

# Paste bandage application



**STEP 1**  
Choose the appropriate paste bandage, clean the skin and apply a primary dressing if required. With the foot at 90 degrees to the leg, commence bandaging at the side of the foot.



**STEP 2**  
Apply loosely starting at the base of the toes using extra turns to cover the heel and ankle.



**STEP 3**  
Wrap from the ankle, with every turn, the bandage should be folded back on itself in a pleat, at the front of the leg. This should be repeated up the leg until just below the knee.



**STEP 4**  
Smoothen out the bandage on the leg before application of outer bandage. To remove it, the paste bandage can be simply unrolled from the limb.

## ZIPZOC prescribing information

**ZIPZOC** (zinc impregnated medicated stocking)  
Abbreviated prescribing information. Refer to summary of product characteristics before prescribing.  
**Composition:** A sterile rayon stocking impregnated with an ointment containing 20% Zinc Oxide. Each stocking (80cm x 7cm) contains about 41.5g of ointment.  
**Therapeutic indications:** Aid to the treatment of chronic leg ulcers and other associated skin conditions. Where chronic venous insufficiency exists, the medicated stocking can be used as a primary contact layer under compression bandaging or hosiery.  
**Method of Administration:** Because ZIPZOC is preservative free, it must be changed no less frequently than weekly. For topical application, ZIPZOC should be applied to cover the lower leg from the base of the toes to below the knee. All folds should be smoothed out. To protect clothing, a suitable outer bandage should be worn. If chronic venous insufficiency exists, ZIPZOC may be used as a primary contact layer under compression therapy and may be left in situ for one week, before re-application.  
**Contra-indications:** Arterial leg ulcers. Known hypersensitivity to zinc oxide or the excipients in the ointment.  
**Special Warnings and Special Precautions:** None known.  
**Interactions:** None known.  
**Pregnancy and Lactation:** There is no evidence to suggest ZIPZOC should not be used during pregnancy.  
**Undesirable Effects:** The skin of leg ulcer patients is easily sensitised to some topical medications. ZIPZOC contains no preservatives thereby reducing the risk of skin reactions. Reported reactions include, rash, erythema, itching and maceration of the wound edge. If the outer bandage is inappropriate or the medicated stocking is not changed with sufficient frequency it can cause the stocking to dry out.  
**Excipients:** Liquid Paraffin Ph. Eur. White Soft Paraffin BP.  
**Incompatibilities:** None reported.  
**Shelf Life:** 3 years.  
**Storage:** At or below 30°C.  
Keep all medicines out of the reach of children.  
**Packaging:** Polyethylene aluminium foil laminated pouches, each pouch containing a single medicated stocking.  
The outer carton will contain either 4 or 10 pouches.  
Legal Category: P  
**Market authorization number:** PL44616/0002  
**Date of first authorisation/renewal of the authorisation:** 01 October 2006  
**Date of revision of text:** 26 October 2018  
Trade Mark of Evolan Pharma AB  
**Date of preparation:** October 2018

**References**  
1. Williams C. Examining the range of medicated and paste-impregnated bandages. British Journal Of Nursing 1999; 8(15): 119-120  
2. Boyd, Ichtammol revisited. Int J Dermatol. 2010 Jul;49(7):757-60  
3. Allan S. How I help leg ulcers heal by themselves. MIMS Magazine 1990; February: 43-46  
4. Ågren M.S. Studies on Zinc in Wound Healing (Linköping University Medical Dissertation No. 320, 1990)

ICHTHOPASTE<sup>◇</sup>  
VISCOPASTE<sup>◇</sup> PB7  
ZIPZOC<sup>◇</sup>



## Effective lower limb care for your patients

The management of venous leg ulceration and the related chronic skin conditions can be a stressful and painful experience for the patient and time consuming for the clinician. Where venous insufficiency exists, compression therapy remains the cornerstone of treatment, however this may be combined with paste bandages to aid treatment, enabling cost effective care for up to 7 days and reducing the number of dressing changes <sup>1</sup>.



# ICHTHOPASTE



## ICHTHOPASTE BANDAGE 7.5CMX6M

ICHTHOPASTE Medicated Dressing is a bandage made of open woven cloth impregnated with a paste containing 6.32 % Zinc Oxide BP and 2 % Ichthammol BP rolled onto a plastic core. It also contains Purified water BP, Glycerine BP, Gelatin BP, Emulsifying wax BP, Phenoxyethanol BP. Each bandage is presented in a wrapper and sealed in a polythene bag contained in a cardboard carton. ICHTHOPASTE provides topical treatment. It provides a moist wound-healing environment over a leg ulcer, helps to reduce skin irritation and soothes and protects surrounding skin. It will not dry out in use.

- **Contains Ichthammol to relieve irritation and soothe the surrounding skin<sup>2</sup>**
- **Designed for the wet ulcer that is surrounded by an area of sensitive skin**
- **Does not dry out allowing easy trauma free dressing application and change<sup>3</sup>**



**Indications**  
ICHTHOPASTE is for use as a topical treatment only to aid the treatment of leg ulcers and other associated skin conditions. Where venous insufficiency exists, the paste bandage should be used under graduated compression therapy. ICHTHOPASTE is also suitable for use in the treatment of chronic eczema/dermatitis, where occlusion is indicated.

**Precautions**  
ICHTHOPASTE should be used under graduated compression bandaging, after first assessing the patient to exclude arterial disease. The use of Doppler ultrasound is recommended for this purpose. Unless recommended by a suitably qualified clinician, compression bandaging should not be used on patients who have arterial disease (ABPI < 0.8) and is not recommended for use on diabetic patients with advanced small vessel disease. Failure to detect reduced arterial flow can result in pressure necrosis, amputation, or even death. The risk of a patient having arterial as well as venous disease rises with age. ICHTHOPASTE should not be used in known cases of sensitivity or allergy to any of the ingredients. The skin of leg ulcer patients is easily sensitised to topical medicaments, including preservatives. Sensitisation should be suspected in patients particularly where there is deterioration of the surrounding skin. Such patients should be referred for specialist diagnosis, including patch testing. One of the functions of occlusive bandages is to increase absorption. Care should be taken, therefore, if it is decided to apply topical steroid, anaesthetic or retinoid preparations under the bandage, as their absorption may be significantly increased. This may lead to a shorter duration of effect of a topical anaesthetic product in addition to increasing the risk of sensitisation to these preparations. Ichthammol (of itself, not related to the occlusive nature of the product) may increase the absorption of corticosteroids, heparin and chloramphenicol through the skin. Ichthammol has also been shown to synergise the activity of oxytetracycline and antagonise the activity of ampicillin when present together in various ointment bases.

ICHTHOPASTE AVAILABILITY		
1 x 12 pieces 4959	Description Bandage	Size 7.5cm x 6m CE 0086

# VISCOPASTE PB7



## VISCOPASTE BANDAGE PB7 7.5CMX6M

VISCOPASTE PB7 bandage is made of open woven cloth impregnated with a paste containing 10 % Zinc Oxide BP rolled onto a plastic core. It also contains Purified Water BP, Glycerol BP, Cetostearyl alcohol BP, Cetomacrogol BP, White Oil BP, Guar Gum, Xanthan Gum, Methyl p-hydroxybenzoate BP, and Propyl p-hydroxybenzoate BP. Each bandage is presented in a wrapper and sealed in a polythene bag contained in a cardboard carton. VISCOPASTE PB7 provides topical treatment. It provides a moist wound-healing environment over a leg ulcer, helps to reduce skin irritation and soothes and protects surrounding skin. It will not dry out in use. VISCOPASTE PB7 is for use as a topical treatment only. It is indicated to assist the management of venous leg ulcers and related skin conditions. Where venous insufficiency exists, the paste bandage should be used under graduated compression therapy. VISCOPASTE PB7 is also suitable for use in the treatment of chronic eczema/dermatitis, where occlusion is indicated. This product is ready for use upon removal from the sealed pouch and wrapper.

- **Designed for wet and dry ulcers that are surrounded by areas of sensitive skin**
- **Designed to relieve irritation and soothe surrounding skin<sup>4</sup>**
- **Does not dry out allowing easy trauma free dressing application and change<sup>3</sup>**

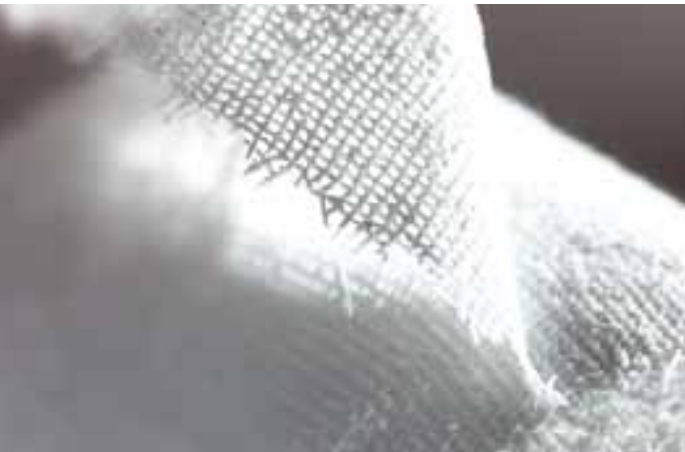
VISCOPASTE PB7 AVAILABILITY		
1 x 12 pieces 4948	Description Bandage	Size 7.5cm x 6m CE 0086

**There are two ways that the bandage can be applied:**  
1) Beginning at the base of the toes, the bandage should be loosely wrapped around the foot, heel and around the leg in a spiral fashion to just below the knee. Once applied, the bandage should then be smoothed and moulded around the leg.

2) Beginning at the base of the toes, the bandage should be loosely wrapped around the foot and heel and then, whilst wrapping from the ankle, with every turn, the bandage should be folded back on itself in a pleat, at the front of the leg. This should be repeated up the leg until just below the knee. Compression bandaging may follow.

Once VISCOPASTE PB7 has been applied, the leg should be covered by a bandage or dressing to prevent soiling to clothes.

VISCOPASTE PB7 should not be used in known cases of sensitivity or allergy to any of the ingredients. The skin of leg ulcer patients is easily sensitised to topical medicaments, including preservatives. Sensitisation should be suspected in patients particularly where there is deterioration of the surrounding skin. Such patients should be referred for specialist diagnosis, including patch testing. One of the functions of occlusive bandages is to increase absorption. Care should be taken, therefore, if it is decided to apply topical steroid, anaesthetic or retinoid preparations under the bandage, as their absorption may be significantly increased, leading to a shorter duration of effect with an anaesthetic product. Where venous insufficiency exists, VISCOPASTE PB7 should be used under graduated compression therapy, after first assessing the patient to exclude arterial disease. The use of Doppler ultrasound is recommended for this purpose. Failure to detect reduced arterial flow can result in pressure necrosis, amputation, or even death. The risk of a patient having arterial as well as venous disease rises with age.



# ZIPZOC



## ZIPZOC Zinc oxide impregnated stocking

ZIPZOC is a sterile zinc oxide impregnated stocking, which is indicated as an aid to the treatment of chronic leg ulceration and other associated skin conditions. Where chronic venous insufficiency exists, ZIPZOC can be used as a primary contact layer under compression bandaging or hosiery kits. ZIPZOC is a preservative free, single use dressing which means a reduced risk of skin reaction from sensitivity. ZIPZOC contains white soft paraffin and liquid paraffin so it won't dry out or adhere to the wound if changed sufficiently frequently. ZIPZOC works by forming a barrier on the surface of the skin which protects against moisture and irritants.

**Indications**  
Use as an aid to the treatment of chronic leg ulcers and other associated skin conditions.

**Ease of use**  
ZIPZOC's stocking presentation means it is easy to apply and remove, therefore saving time during dressing changes.

- **Simple and easy to apply**
- **Soothing and comfortable**
- **Sterile**
- **Low adherent**
- **Preservative free**

ZIPZOC AVAILABILITY	
Description Stocking	Size 1 x 4 sachets 1 x 10 sachets

Low adherence means that ZIPZOC should not stick to the wound surface – this means that it can be used with confidence as a primary contact layer.

**Patient comfort**  
ZIPZOC contains 20% zinc oxide paste which is soothing for the patient. The preservative free formulation means that skin reactions are less likely for patients who may have sensitive skin<sup>5</sup> ZIPZOC only requires a retention bandage over, which means that patients can wear their normal footwear.

**Application**  
- ZIPZOC stocking should be applied to the lower leg from the base of the toes to just below the knee.  
- If applying ZIPZOC over another wound dressing, draw up ZIPZOC, apply the dressing and draw down the ZIPZOC over it.  
- Keep the foot positioned at 90° and smooth away wrinkles.  
- A light retention bandage may be used over ZIPZOC to protect clothing.  
- Where chronic venous insufficiency exists, ZIPZOC may be used as a primary contact layer under compression therapy.  
- To remove ZIPZOC, roll away down the leg and dispose of the stocking.

