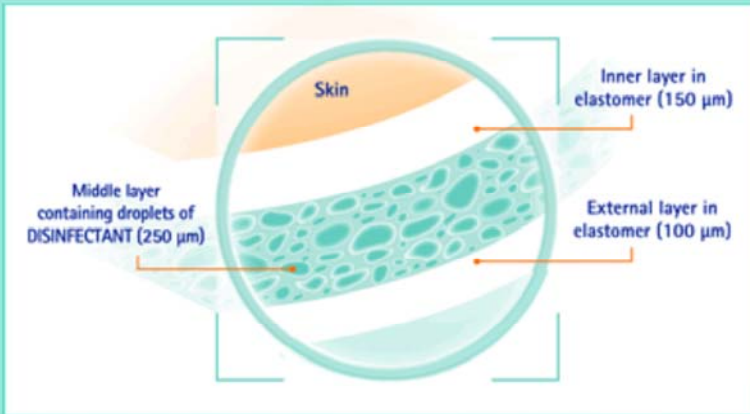




► **First three-layer surgical glove**

integrating a disinfecting liquid, which reduces significantly the transmitted viral load* in case of Blood Exposure Accident.



Single use

► **An active three-layer structure in case of Percutaneous Injury.**



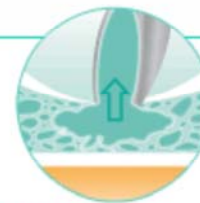
1 - Pressure storage

Needle deforms the first layer without breaking it and the pressure increases rapidly.



2 - Concentration

Under increasing pressure, the elastomeric boundaries between the droplets break which induces droplet coalescence.



3 - Expulsion

While in its progress, the needle finally punctures the external layer and the disinfecting liquid squirts out the film by elastic energy restitution.

[Click here to see the video of the perforation \(please active the sound\)](#)

► ***Exceptional biological efficacy:**

G-VIR® offers a reduction of 81% of the infectious viruses transmitted compared with double gloving in case of a hollow bore needle stick injury, in accordance with the experimental needle stick protocol described in Journal of Hospital Infection, 2007, Vol66, 339-345. This test has been experimented with Herpes Simplex virus, commonly used in laboratory as the surrogate of enveloped viruses, such as HIV and HCV.

	No glove	Single glove	Double glove	G-VIR® Glove
Quantity of liquid transferred in case of hollow-bore needle pucture (22G)	0,25 µL	0,12 µL	0,12 µL	0,12 µL
Quantity of viruses (HSV1) trasfered if the viral load is 10 ⁶ viruses/mL	250 viruses	120 viruses	120 viruses	23 viruses
<i>reduction %</i>		-52%	-52%	-91%



As the volume of inoculated blood in case of percutaneous injury is very low (0.1 to 0.5 µL in case of hollow bore needle stick injury), there are very few infectious transmitted particles, even in case of high viral load. In those particular conditions, it is admitted that a reduction of transmitted viral load goes with a contamination risk reduction. Nevertheless, any correlation between those in vitro data and the in vivo protection level has not been established and is not claimed.

► And supported by scientific publications

G-VIR® performance concerning the reduction of the transmitted viral load in case of percutaneous accidents has been demonstrated and published in:

Journal of Hospital Infection, 2007, Vol 66, 339-345 :

Standardization of needlestick injury and evaluation of a novel virus-inhibiting protective glove.

par Krikorian R, Lozach-Perlant A, Ferrier-Rembert A, Hoerner P, Sonntag P, Garin D, Crance J-M.

Journal of Medical Virology, 2003, Vol 69, 538-545 :

Virus-inhibiting surgical glove to reduce the risk of infection by enveloped viruses

par Bricout F, Moraillon A, Sonntag P, Hoerner P, Blackwelder W, Plotkin S.

The G-VIR® "dynamic" mechanism, which concentrates and squirts out the disinfecting liquid in case of perforation, has been published in:

Nature Materials, 2004, Vol 3, 311-315 :

Biocide squirting from an elastomeric tri-layer film

par Sonntag P, Hoerner P, Cheymol A, Argy G, Riess G, Reiter G.

A clinical study, realized on 100 patients, evaluated the tolerance, ergonomics and G-VIR® barrier value in real conditions. The results have been published in:

Swiss Medical Weekly, 2008, 138, 18-22 :

First clinical study of a new virus-inhibiting surgical glove

par Caillot J-L, Voiglio E.