

FOAM

L-Mesitran® Product Information

Mechanics

L-Mesitran Foam combines the polyurethane foam with L-Mesitran Soft gel. The polyurethane foam forms a cushioning layer that protects the wound from mechanical stress while allowing drainage to pass. Simultaneously, this physical barrier prevents pathogens from entering the wound, while it absorbs excess of wound fluid and maintains a moist wound environment. The addition of L-Mesitran Soft to a polyurethane foam results in a bioactive dressing and establishes a regenerative environment. The beneficial antimicrobial and healing properties of L-Mesitran Soft enhance the wound healing process. The introduction of MGH to the wound creates an osmotic effect which further stimulates the release of exudate that is subsequently absorbed and retained by the foam layer. The honey prevents re-opening of the freshly formed granulation tissue during dressing changes.

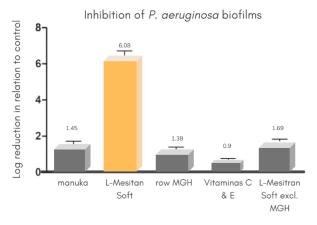


Figure 1. Synergistic activity of the L-Mesitran supplements.

Ingredients

- $\circ \ Polyure thane \ foam$
- o L-Mesitran Soft

Indications

- o Chronic wounds
- o Pressure ulcers
- o Superficial and partial thickness burns
- o Venous, arterial and diabetic ulcers
- o Fungating wounds
- o Acute wounds
- o Donor sites
- Surgical wounds
- o Cuts and abrasions

Contra-indications

Do not use on individuals with a known sensitivity to the dressing or its components. The dressing should not be used on: full thickness burns, deep, narrow cavities or sinuses.

Technical information

Film carrier: polyurethane foam
Coating: L-Mesitran Soft
Shelf life: 3 years
CE classification: class Ilb, sterile

Storage precautions

Store at room temperature 5°-25°C/41°-77°F. Store dry. Do not freeze. The storage conditions are detailed on the product cartons and tubes as symbols. Is sterile until opening.

Size	Box (primary packaging)	Box/ case	Order code	Reference
10x10cm	10 pcs	20	MES-F 1010	712.10





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Case: Leg ulcer

A 57-year-old woman with diabetes presented to the hospital with a superficial wound on the leg.

Methods

The wound was treated with L-Mesitran Foam. The dressing changes were dependent on the amount of exudate. The first dressing change was after 2 days and the last two changes after one week. Five L-Mesitran Foam dressings were used to achieve the presented results.

Results

Previously the infected wound was treated with poviodine iodine and silver dressing with no healing for a 6 months period. Since there were only local signs of infection, no systemic antibiotics were provided. Already after one dressing (Figure 2B), the sloughy tissue almost completely disappeared, and odour and pain levels strongly decreased. After 9 days of MGH treatment (Figure 2E), reepithelialisation and formation of granulation tissue clearly progressed, which continued over the next days (Figure 2F and 2G, day 12 and 16, respectively). After just 23 days, the wound was completely closed (Figure 2H).

Discussion

In combination with the foam dressing, L-Mesitran promotes the absorption of exudate by its osmotic activity. The attracted wound fluid will subsequently be absorbed by the hydrophilic L-Mesitran Foam dressing that has a high capacity to absorb and retain fluid. The Medical Grade Honey forms an important nutrient source for the proliferating skin cells and stimulates wound healing. The combination of L-Mesitran Soft with a foam dressing is a novelty that can help the healing of a wide variety of exuding wounds.

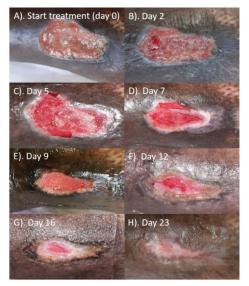


Figure 2. Wound healing progress.

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