

IODOSORB[®] 0.9% Cadexomer Iodine supported better healing outcomes at 4 to 12 weeks compared with standard care in patients with venous leg ulcers (VLUs) in a Cochrane review

IODOSORB may also help to decrease bacterial load more than standard care in patients with infected VLUs at baseline



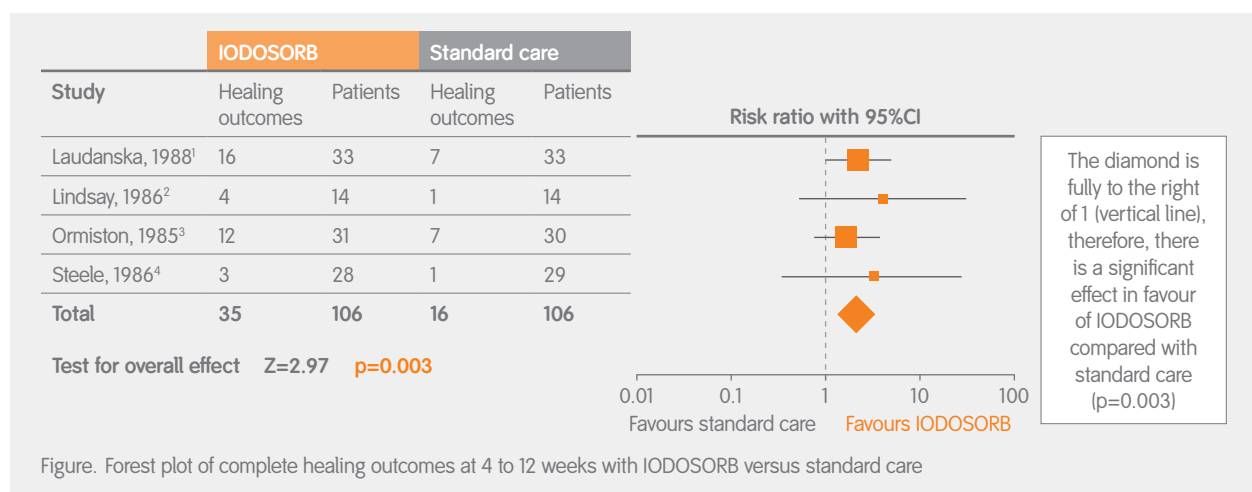
Study overview

- A systematic literature review of prospective, randomised controlled trials (RCTs; published or unpublished; any language) evaluating the effects of systemic or topical antibiotics or topical antiseptics in the treatment of VLUs
- Overall, 45 RCTs reporting 53 relevant treatment comparisons and involving 4,486 participants were included
 - Systemic antibiotics were compared in five RCTs (amikacin, amoxicillin, ciprofloxacin, co-trimoxazole, gentamicin, levamisole, trimethoprim) and topical preparations were evaluated in 40 RCTs (IODOSORB, povidone-iodine, peroxides, honey and silver, plus other topical antiseptics)
 - Only results for the 962 participants involved in 11 RCTs of IODOSORB (12 comparisons) are reported in this summary
- IODOSORB was used in combination with either compression, light retention or support bandages and was compared with the following treatment options: standard care (7 RCTs), hydrocolloid dressing (1 RCT), paraffin gauze dressing (1 RCT), dextranomer (2 RCTs), silver-impregnated dressing (1 RCT)



Key results

- Healing outcomes at 4 to 12 weeks were better with IODOSORB than with standard care (4 RCTs; Figure)
 - No differences in healing outcomes were detected for the other treatment comparisons versus IODOSORB
- IODOSORB may help to decrease bacterial load compared with standard care in patients with infected VLUs at baseline (1 RCT)
- Adverse events were reported in 3 RCTs and data were pooled for 2 RCTs; adverse events occurred with both treatments (itching, eczema, rashes and pain), although they were more frequent with IODOSORB than with standard care (risk ratio 4.59; 95%CI, 1.40 to 15.05)



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Evidence in focus (continued)



Conclusion

IODOSORB[®] use supported better healing outcomes at 4 to 12 weeks compared with standard care; there were no between-group differences in complete healing outcomes for IODOSORB compared with hydrocolloid dressing, paraffin gauze dressing, silver-impregnated dressing and dextranomer. IODOSORB may also be associated with decreased bacterial load in patients with infected VLUs. IODOSORB was the only topical preparation included in this analysis that demonstrated evidence supporting its use in the treatment of VLUs.




Considerations

- Risk of bias was assessed for each IODOSORB study included in this Cochrane review (high risk, 7; unclear risk, 4)
- Many of the RCTs included in the analysis were small and data could not be pooled due to clinical heterogeneity



Study citation

*O'Meara S, Al-Kurdi D, Ologun Y, Ovington LG, Martyn-St James M, Richardson R. Antibiotics and antiseptics for venous leg ulcers. *Cochrane Database Syst Rev.* 2014;(1):CD003557.

Available at: [Cochrane Database of Systematic Reviews](#) 

For detailed product information, including indications for use, contraindications, precautions and warnings, please consult the product's applicable Instructions for Use (IFU) prior to use.

References:

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2. Lindsay G, Latta D, Lyons KGB, Livingstone ED, Thomson W. A study in general practice of the efficacy of cadexomer iodine in venous leg ulcers treated on alternate days. *Acta Therapeutica* 1986;12:141-147;
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