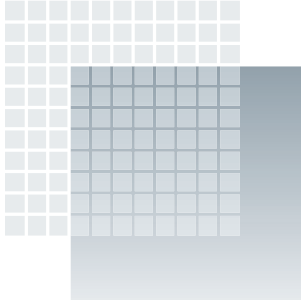


ADVANCED BI-LAYERED WOUND CARE DEVICE



3 dimensional HYAFF® (hyaluronic acid ester) matrix

- allows cellular invasion
- allows capillary growth
- positively impacts the natural re-epithelialization process

Transparent Silicone Membrane

- protects the lesion / retains the moisture
- facilitates monitoring with no disruption of the new wound bed

Mechanism of Action

The HYAFF matrix allows cellular invasion by fibroblasts or endothelial cells

- HYAFF fibers degrade into hyaluronic acid and benzyl alcohol within the wound
- The presence of hyaluronic acid helps in maintaining well-hydrated tissue and may promote natural re-epithelialization.^{1, 2}

Indications For Use

HYALOMATRIX® is indicated for the management of wounds including: partial and full-thickness wounds; second-degree burns; pressure ulcers; venous ulcers; diabetic ulcers; chronic vascular ulcers; tunneled/undetermined wounds; surgical wounds (donor sites/grafts, Post-Moh's surgery, post-laser surgery, podiatric, wound dehiscence); trauma wounds (abrasions, lacerations, skin tears); and draining wounds. The device is intended for one-time use.

FEATURES AND BENEFITS

Single application device – use for most wounds	Typically one application of Hyalomatrix is required to manage a viable wound bed capable of continuing re-epithelialization or for the application of a skin graft
Avoids some reactions	Hyalomatrix is a hyaluronic acid ester and contains no human or animal products, avoiding porcine and bovine sensitivities
Ease of Use – saves time	Hyalomatrix is easy to use: open the sterile pack; quickly identify the HYAFF side that faces the wound; cut the HYAFF pad to size; staple / stitch / tape to the site; 7 days later check the healing progress through the transparent silicone layer on top
Pain reduction	Believed to reduce pain by proper coverage of exposed wound tissues. Caravaggi, et al, Wound Bed Preparation With a Dermal Substitute (Hyalomatrix® PA) Facilitates Re-epithelialization and Healing: Results of a Multicenter, Prospective, Observational Study on Complex Chronic Ulcers (The FAST Study), WOUNDS, August, 2011
Lower risk of Infection	Cover most wounds / use with or without bacteriocidal dressings
Less waste – better inventory control	Hyalomatrix has a 4 year shelf life and can be stored at room temperature, allowing you to keep it on the shelf and have it readily available as needed, with no special handling or storage requirements at a reduced risk of waste

CASE STUDY – POST SURGICAL WOUNDS

Frostbite case – The example shown is from international clinical experience with Hyalomatrix provided by referred physicians. 21 year-old man with severe frostbite to the lower limbs, due to an accident in the Argentinean Andes, where he remained at high altitudes for several days. (Fig 1)

Prof. Alberto Bolgiani, Fundaciòn Benaim, Hospital Alemàn, Buenos Aires, Argentina



DAY 1

Fig 2: The frostbite required the removal of the necrotic tissue and amputation of the toes 30 days post rescue. As a result, bones and joints at the amputation plane were particularly exposed. Hyalomatrix® was applied in order to protect such structures from desiccation, while a neo-tissue naturally developed on top of exposed bones and joint remnants.



DAY 6

Fig 3 & 4: Integration of the HYAFF® matrix during the healing phase.



DAY 10

Fig 5 & 6: Removal of the protective film. The HYAFF layer acted as a scaffold for cellular invasion and capillary growth. Proper wound management with Hyalomatrix allowed for an appropriate bed to support the split-thickness skin graft.



DAY 20

Fig 7: Taking of the skin grafts and complete healing at day 10 post-grafting.

In this case, Hyalomatrix was an optimal wound management choice for a post-surgical lesion, allowing the application of a skin graft in 10 days.

ORDERING INFORMATION

HYALOMATRIX	MISONIX PART NO.
10 x 10 cm	148318F
10 x 20 cm	148328F

¹ Costigliola, M. and Agrosi, M. Second-degree burns: a comparative, multicenter, randomized trial of hyaluronic acid plus silver sulfadiazine vs silver sulfadiazine alone. *Curr Med Res & Opin*, 2005; 21(8):1235-1240

² Ortonne, J.P. A controlled study of the activity of Hyaluronic acid in the treatment of venous leg ulcers. *J Dermatol Treat* (1996);7:75-81.

Hyalomatrix is contraindicated for patients with the individual hypersensitivity to hyaluronan and/or its derivatives and silicone. Hyalomatrix does not possess bacteriostatic or bactericidal properties and should not be used on infected wounds. Remove Hyalomatrix if wound infection is confirmed. Single use only.

