example: health of the tissue surrounding the wound, infection risk, blood sugar management, medication interactions, etc.

Select the appropriate dressings – Dependent on factors such as amount of dead tissue involved with the wound, amount of moisture or exudates, signs of infection, type of wound, stage of healing, etc.

Plan for management – If the wound-healing aim is not being achieved, it is important that you are under direct supervision of your health care professional.

How to care for existing scars

Exposure – Scars, **in particular new scars**, should not be exposed to UV light and extreme temperatures (intense sunshine, sunbeds, saunas and extreme cold).

Chemicals – Scars can be particularly sensitive to chemical ingredients such as those contained in detergents, perfumes, herbal or botanical extracts.

Clothing – Tight clothing should also be avoided, to prevent irritation and further injuring to the scar tissue.

Activities – Exercises or activities that cause tension on your scar should be avoided so your scar may heal without further disruption.

Strataderm[®]

scar therapy gel

For old and new scars

- Softens and flattens raised scars⁷
- Relieves the itching and discomfort associated with scars⁷
- Reduces redness and discoloration⁷
- Prevents abnormal and excessive scar formation⁸



Strataderm is available in 5g, 10g, 20g and 50g tubes.

Visit our website for more information about scar management and Strataderm scar therapy gel:

www.strataderm.com



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 **Stratpharma**
Switzerland

 Class I Medical Device
FDA Listed/TGA Registered

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