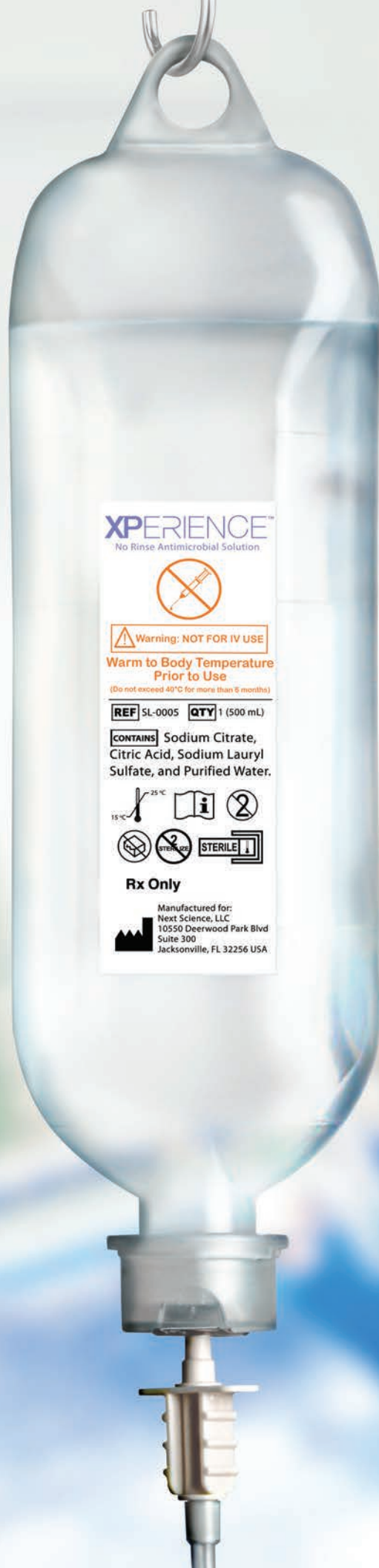


**NEXT SCIENCE®**

Powered By **XBIO®** Technology

**XPERIENCE™**  
No Rinse Antimicrobial Solution



## What is XPERIENCE?

XPERIENCE **no rinse** antimicrobial solution is designed to help prevent surgical site infections.

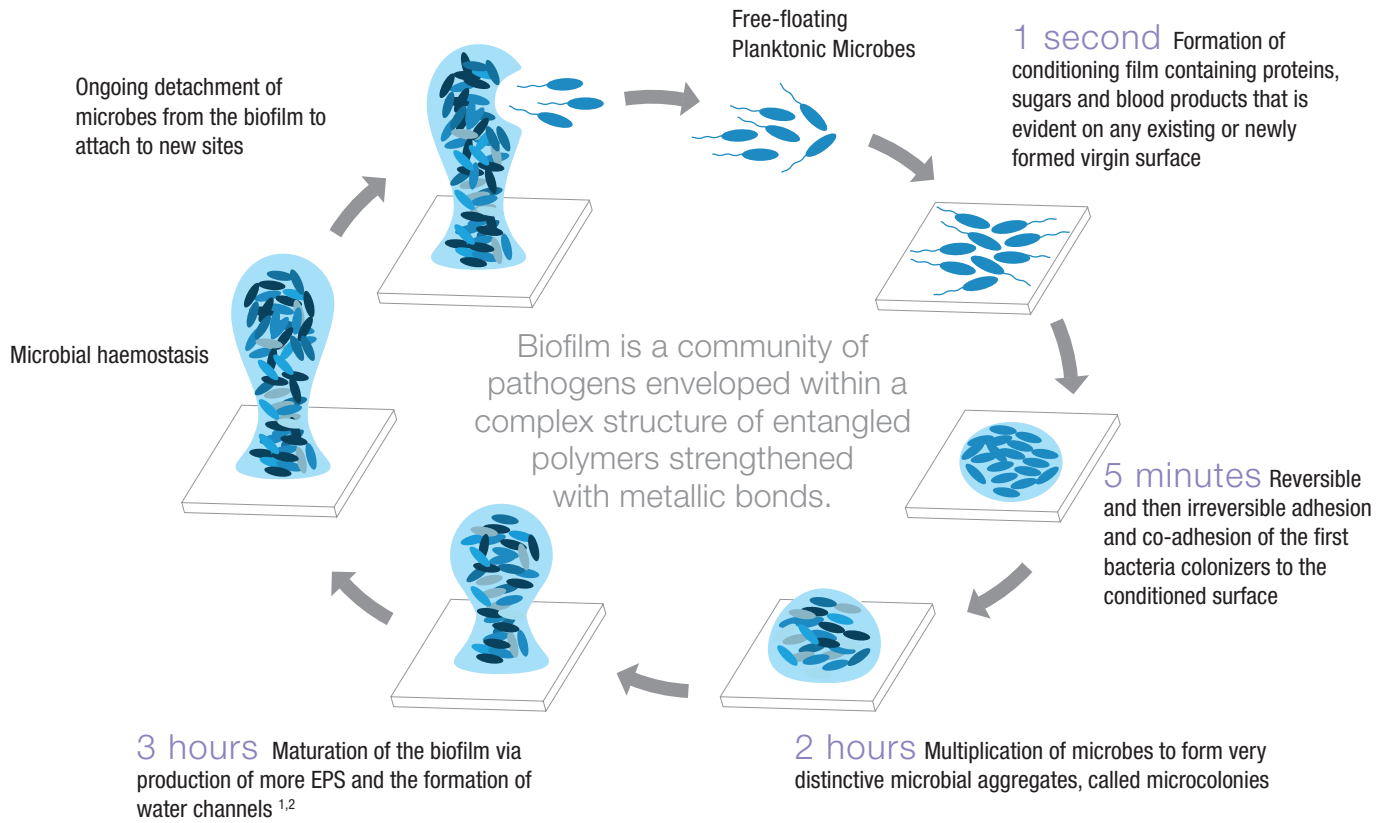
The technology **deconstructs** the biofilm by removing the metal ion holding the polymers together and **destroys** the bacteria enveloped in the solution. XPERIENCE **defends** against bacterial recolonization.

## Features

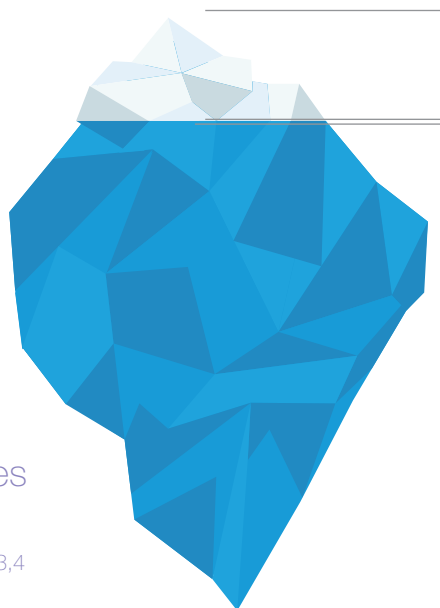
- ✓ 5+ hours of ongoing protection against bacterial biofilms<sup>5</sup>
- ✓ No secondary rinse out required
- ✓ Non-toxic
- ✓ Broad spectrum efficacy
- ✓ No known bacterial resistance
- ✓ Compatible with most commonly used implants and closure methods<sup>\*,6</sup>

<sup>\*</sup>Does not include hydroxyapatite (HA) or fibrin sealants<sup>6</sup>

# What is Biofilm?



Bacteria in biofilms can become up to **1000x** more resistant to antibiotics and biocides when compared to planktonic counterparts.<sup>3,4</sup>



**10%** of bacteria are planktonic/free-floating

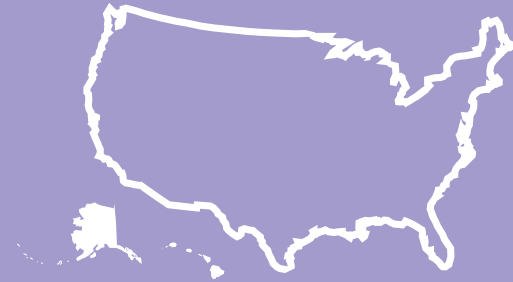
**90%** of bacteria exist in biofilms



# THE REAL COST OF SURGICAL SITE INFECTIONS

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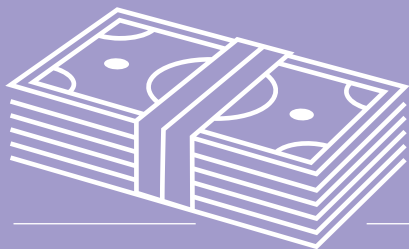
1.5 M<sup>7</sup>



SSI's in the US per year with high rates observed in:

- Orthopedic Trauma
- Joint Replacement
- C-Section
- Breast Recon
- Colorectal
- CABG

\$3.3 BILLION



COST OF SSI's ANNUALLY<sup>8</sup>

The average cost of an SSI is **\$20,785**

## Patient Impact

3% mortality rate due to SSI's<sup>9</sup>

*Patients with SSI's are twice as likely to die compared to other surgical patients<sup>10</sup>*

Patients with SSI's are **5x more likely** to be readmitted<sup>10</sup>



SSI's lead to nearly **1 million** additional inpatient days<sup>11</sup>

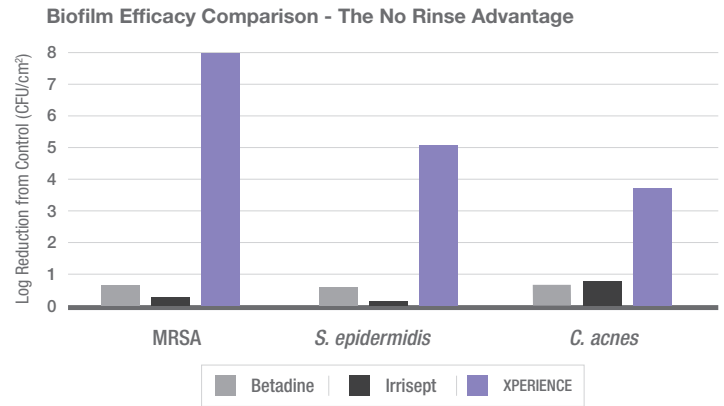


Average increase in length of stay is **9.7 days**<sup>12</sup>

## Efficacy and Safety

### Proven Efficacy against biofilm bacteria<sup>5</sup>

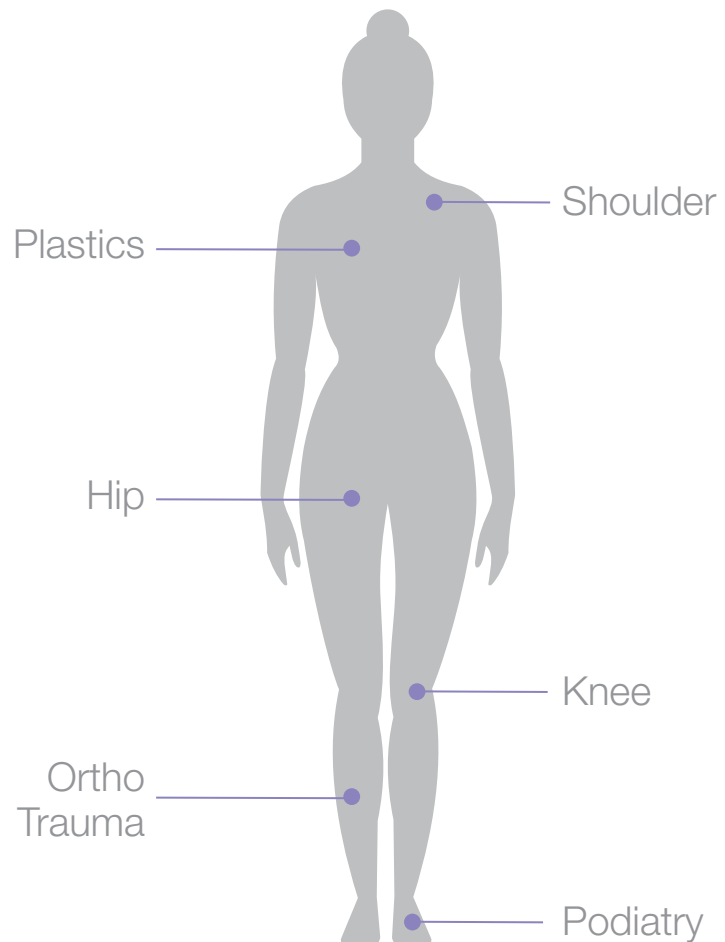
- 5+ hours of ongoing protection against bacterial biofilms
- Significant bacterial log reductions including:
  - ✓ MRSA
  - ✓ *S. epidermidis*
  - ✓ *C. acnes*



The study was conducted across various materials and contact times. Standard deviations within data sets show high variability.

### Proven Safety

The non-toxic formulation has been safety tested, showing no irritation.<sup>13</sup>



## Ordering Information

Product	Part Number
Box of 4	MC-SL-0005-4
Box of 10	MC-SL-0005-10
Box of 4 with Decanters	MC-SL-0005-4D
Box of 10 with Decanters	MC-SL-0005-10D



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**XPERIENCE™**  
No Rinse Antimicrobial Solution

Contact your local sales representative for more information about **XPERIENCE** and **SURGX**.

**NEXT SCIENCE®**

POWERED BY **XBIO®** TECHNOLOGY

**BLASTX® // SURGX® // XPERIENCE™ // Bactisure™**

### References

1. Percival, S., Malone, M., Mayer, D., Salisbury, A. & Schulz, G. (2018). Role of anaerobes in polymicrobial communities and biofilms complicating diabetic foot ulcers. *International Wound Journal*, p1-7. Retrieved from, <https://doi.org/10.1111/iwj.12926>.
2. Epstein, A., Hong, D., Kim, P. & Aizenberg, J. (2013). Biofilm attachment reduction on bioinspired, dynamic, micro-wrinkling surfaces. *New Journal of Physics*, 15. Retrieved from, <http://iopscience.iop.org/article/10.1088/1367-2630/15/9/095018>.
3. Gupta K, Margues C, Petrova OE, Sauer K. Antimicrobial tolerance of *Pseudomonas aeruginosa* biofilms is activated during an early developmental stage and requires the two component hybrid sagS. *Journal of Bacteriology*. 2013;195(21):4975-4987.
4. Leid JG, Willson CJ, Shirliff ME, et al. The exopolysaccharide alginate protects *Pseudomonas aeruginosa* biofilm bacteria from IFN-mediated macrophage killing. *J Immunol*. 2005;175(11):7512-7518.
5. Data on file.
6. Data on file.
7. Darouiche, R. (2019). Surgical site infections. Retrieved from, <https://www.infectiousdiseaseadvisor.com/home/decision-support-in-medicine/hospital-infection-control/surgical-site-infections/>.
8. Zimlichman, E., et al., "Health Care-Associated Infections. A Meta-analysis of Costs and Financial Impact on the US Health Care System". *JAMA Intern Med*, 173(22): (2013): 2039-46.
9. Awad, S.S., "Adherence to surgical care improvement project measures and postoperative surgical site infections". *Surgical Infection (Larchmt)*, 13(4): (2012): 234-7
10. <https://www.the-hospitalist.org/hospitalist/article/122901/preventing-surgical-site-infections>
11. de Lissovoy, G., et al., "Surgical site infection: Incidence and impact on hospital utilization and treatment costs". *Am J Infect Control*, 37(5): (2009): 387-97.
12. Loyola University Health System. "Surgical site infections are the most common and costly of hospital infections: Guidelines for preventing surgical site infections are updated." *ScienceDaily*, 19 January 2017. [www.sciencedaily.com/releases/2017/01/170119161551.htm](http://www.sciencedaily.com/releases/2017/01/170119161551.htm).
13. Data on file.