



Your guide to  
**Epidermolysis Bullosa (EB)**

# Treating Epidermolysis Bullosa (EB)

With many wounds at different stages of healing, the management of EB is complex<sup>1</sup>. One of the greatest challenges of managing EB is that it causes significant and constant discomfort and pain for the sufferer while essentially monopolising the time and focus of the family or caretakers.

When treating patients with EB, it is of utmost importance to select a dressing regimen that does not further damage their fragile skin<sup>1</sup>. Protecting the peri-wound skin, avoiding skin stripping, addressing the bio-burden and exudate management are all key factors to consider.

There are numerous choices in wound care products, except for when treating fragile skin. Delicate treatment is made more challenging when adhesive dressings – even those coated with soft silicone – may strip the skin.

## Wound dressings

The skin is so fragile and dressing changes so frequent that atraumatic dressings are recommended to prevent further damage, pain or bleeding<sup>1</sup>. Silicone-based dressings are easier to apply and remove than traditional dressings<sup>2</sup>. They also protect the wound and peri-wound skin and create a favourable environment for wound healing.

## Infection management

There is a high risk of infection due to large areas of open wounds. Antimicrobial cleansers, moisturisers and topical treatments are necessary to manage the wound bio-burden<sup>1</sup>.

## Blister management

EB blisters need careful management as they will extend rapidly if left unchecked<sup>1</sup>. Intact blisters should be lanced with a sterile needle at their lowest point to limit tissue damage<sup>1</sup>. Sterile swabs or sponges can be used to gently compress the blister to encourage complete emptying.

## Dressing retention

If dressings slip, they can tear the fragile skin and cause the wound to stick to clothing or bedding<sup>1</sup>. The dressing should be held firmly in place with a retention bandage. The bandage should not put additional pressure on the wound and it should allow freedom of movement to prevent shearing forces from causing additional blistering<sup>1</sup>. Tubular bandages can be used<sup>1</sup>.

# Luke's\* Story

Luke is a 41-year-old patient who has been living with a severe form of Dystrophic EB all his life. His wounds need constant dressing, which can be a hugely painful ordeal. Using gently adhering dressings with Safetac® Technology have helped to minimise his discomfort and ease the pain of dressing changes.

Luke has open wounds and blistering throughout his body, which need dressings to protect them and promote healing. With so many wounds, he is susceptible to recurrent infection. Luke also suffers from internal blistering.

Throughout his childhood, Luke experienced thousands of hours of painful dressing changes, giving him as much psychological as physical pain. The day he discovered dressings with Safetac was the day his life changed. 'It made a huge difference,' he says. 'My dressings didn't stick to my skin any more'.

An essential dressing for Luke is Mepitel® which stays in place over wounds without adhering to the wound bed<sup>2</sup>. The Safetac Technology on Mepitel allows it to adhere gently without disturbing the wound. This makes it easy to remove, minimising pain and discomfort. For Luke, it has also reduced the stress and fear of dressing changes and improved his quality of life.

Luke's story is taken from a 2017 case study: The effect of current economic cuts to wound dressings and its impact on patient with epidermolysis bullosa<sup>3</sup>.



\*not his real name to protect his identity.

# Dressing Selection Guide

Providing specialised bandages and dressings to support people with Epidermolysis Bullosa (EB) is essential. Mölnlycke® Health Care offers products and solutions aligned with international best practice guidelines<sup>1</sup>.

## MÖLNLYCKE - WOUND CARE PRODUCTS

PRODUCT DESCRIPTION

AREAS OF USE

SIZE

MÖLNLYCKE  
CODE

PCS/  
BOX

### BORDERED FOAM DRESSINGS



#### Mepilex® Border Flex

Absorbent self-adherent foam dressing with 360° stretch Flex Technology

- Moderate to heavily exuding wounds
- Diabetic foot ulcers
- Leg and foot ulcers
- Traumatic wounds, such as skin tears
- Pressure injury prevention\* and treatment

#### Square/Rectangle

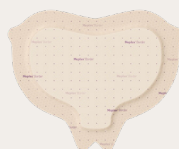
7.5cm x 7.5cm  
10cm x 10cm  
15cm x 15cm  
15cm x 20cm

595211  
595311  
595411  
595611

10  
10  
10  
10



\* When a repositioning/offloading protocol is used



#### Mepilex® Border Sacrum

Absorbent self-adherent foam dressing for the sacral area

#### Added benefits:

- Thicker borders to minimise rolling and to allow efficient handling
- Optimised gluteal seal for enhanced protection of the high-risk sacral area
- Enhanced coverage of high-risk areas
- Additional handling tabs for easier skin checks

- Moderate to heavily exuding wounds for the sacral area
- Sacral pressure injury prevention\* and treatment (all stages)

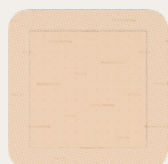
16cm x 20cm  
22cm x 25cm

282050  
282450

5  
5



\* When a repositioning/offloading protocol is used



#### Mepilex® Border Flex Lite

Thin absorbent self-adherent foam dressing with 360° stretch Flex Technology

- Non- to moderately exuding wounds
- Leg and foot ulcers
- Pressure injuries
- Surgical and traumatic wounds, e.g. abrasions, blisters and skin tears
- Protection of compromised and/or fragile skin

4cm x 5cm  
5cm x 12.5cm  
7.5cm x 7.5cm  
10cm x 10cm  
15cm x 15cm

581011  
581100  
581200  
581300  
581500

10  
5  
5  
5  
5



### ANTIMICROBIAL DRESSINGS



#### Mepilex® Ag

Antimicrobial absorbent foam dressing

- Low to moderately exuding wounds
- Partial-thickness burns
- Infected wounds
- Leg ulcers and foot ulcers
- Pressure injuries
- Can be used under compression

10cm x 10cm  
15cm x 15cm  
10cm x 20cm  
20cm x 20cm  
20cm x 50cm

287110  
287310  
287210  
287410  
287510

5  
5  
5  
5  
2



# MÖLNLYCKE - WOUND CARE PRODUCTS

PRODUCT DESCRIPTION	AREAS OF USE	SIZE	MÖLNLYCKE CODE	PCS/ BOX
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## NON-BORDERED FOAM DRESSINGS



### Mepilex®

Highly conformable and absorbent foam dressing



- Low to moderately exuding wounds
- Leg ulcers and diabetic foot ulcers
- Pressure injuries
- Traumatic wounds
- Partial-thickness burns
- Can be used under compression

10cm x 10cm	294100	5
10cm x 20cm	294200	5
15cm x 15cm	294300	5
20cm x 20cm	294400	5
20cm x 50cm	294500	2



### Mepilex® Heel

Absorbent foam dressing for the heel area



- A wide range of exuding wounds on the heel or malleolus
- Foot ulcers / diabetic foot ulcers

13cm x 20cm	288100	5
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### Mepilex® Lite

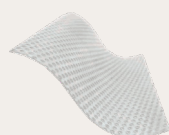
Thin absorbent foam dressing



- Non- to low exuding wounds
- Pressure injuries
- Diabetic foot ulcers
- Leg ulcers
- Radiation skin reactions
- Epidermolysis Bullosa

6cm x 8.5cm	284000	5
10cm x 10cm	284100	5
15cm x 15cm	284300	5
20cm x 50cm	284500	4

## WOUND CONTACT LAYERS



### Mepitel® One

Wound contact layer dressing with SafetaC® on one side



- Skin tears
- Lacerations
- Surgical incisions
- Fixation of partial- and full-thickness grafts
- Partial-thickness burns
- Diabetic foot ulcers
- Venous and arterial leg ulcers

7.5cm x 10cm	289300	10
10cm x 18cm	289500	10
17cm x 25cm	289700	5



### Mepitel®

Wound contact layer dressing with SafetaC® on both sides



- Skin tears
- Surgical incisions
- Partial-thickness burns
- Fixation of partial- and full-thickness grafts
- Diabetic foot ulcers, venous and arterial leg ulcers

5cm x 7.5cm	290510	10
7.5cm x 10cm	290710	10
10cm x 18cm	291010	10
20cm x 30cm	292005	5



### Mepilex® Transfer

Exudate transfer foam dressing



- Highly exuding wounds
- Difficult-to-dress areas
- Radiation skin reactions
- Epidermolysis Bullosa

7.5cm x 8.5cm	294600	5
10cm x 12cm	294700	5
15cm x 20cm	294800	5
20cm x 50cm	294502	4

## FIXATION



### Mepitac®

Polyurethane tape with SafetaC® Technology



- For the fixation of medical devices, such as drains, tubes and probes
- Skin protection under devices

2cm x 3m	298300	1
4cm x 1.5m	298400	1

# MÖLNLYCKE - WOUND CARE PRODUCTS

PRODUCT DESCRIPTION

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BOX

## BANDAGES



### Tubifast®

Lightweight tubular retention bandage

WITH  
2-WAY STRETCH®  
TECHNOLOGY

- Lightweight tubular dressing retention bandage that is ideal for any part of the body
- Can be used for patch wrapping and as an undercast stockinette
- Can be used under compression
- For use as skin covering
- Epidermolysis Bullosa

10m roll		
RED	3.5cm x 10m	2434 1
GREEN	5cm x 10m	2436 1
BLUE	7.5cm x 10m	2438 1
YELLOW	10.75cm x 10m	2440 1
PURPLE	20cm x 10m	2444 1



### Tubifast® Garments

Ready-to-wear garments

WITH  
2-WAY STRETCH®  
TECHNOLOGY

- Ready-to-wear garments for dressing retention and wet or dry wrapping
- For children of six months to 14 years of age
- With no tapes, pins or ties, Tubifast Garments are quick and easy to apply, and their 2-Way Stretch construction ensures complete freedom of movement, so aiding compliance.
- Comfortable to wear under nightwear and ordinary clothes

Vests		
6-24 months	992007	6
2-5 yr	992008	6
5-8 yr	992009	6
8-11 yr	992010	6
11-14 yr	992011	6
Tights	6-24 months	992012 6
Leggings	2-5 yr	992013 6
5-8 yr	992014 6	
8-11 yr	992015 6	
11-14 yr	992016 6	
Socks	1 size: 2-14yr	992017 6
Gloves	Small child	5923 6



### Tubigrip®

Multi-purpose, elasticated tubular support bandage that provides firm support for sprains, strains and swelling

#### Size / Limb

#### Circumference (cm)

A	10 - 14,5
B	14,5 - 29
C	22 - 35
D	26 - 40
E	29 - 46
F	35 - 53
G	40 - 62
J	54 - 82
K	70 - 113
L	106 - 149

#### Natural (N)

#### Beige (B)

1435	1	-	-
1436	1	1449	1
1443	1	1450	1
1437	1	1451	1
1434	1	1448	1
1438	1	1452	1
1439	1	1453	1
1440	1	-	-
1441	1	-	-
1442	1	-	-

## WOUND IRRIGATION



### Granudacyn®

Wound irrigation solution and gel for cleansing and moisturising acute, hard-to-heal (chronic) and contaminated wounds

- All hard-to-heal (chronic) wounds of any depths, such as diabetic foot ulcers, pressure injuries, venous leg ulcers etc.
- All acute wounds, such as cuts, bite wounds, lacerations and abrasions
- Surgical wounds (intra-operative and post-operative)
- Wounds with exposed cartilage, tendons, ligaments and/or bones
- Superficial and partial-thickness burns
- Radiation ulcers
- Fistulas and abscesses

#### Solution

50ml spray	360150	1
250ml spray	360100	1
500ml	360101	1
1000ml	360102	1

#### Gel

50g	360107	1
100g spray	360108	1

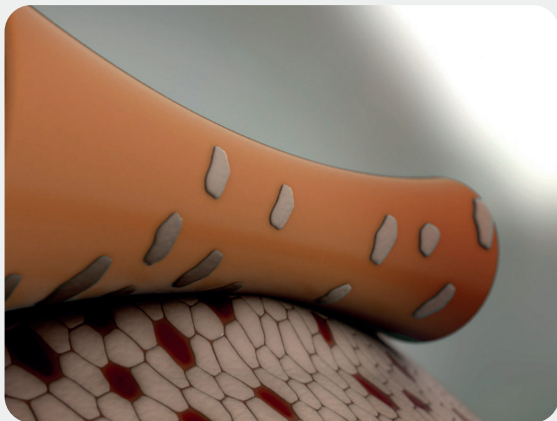
# Prevent unnecessary pain and stress

Safetac® is the original less-pain contact layer with silicone adhesion. We designed it to mould softly to skin without sticking to the moist wound<sup>2</sup>, so you can remove it easily without damaging the skin<sup>5,6</sup>. That means less pain for your patients<sup>4</sup>.

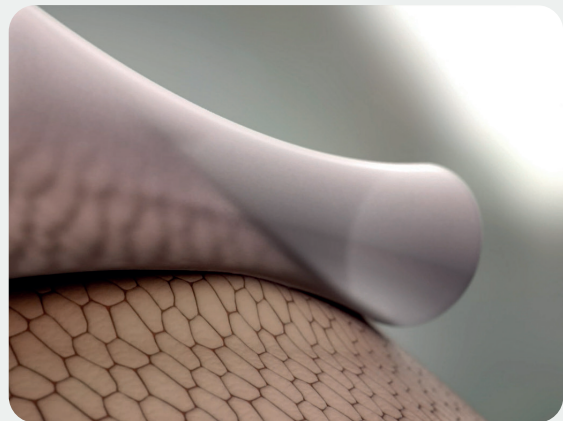
Safetac protects new tissue and intact skin, ensuring the wounds remain undisturbed to support faster, natural healing<sup>7-10</sup>. It also seals the wound margins to protect skin from damaging leaks and maceration<sup>11-13</sup>. This combination of less pain<sup>4</sup> and less skin damage<sup>5,6,11-13</sup> supports faster healing<sup>7-10</sup> and can also reduce the cost of treatment<sup>8,9,14</sup>.

You can trust Mölnlycke® dressings with Safetac, for better patient and economic outcomes.

- Safetac tacks gently to dry surfaces, like skin, but not to moist surfaces, such as open wounds<sup>2</sup>
- Moulds to the skin's pores, covering more skin surface and spreading peel forces on removal to prevent skin stripping<sup>5,6</sup>
- Seals the wound margins, minimising the spread of exudate and the risk of maceration<sup>11-13</sup>



Traditional adhesives only adhere to the top of the skin pores, and must stick harder to stay in place.



No skin stripping occurs with Safetac Technology<sup>1</sup>.

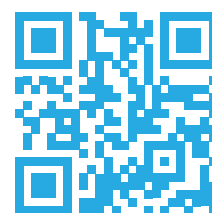
# Supporting the EB community

Mölnlycke® is proud to support DEBRA New Zealand in their mission to improve the lives of children and adults living with Epidermolysis Bullosa (EB).

At Mölnlycke, we are committed to advancing wound care solutions that make a real difference for people living with complex and chronic conditions. By supporting the work of DEBRA New Zealand, we stand with the EB community and those who care for them – helping to raise awareness, share knowledge, and promote better health outcomes.

Together, we aim to make life a little easier for those living with EB every day.

To learn more, visit: [www.molnlycke.co.nz](http://www.molnlycke.co.nz) | [www.debra.org.nz](http://www.debra.org.nz)



**References:** 1. Denyer J, Pillay E. Best practice guidelines for skin and wound care in epidermolysis bullosa: International Consensus. Vienna: DEBRA; 2012. 2. White R et al. Evidence for atraumatic soft silicone wound dressing use. *Wounds UK*. 2005;1(3):104-9. 3. Downe A. The effect of current economic cuts to wound dressings and its impact on patients with epidermolysis bullosa: a case study. *Wounds UK*. 2017;13(1). 4. White R. A multinational survey of the assessment of pain when removing dressings. *Wounds UK*. 2008. 5. Dykes PJ et al. Effects of adhesive dressings on the stratum corneum of the skin. *J Wound Care*. 2001. 6. Waring M et al. An evaluation of the skin stripping of wound dressing adhesives. *J Wound Care*. 2011. 7. Gotschall CS et al. Prospective, randomized study of the efficacy of Mepitel on children with partial-thickness scalds. *J Burn Care Rehabil*. 1998. 8. Silverstein P et al. An open, parallel, randomized, comparative, multicenter study to evaluate the cost-effectiveness, performance, tolerance, and safety of a silver-containing soft silicone foam dressing vs silver sulfadiazine cream. *J Burn Care Res*. 2011. 9. Gee Kee EL, Kimble RM, Cuttle L, Khan A, Stockton KA. Randomized controlled trial of three burns dressings for partial thickness burns in children. *Burns*. 2015. 10. David F et al. Comparison of two wound contact layers in acute wounds. E-poster presented at: EWMA Conference; Germany; 2016. 11. Meaume S et al. A study to compare a new self-adherent soft silicone dressing with a self-adherent polymer dressing in stage II pressure ulcers. *Ostomy Wound Manage*. 2003. 12. Feili F et al. Retention capacity. Poster presented at: EWMA Conference; Portugal; 2008. 13. Wiberg AB et al. Preventing maceration with a soft silicone dressing: in-vitro evaluations. Poster presented at: 3rd Congress of the WUWHS; Canada; 2008. 14. Bredow J et al. Randomized clinical trial to evaluate performance of flexible self-adherent absorbent dressing coated with silicone layer after hip, knee or spinal surgery in comparison to standard wound dressing. Poster presented at: 5th Congress of the WUWHS; Italy; 2016.

Find out more at [www.molnlycke.com.au](http://www.molnlycke.com.au) | [www.molnlycke.co.nz](http://www.molnlycke.co.nz)

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