INSTRUCTIONS FOR USE:

» Debride or surgically clean wound as needed.

» Clean wound area with normal saline solution. Other cleaning agents are not recommended. Remove excess moisture.

» Apply IPM Wound Gel liberally to the surface area and margins of the wound.

» Cover area with a non-stick gauze dressing (E.g. Telfa or similar).

» Cover dressing with a self-adhesive bandage or suitable tape.

» The above process should be repeated daily.

IPM WOUND GEL™  RX Only
FOR EXTERNAL USE ONLY

Description:
IPM Wound Gel™ is a combination of emollients and sodium hyaluronate which function to maintain tissue hydration and support the healing process. IPM Wound Gel™ has been demonstrated to be of value in the management of certain skin ulcers and wounds. Sodium hyaluronate is a naturally occurring molecule found in various body tissues. The sodium hyaluronate present in IPM Wound Gel™ is derived from avian sources.

Ingredients:
Sodium Hyaluronate (2.5%), Hydroxyethylcellulose, Methylparaben, Polyethylene Glycol, Water.

Indications and Usage:
IPM Wound Gel™ is suitable for exuding wounds such as leg ulcers, pressure ulcers, diabetic ulcers, for the management of wounds that are prone to bleeding such as wounds that have been mechanically or surgically debrided, and to aid in the healing of minor abrasions and cuts.

Contraindications:
IPM Wound Gel™ is contraindicated in persons with a known hypersensitivity to any of the ingredients in the formulation.

Warnings:
Prolonged use of the product may give rise to sensitization phenomena. Should this occur, discontinuation of use of the product is recommended. Consult a physician.

Precautions and Observations:
• IPM Wound Gel™ is for external use only.
• If signs of infection become apparent, consult a physician.
• Keep this and all medications out of the reach of children.

Supportive Care:
Appropriate supportive measures should be taken when indicated, e.g. the use of graduated compression bandaging in the management of various leg ulcers, or pressure relief measures in the management of pressure ulcers. The control of blood glucose as well as appropriate advice regarding pressure relief measures should be provided to patients with diabetic foot ulcers. Colonization of chronic wounds is common and the use of IPM Wound Gel™ should be considered. IPM Wound Gel™ may be used on infected wounds under medical supervision and in conjunction with other appropriate therapy and frequent monitoring of the wound by the healthcare professional.

Instructions for Use:
IPM Wound Gel™ should be applied after the ulcer or wound is cleaned with normal saline solution. Other cleaning agents are not recommended. Debridement (surgical cleaning) of the ulcer or wound may be performed at the discretion of the healthcare professional. Excess moisture should be removed using dry gauze. IPM Wound Gel™ is applied liberally into the cavity of the ulcer or wound and to the surrounding area. After applying IPM Wound Gel, a non-stick gauze dressing (Telfa pad or other suitable non-stick pad) should be placed on the wound site. Following the application of the non-stick gauze dressing, a self-adhesive bandage or suitable tape adhesive should be wrapped over the non-stick gauze dressing. The entire process of wound cleaning, applying IPM Wound Gel™, the application of a suitable covering and the bandaging of the area should be repeated daily.

How Supplied:
IPM Wound Gel™ is available in a four pack of 10 gram tubes with tamper evident seal and a Physician Sample is provided to patients with diabetic foot ulcers. Colonization of chronic wounds is common and the use of IPM Wound Gel™ should be considered. IPM Wound Gel™ may be used on infected wounds under medical supervision and in conjunction with other appropriate therapy and frequent monitoring of the wound by the healthcare professional.

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STUDY DESIGN:

27 Patients (10 males, 17 females, average age 63.8 years)

Inclusion Criteria:
• Non-healing ulcers of at least one month’s duration.
• Ulcer no larger than 4 cm.

Types of ulcers included:
• Diabetic (20%)
• Venous (24%)
• Peripheral vascular (10%)
• Surgically related (10%)
• Peristomal (6%)
• Decubitus (4%)
• Neuropathic/neuropotetic (4%)
• Other (22%)

Duration of study: 16 weeks.
(Some patients followed to 24 weeks.)

RESULTS:

88% (44 of 50) ulcers treated healed by the end of the study.

Median healing time 9.5 weeks (Range 1-24 weeks).

100% Non-venous, non-diabetic ulcers healed during study.

Diabetic Ulcers: Most resistant to healing.
• 70% healed in study, 100% improved.
• Median duration of healing time longer (3 weeks).

IPM Wound Gel™ is a combination of emollients and sodium hyaluronate (2.5%) for the management and healing of:

- Decubitus (pressure) ulcers
- Diabetic ulcers
- Wounds prone to seeping and bleeding
- Surgical wounds (post-operative incisions and donor sites)
- Leg ulcers (including venous stasis ulcers)
- Second degree burns
- Mechanically or surgically debrided wounds

IPM Wound Gel™ is a combination of emollients and sodium hyaluronate (2.5%), hydroxyethylcellulose, methylparaben, polyethylene glycol, water.

IPM Wound Gel™ is a combination of emollients and sodium hyaluronate. Hyaluronic acid occurs naturally in body tissues and functions to maintain appropriate hydration and support the healing process.

Indicated for the management and healing of decubitus (pressure) ulcers, diabetic ulcers, wounds prone to bleeding, leg ulcers (including venous stasis ulcers), surgical wounds (post-operative incisions and donor sites), second degree burns, and mechanically debrided wounds.

- These lesions are typically associated with poor circulation and poor skin integrity.
- These conditions can result in tissue death, ulceration, and difficult to treat wounds.

IPM Wound Gel™ is a combination of emollients and sodium hyaluronate (2.5%). IPM Wound Gel™ is a combination of emollients and sodium hyaluronate for the management and healing of:

- Gel forms a protective barrier over the wound.
- Increases hyaluronic acid levels which enhance wound healing.
- Contains a combination of emollients that help restore and maintain appropriate hydration and balance within the tissue to promote healing.

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