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Results from practical studies



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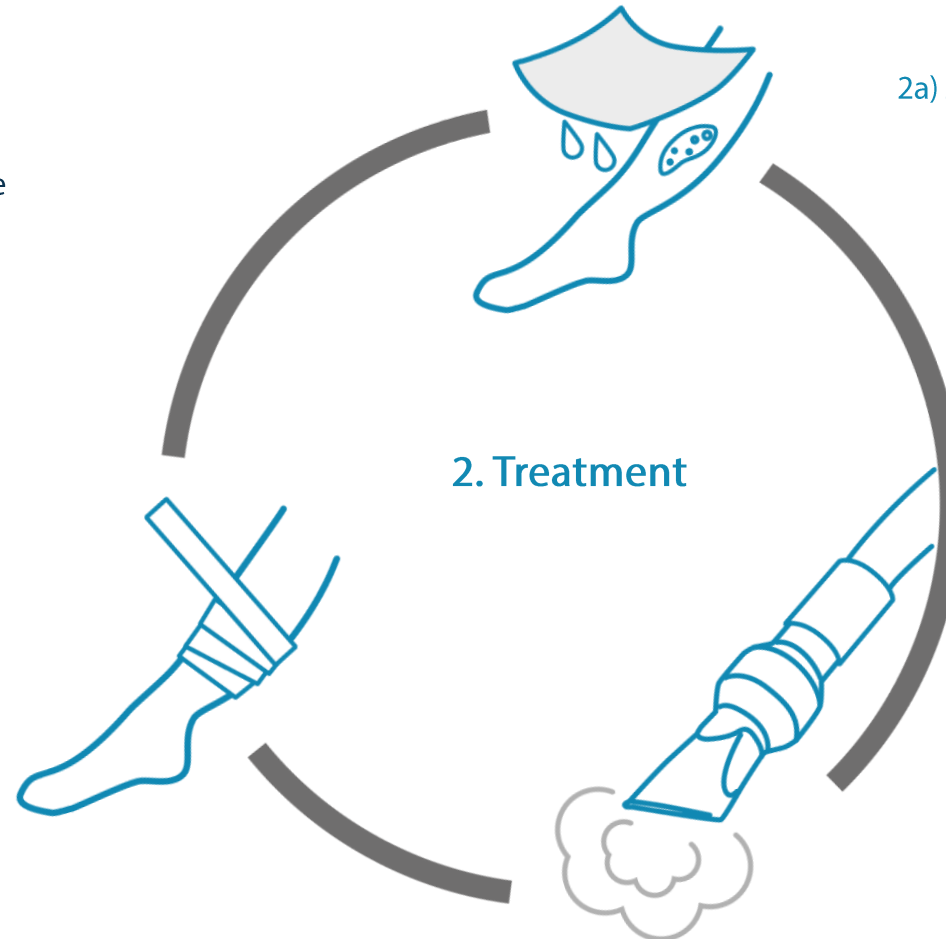


Procedure in the practical studies - treatment of the wound 2x a week

PLASMO[®]HEAL as an integral part of modern wound care

1. Preparation

- Fill water tank with operating water
- Place disposable applicator on the hose
- Connect the device to the power



2a) Mechanical cleaning according to appropriate standard

2b) Application of PLASMOHEAL over 3 minutes at a distance of approx. 5-10 cm from the wound.

2c) Cover with dressing & secondary dressing according to appropriate standard

3. Post treatment

- Remove applicator
- Clean the hose from the outside by wiping disinfection
- Switch off device

Cold plasma aerosol

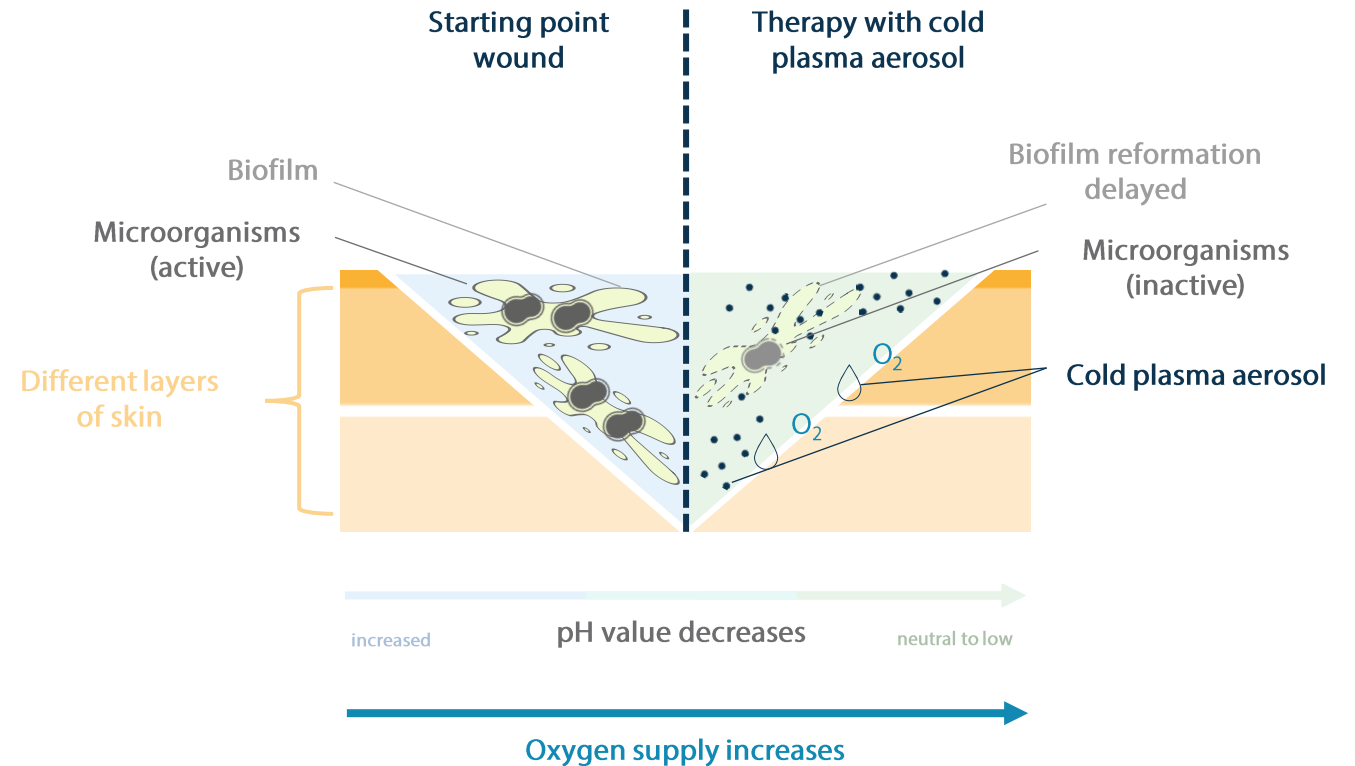
Disinfects the wound & delays the reformation of the harmful biofilm

Starting point wound:

- Tendentially increased pH value provides optimal milieu for pathogenic microorganisms
- Wound bed is covered with biofilm

By therapy with cold plasma aerosol:

- + Microorganisms are eliminated
- + pH value decreases
- + Reformation of biofilm is delayed
- + Better oxygen supply
- + Moist milieu & longer "adhesion" of the cold plasma in the wound



Example 1

14 weeks after bypass surgery



Day 0

- a lot of exudate (bloody, greenish)
- Wound bed mostly occupied, granulation, adipose tissue
- Infection with Gram bacteria



Day 14

- Decrease in exudate
- Removal of fibrin deposits, granulation
- slightly reddened



Day 28

- Epithelization
- No signs of infection
- Almost complete wound closure with beautiful scarring

Example 2

2 weeks after bypass surgery



Day 0

- A lot of exudate
- Wound bed heavily occupied
- Fibrin
- 0.5 cm below skin level



Day 21

- Moderate exudate
- Wound bed mostly clean (little fibrin)
- Granulation up to skin level



Day 28

- Moderate exudate
- Granulation and epithelialization

Example 3

7 weeks old venous leg ulcer



Day 0

- A lot of exudate
- Redness, amount of exudate, pain
- Wound bed covered
- Redness, slight maceration



Day 14

- Moderate exudate
- Wound bed: slightly occupied, granulation, insertion of epithelialization
- no local signs of infection



Day 28

- Wound bed almost completely healed
→ Decrease in signs of infection and reduction of the amount of exudate after a short time; Sharp decrease in wound area

Additional therapy:
Compression

Example 4

5 weeks old venous leg ulcer



Day 0

- a lot of exudate (yellowish, cloudy)
- Wound bed covered
- Redness, pain
- Wound area slightly macerated



Day 14

- Exudate moderate
- granulation, significant reduction of wound area
- No more signs of infection



Day 28

- Granulation, epithelialization
→ rapid decrease in the wound area, pain is significantly reduced after the 2nd treatment

Additional therapy:
Compression

Example 5

14 weeks old venous leg ulcer



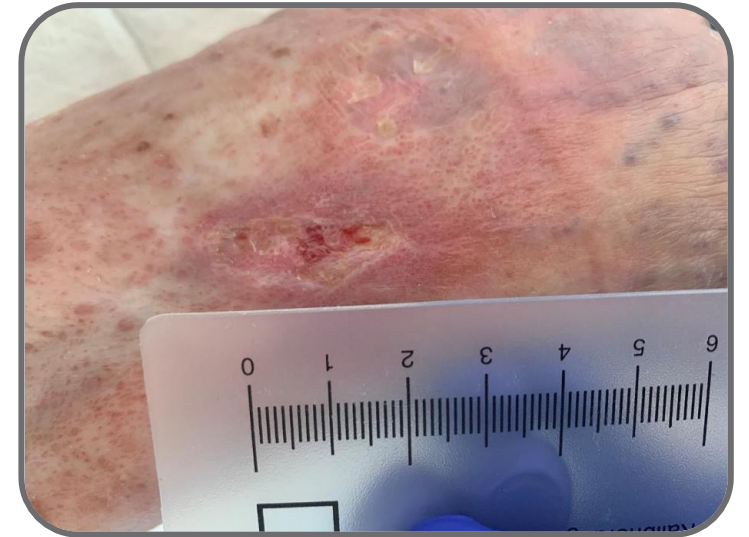
Day 0

- moderate exudate
- no epithelialization
- Wound bed slightly covered



Day 14

- Low exudate
- Mostly epithelialization



Day 28

- Wound bed almost completely healed
→ Almost complete wound closure; Due to rapid reduction of the wound area, quantity of exudate decreases

Example 6

5 weeks old venous leg ulcer



Day 0

- little exudate
- occupied wound bed
- local redness



Day 14

- Wound bed occupied, granulation
- no local signs of infection



Day 28

- Rapid reduction of signs of infection; removal of the coverings; Unusually rapid epithelialization almost to wound closure

Additional therapy:
Compression

Example 7

3 weeks old venous leg ulcer



Day 0

- moderate exudate
- dark fibrin deposits, redness



Day 14

- moderate exudate
- wound bed lightly occupied, granulation,
- no local signs of infection



Day 28

→ Rapid decrease in plaque and signs of infection; rapid increase in epithelialization.

Additional therapy:
Compression

Example 8

9 weeks old ulcer cruris arteriosum



Day 0

- moderate exudate,
- Wound bed: necrosis, fibrin, granulation
- Redness and pain



Day 21

- Low exudate
- Wound bed: fibrin, granulation
- No redness and no pain



Day 35

- Low exudate
- Wound bed: granulation, mostly epithelialization

Example 9

11 weeks old ulcerus cruris mixtum



Day 0

- A lot of exudate
- Wound bed: fibrin, granulation
- Wound environment: unstable skin conditions



Day 21

- Low exudate
- Wound bed: fibrin, granulation, epithelialization
- Wound environment: more stable skin conditions



Day 28

- No exudate
- Epithelialization
- Skin quality significantly improved

Example 10

3 weeks old toe ulcer (peripheral arterial occlusive disease stage II)



Day 0

- Exudate a lot
- Wound bed occupied, necrosis
- Redness, pain
- Infection with Gram bacteria



Day 21

- Exudate moderate
- No toppings
- Granulation
- No redness, no pain



Day 35

→ Almost complete wound closure

Example 11

5 weeks old diabetic ulcer



Day 0

- Exudate moderate
- Fibrin coating, granulation
- Reddening
- The edge of the wound is slightly macerated



Day 14

- Exudate moderate
- Granulation in the wound bed
- No more signs of infection
- Wound area without special features



Day 28

→ Rapid decrease in signs of inflammation and rapid onset of epithelialization

Example 12

17 weeks old Malum perforans Plant., DM II –

MVZ recommendation: Amputation of the 5th toe strand



Day 0

- a lot of exudate
- Granulation, wound pocket (approx. 2 cm) distal
- Wound edge macerates, surroundings slightly keratinized



Day 14

- Low exudate
- Large-scale epithelialization, granulation
- no wound pockets, superficial
- Surroundings slightly keratinized



Day 28

→ Complete wound closure

Further therapy recommendation:
regular podiatric treatment and adequate footwear

Example 13 (1)

3 weeks after amputation



Day 0

- Exudate moderate
- Fibrin coating, granulation
- No local signs of infection



Day 14

- Exudate moderate
- Fibrin coating, granulation and epithelialization



Day 28

- After a very short time, reduction of the wound area and increase in epithelialization

Additional therapy:
Pressure relief through adequate footwear

Beispiel 13 (2)

Amputation



Day 75

- Complete healing
- Structured scar tissue
- No pain
- No sensory disturbances

Example 14

4 weeks - metal removal after infection of the implant



Day 0

- A lot of exudate
- Redness, pain, smear: staphylococci, streptococci
- Weeping, inflammatory, eczematous
- Wound bed covered



Day 1

- Moderate exudate
- slight redness at the edge of the wound
- significant improvement in the condition of the skin



Day 3

→ After 3 days of use with cold plasma, skin condition is almost normal

Example 15

3 traumatic injury - skin transplant



Day 0

- moderate exudate
- no epithelialization
- Wound bed covered
- Area: dry, scaly, wound edge edematous



Day 14

- Moderate exudate
- Granulation, epithelialization

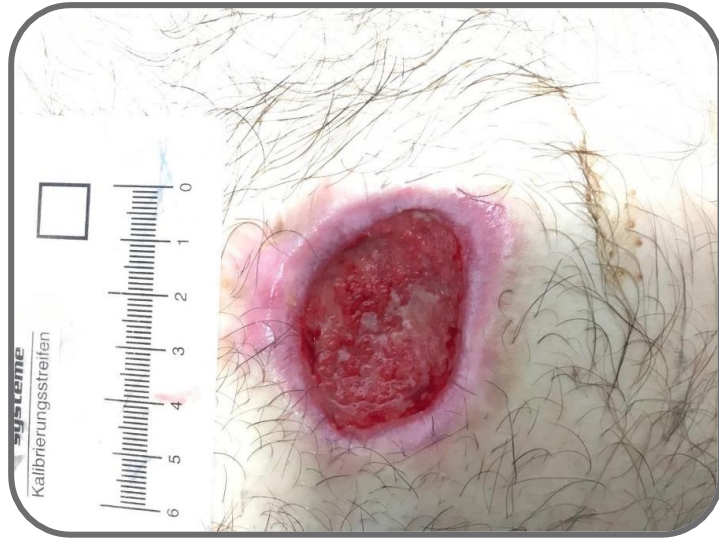


Day 28

- Rapid cleansing, granulation and epithelialization of the wound; Almost complete closure during the observation period

Example 16

3 weeks old; traumatic due to self-inflicted injury to abdomen



Day 0

- a lot of exudate
- Signs of infection gram sticks
- Approx. 1 cm deep



Day 14

- moderate exudate
- granulation, progressive epithelialization
- no local signs of infection



Day 28

- Granulation, increasing epithelialization, wound area significantly smaller
- Rapid decrease in microbial load; conspicuously rapid epithelialization

Example 17 (1)

2 weeks old wound after removal of squamous cell carcinoma & split skin graft (rejection)



Day 0

- Squamous
- Removal and coverage with mesh graft
- Total detachment of the skin graft



Day 30

- 50 % new epithelium
- Occupied, partly encrusted
- Bony structure palpable



Day 60

- Progressive epithelium and granulation
- Bony structure palpable

Example 17 (2)

Wound after removal of squamous cell carcinoma & split skin graft (rejection)



Day 90

- 75 % epithelialized
- Granulation
- Bony structure palpable



Day 120

- 90% Epithelialized
- Tissue over bony structure



Day 150

- Further epithelialization
- Bony structure no longer palpable
- Almost healed with OWN SKIN

Example 18

3 weeks post radiation - Vulvar carcinoma



Day 0



Day 9

→ Significant improvement after only four therapy with PLASMOHEAL

Example 19

5 weeks old decubitus grade III



Day 0

- A lot of exudate
- Wound bed: Fibrin
- Depth: 0.5 cm
- Wound area: macerated & reddened



Day 14

- Low exudate
- Wound bed: granulation, fibrin
- Depth: already skin level
- Wound environment stabilized



Day 21

→ Epithelialization, beautiful scarring

Special example 1

Healing process acne



Day 0

Initial situation



Day 4

After 2nd treatment



Day 10

After 4th treatment

Procedure :

1. Apply compress soaked with Actimaris to the skin. ActimarisForte for 3 minutes or Actimaris sensitive for approx. 10 minutes.
2. Place the compress under the nose so that the aerosol is not inhaled.
3. Application of PLASMO®HEAL in areas with acne, e.g. on left and right cheek, forehead (3x 3 minutes, 9 minutes in total)
4. Daily cleansing with Actimaris sensitive (analog to a facial toner)
5. Application of PLASMO®HEAL 2x per week

Special example 2

Healing process acne



Day 0



Day 3

Procedure (daily):

1. Cleansing with Actimaris sensitiv (application analogous to a facial toner).
2. Place a compress under the nose so that the aerosol is not inhaled.
3. Application of PLASMO®HEAL in the areas with acne (here: on the left & right side of the face and on the forehead - corresponds to 3 x 3 minutes).

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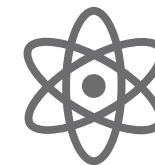
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Let's rethink hygiene together



PLASMO[®]HEAL

Wound therapy

PLASMO[®]HAND

Hand disinfection

PLASMO[®]AIR
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Air and surface disinfection

