

# Reoxcare

MAXIMIZING THE NATURAL WOUND HEALING PROCESS

ANTIOXIDANT  
WOUND DRESSING

## Clinical Cases



histocell  
NorayBG REGENERATIVE MEDICINE

Information aimed at health professionals

CE 0318

## What is Reoxcare?

Reoxcare is a novel wound dressing with unique antioxidant properties that promotes the natural wound healing process.

Innovative and patented design as a result of years of research in regenerative medicine at HistoCell.

Reoxcare is compliant with requirements established by Directive 93/42/CEE.



## NATURAL INGREDIENTS FOR A NATURAL HEALING PROCESS



Locust bean  
gum



Absorbent  
matrix



Curcumin +  
acetylcysteine



Antioxidant  
solution

### Components

Reoxcare has two components that give the product unique properties:

- 100% plant origin matrix with high absorption capacity.
- Hydration solution with antioxidant properties based on acetylcysteine and curcumin.

Each box contains:

- 1 absorbent matrix (9x4 cm)
- 1 antioxidant solution vial (10 ml)

## When to use Reoxcare?

Reoxcare is a distinctive dressing for the **inflammatory phase** of the healing process of complex wounds of diverse etiology.

Reoxcare is indicated for the treatment of both chronic and acute wounds in patients with high risk of wound chronification.

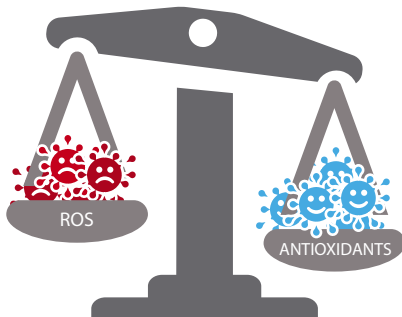


## What are the effects of Reoxcare on the wound?

Reoxcare combines the management of the exudate with its detoxification.

Thanks to its antioxidant composition, Reoxcare neutralises the excess of reactive oxygen species (ROS) in the wound exudate, allowing the activation of the wound and the progress to the following stages of healing:

- Elimination of non-viable tissues and biofilm control.
- Induction of the formation of excellent granulation tissue.
- Activation and advancement of perilesional edges.



## How to use Reoxcare?

- Hydrate the matrix with the solution and wait 1-2 minutes.
- Clean the wound.
- Protect perilesional skin with barrier film, according to health professional's criteria.
- Trim the matrix to adapt it to the shape of the wound bed and place the matrix on it.
- Use an appropriate secondary dressing for moist wound healing.
- Change the wound dressing twice a week (every 3-4 days).






*Reoxcare is a single use product. Do not use if package is open or damaged.  
Do not use in case of known hypersensitivity to one of its components.*

## What secondary wound dressing to use with Reoxcare?

Reoxcare is compatible with commonly used secondary wound dressings.  
Select the most appropriate one according to the level of wound exudate.

### Exudate level

### Secondary wound dressing

	Alginate Polyvinyl fibre Hydrocolloid hydrofibre Superabsorbent hydroactive dressing	 <i>In very exudative wounds, use an additional secondary dressing such as foam with adhesive silicone.</i>
	Polyurethane foam with adhesive silicone Hydrocolloid hydrofibre with silicone	
	Polyurethane film	 <i>In wounds with very low level of exudate, Reoxcare can be covered with amorphous hydrogel to maintain moisture and prevent it from drying.</i>

# Hypertensive ulcer



75-year-old patient with arterial hypertension.



15 years in evolution.



## Previous treatment

Conventional moist wound dressings.

## Treatment with Reoxcare

Reoxcare + microadhesive lipidocolloid matrix until wound closure.



Beginning



Week 1



Week 2



Week 3



Week 5



Week 6

# Diabetic foot ulcer



56-year-old patient with type 2 diabetes, chronic kidney disease, hypertension, nephropathy, obesity and apnea.



6 months in evolution.



## Previous treatment

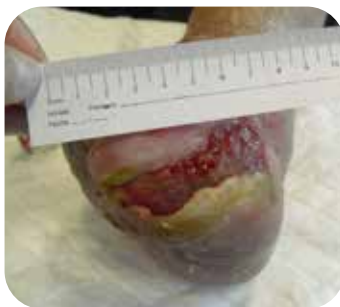
Hydrocolloid hydrofibre with silver.

## Treatment with Reoxcare

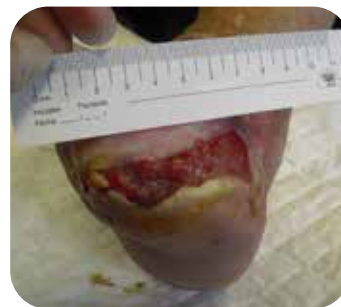
Reoxcare + hydrocellular dressing with adhesive silicone until wound closure.



Beginning



Week 1



Week 2



Week 5



Week 8



Week 14

# Neuroischemic diabetic foot ulcer



58-year-old patient with type 2 diabetes and inadequate glycaemic control.



## Previous treatment

Hydrocolloid hydrofibre and adhesive foam.

## Treatment with Reoxcare

Reoxcare + polyurethane foam and hydrofibre with adhesive silicone until wound closure.



3 weeks in evolution.



Beginning



Week 2



Week 3



Week 5



Week 7



Week 12

# Pressure ulcer



53-year-old patient with stroke and obesity.



## Previous treatment

Conventional moist wound dressings.

## Treatment with Reoxcare

Reoxcare + polyurethane foam and hydrofibre with adhesive silicone until wound closure.



4 months in evolution.



Beginning



Week 1



Week 2



Week 3



Week 4



Week 5



Week 6



Week 7



# Pressure ulcer



70-year-old patient with stroke, hypertension, type 2 diabetes, chronic renal failure and severe COPD.



7 months in evolution.



## Previous treatment

Collagenase and silver sulfadiazine cream.

## Treatment with Reoxcare

Reoxcare + polyurethane foam and hydrofibre with adhesive silicone until wound closure.



Beginning



Week 1



Week 1



Week 5



Week 7



Week 9

# Post-thrombotic venous vascular ulcer



80-year-old patient with arterial hypertension, type 2 diabetes, beta-thalassemia minor and microcytosis.



2 years in evolution.



## Previous treatment

Conventional moist wound dressings.

## Treatment with Reoxcare

Reoxcare + polyurethane foam until overcoming the inflammatory phase (week 4). Collagen dressings until wound closure (week 6).



Beginning



Week 4



Week 5



Week 6

# Varicose venous vascular ulcer



41-year-old patient with venous insufficiency, type 2 diabetes, chronic pancreatitis, portal hypertension, hyperlipidaemia and liver disease.



6 months in evolution.



## Previous treatment

Conventional moist wound dressings.

## Treatment with Reoxcare

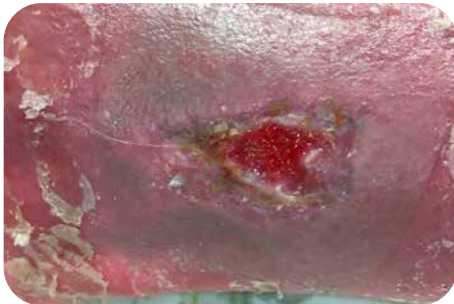
Reoxcare + polyurethane foam until overcoming the inflammatory phase (week 3). Collagen and hyaluronic acid dressings until wound closure (week 5).



Beginning



Week 2



Week 3



Week 5

# Burn caused by chemical agent



45-year-old patient with drug addiction.



## Previous treatment

Conventional and bioactive moist wound dressings.

## Treatment with Reoxcare

Reoxcare + hydrogel + polyurethane film until wound closure.



15 years in evolution.



Beginning



Week 2



Week 7



Week 14



Week 25

# Ischemic vascular ulcer



72-year-old patient with grade IV femoropopliteal arterial ischemia and caloric-protein malnutrition.



## Previous treatment

Hydropulsive absorbent and microadhesive dressing.

## Treatment with Reoxcare

Reoxcare + alginate + adhesive silicone foam until overcoming the inflammatory phase (week 14).  
Bioactive dressings until wound closure (week 50).



2 years in evolution.



Beginning



Week 4



Week 8



Week 12



Beginning



Week 4



Week 8



Week 12

# Ulcer due to calciphylaxis



80-year-old patient with chronic kidney disease on dialysis.



9 weeks in evolution.



## Previous treatment

Hydrogel and polyurethane foam.

## Treatment with Reoxcare

Reoxcare + hydrocellular dressing until wound closure (week 8).



Beginning



Week 1



Week 3



Week 4



Week 5

## Conclusions



**Reoxcare** is an effective treatment in both acute and chronic wounds.



**Reoxcare** can be used in ulcers and wounds of different etiology:

- Diabetic foot ulcers
- Pressure ulcers
- Hypertensive ulcers
- Venous ulcers with compressive treatment
- Ischemic ulcers
- Calciphylaxis ulcers
- Wound dehiscences
- Burns
- Traumatic wounds
- ...



**Reoxcare** prevents the chronification of wounds.



**Reoxcare** activates the wound, obtaining an optimal wound bed that favours the natural healing process.



**Reoxcare** has an excellent debridement capacity, both osmotic and autolytic.



**Reoxcare** avoids biofilm interaction in the healing process.



**Reoxcare** prepares the wound bed for other subsequent treatments such as NPWT, PRP, skin grafts or other specific treatments for the re-epithelialization phase.



**Reoxcare** increases the patient's well-being by relieving pain in the wound.

## Scientific publications and references

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- Castro B, Palomares T, Azcoitia I, Bastida F, Del Olmo M, Soldevilla JJ, et al. Development and preclinical evaluation of a new galactomannan-based dressing with antioxidant properties for wound healing. Histol Histopathol. 2015;30:1499-512.
- Fondo E, Gómez R, de Agreda A, Santiso E, Rodríguez V, Cerame S. Effect of oxidative stress control in hypertensive ulcers. Oral presentation. SEHER 8<sup>th</sup> Congress, Madrid, Spain (February 2019).
- Pérez del Pecho C, Larrazabal A, Pérez E, Aizpuru A, Basterretxea A, Iglesias E. Cicatrización de úlceras de pie diabético post-operatorias de componente neuroisquémico mediante el control del estrés oxidativo: serie de casos. Poster presentation. X Reunión Nacional Sección de Pie Diabético de la SEACV, Donostia-San Sebastián, Spain (December 2018).
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- Fondo Álvarez E, Santiso Casanova E, Harkot O, Castrillón Díaz C, Gutierrez Bandera N, García Jurado R, Cerame Perez S. Effect of a new antioxidant dressing on the activation of chronic wounds. Poster presentation. SEHER 7th Congress, Madrid, Spain (February 2018).
- Arizmendi Pérez M, Sánchez de Luna Rodríguez M. New antioxidant wound dressing healing effect on vascular ulcers. Poster presentation. AEEVH XXIX Congress, Gijón, Spain (June 2017).
- Arizmendi Pérez M., Sánchez de Luna Rodríguez M, López García E, Moreno Martín M. Healing efficacy of a new antioxidant wound dressing in ischemic wounds. Poster presentation. SEHER 6th Congress, Madrid, Spain (February 2017).
- Clinical trial EC-HR006.01. Clinical evaluation of HR006 antioxidant dressing for the treatment of chronic wounds - a multicentre prospective case series study.
- Clinical trial EC-REOX CARE.UPD. Proof of concept: prospective study of antioxidant wound dressing Reoxcare to improve healing in diabetic foot ulcers.
- Clinical trial EC-REOX CARE.UPP. Proof of concept: prospective study of antioxidant wound dressing Reoxcare to improve healing in pressure ulcers.
- Instructions for use SC01402220518. Rev. date: May 2018.