

 spincare™

For burns and doner sites


G&N

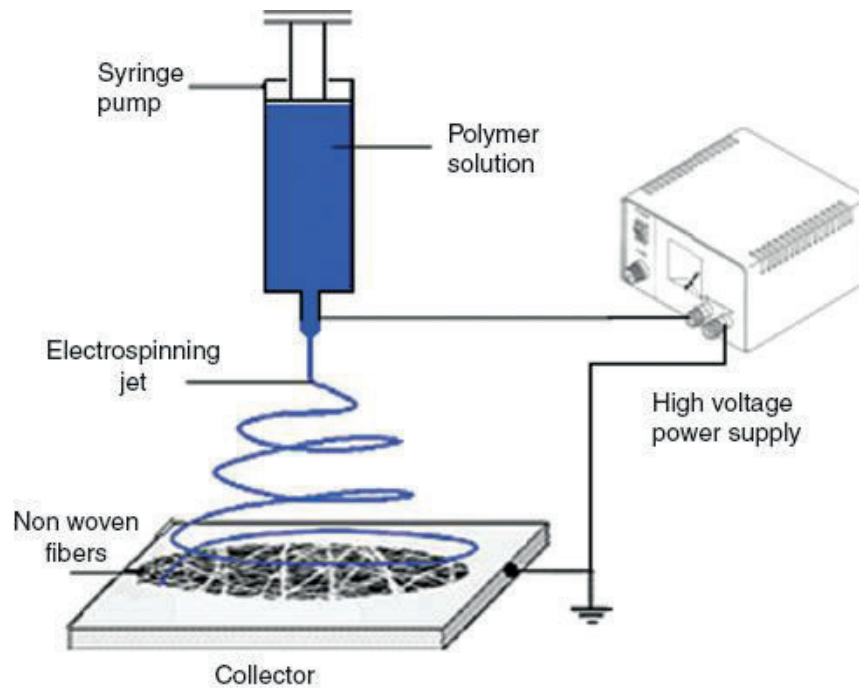
Introducing the Spincare Wound Care System

- Spincare Wound Care System has already proven very effective for the treatment of burns, especially in hard-to-dress areas and pediatrics.
- This document will provide an overview of the Spincare technology and how it can improve treatment of chronic / hard-to-heal wounds, dermatological disorders, and burns.

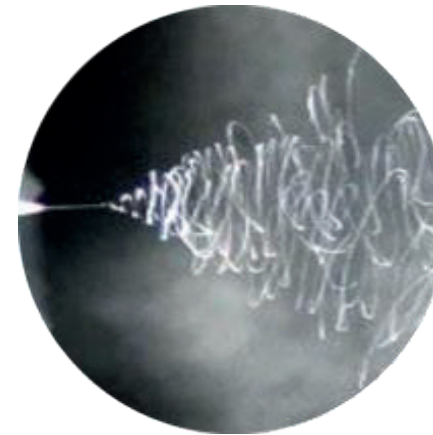


What is Electrospinning?

A method of producing nanofibers from natural/synthetic polymer solutions

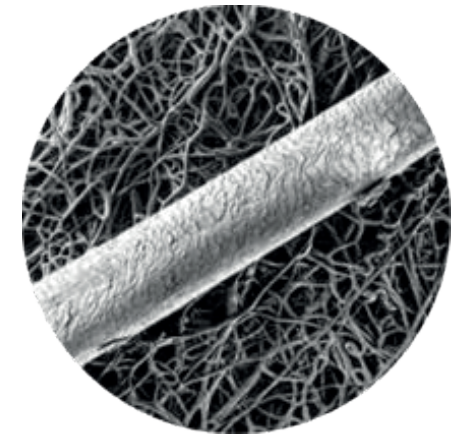


Electrically charged polymer solution is injected into an electrostatic field resulting in a stream of nanofibers.



A jet of polymer nanofibres

The nanofibers form a multi-layer matrix with unique structure and high surface area.



A human hair on the background of an electrospun nanofibrous matrix

Clinical indication

Wound type

Burns, Donor Sites, superficial to partial thickness clean wounds.

Size and shape

One-size-fits-all. One ampule covers ~300cm²

Wound depth

Superficial and partial thickness

Patient age

All ages

Infection

Clean wounds



Spincare functionality



Day 0 - Pre-application

Certain areas of the body are notoriously hard to dress (face, hands, neck, shoulder, joints etc.)

Spincare makes this quick and easy!



Day 1

Spincare matrix will adhere perfectly to the wound, covering all exposed tissue. No fixation required.

Matrix will gradually become transparent, allowing constant visual inspection.



Day 7

The Spincare matrix will spontaneously peel off when patient's own skin has regenerated underneath the matrix.

In chronic wounds this can be seen on wound edges as wound contracts.



Day 14

Minimal scarring and high skin quality is often reported, as nanofibrous structure provides good cell migration, facilitating wound healing and skin regeneration.

Getting to know the Spincare System

The Spincare Device



- 1 Laser indicators
- 2 IR sensors
- 3 Distance bar
- 4 Charger
- 5 Active bar
- 6 Cover
- 7 Docking station

Getting to know the Spincare System

The Spincare Kit



- 1 Box of 25 Spincare Kits
- 2 Ampule
- 3 Cannula
- 4 Spincare Kit box
- 5 Patient cable

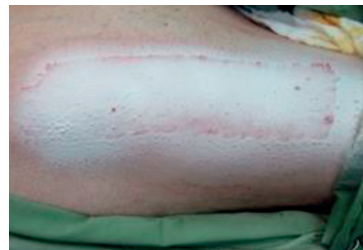
Spincare matrix

Transparency allows for constant wound assessment

- Healing progress made visible through the Spincare Matrix layer.
- Sheba Medical Center, Israel, 58Y old male with dyslipidemia and diabetes mellitus type 2. Surgical excision of massive Squamous Cell Carcinoma (SCC) on the buttocks, required skin graft transplantation.



Day 0
Pre-application



Day 0
Post-application



Day 4



Day 14



Month 3

Case study one

Perfect coverage of hard-to-dress area

- Male aged 41, no previous medical history.
- 2nd degree mixed superficial to intermediate burn (radiator boiled water).
- Spincare layer applied with excellent adherence and fit to this hard to dress area. No secondary dressing applied. Physiotherapy initiated during healing process.



Day 0 - Pre-application



Day 1



Day 7



Day 14

Photos: Rambam Medical Center, Israel

Case study two

Perfect coverage of hard-to-dress area whilst maintaining mobility

- Male aged 44.
- Flame superficial to intermediate burn.
- Milton/Saline prior to Spincare treatment, no secondary dressing.



Day 0
Pre-application



Day 0
Post-application



Day 4



Day 14



Month 6



Month 6

Case study three

Perfect coverage of hard-to-dress area whilst maintaining mobility for faster return to active life

- Female aged 60.
- 2nd degree scald superficial-to-intermediate burn, 5% TBSA after spilling boiling water over the lateral left thigh.



Day 0
Pre-application



Day 0
Post-application



Day 4



Day 14



Month 3



Month 6

Photos: Sheba Medical Center, Israel

Treatment protocol: burns and donor sites

Significant exudate expected

- 1** Clean the wound site according to standard of care.
- 2** 3D-print Spincare matrix onto wound - overlap healthy peri wound skin area with +/- 2cm.
- 3** After application - gently pad down the matrix onto the wound (using gauze/ NW pad).
- 4** Cover Spincare matrix (including peri wound skin) with a non-sticking interface layer* that is cut to the size of the wound.
- 5** Based on exudate levels - place an appropriate absorbent dressing on top of non-sticking interface layer.
- 6** Leave Spincare matrix and interface layer in place until exudate levels drop off. During that period only change absorbent dressing when needed. Clean on top of interface layer as needed/ desired.
- 7** Remove interface layer and absorbent pad when exudate level drops off - leave Spincare by itself.
- 8** Spincare matrix peels off spontaneously when burn/donor site is healed.

E.g. Rylon-1, Mepitel, Urgotul, Atrauman Silicone, curea P2

Treatment protocol: burns and donor sites

Limited exudate expected

(e.g. face, hands, 48-72h delayed application)

- 1** Clean the wound site according to standard of care.
- 2** 3D-print Spincare matrix onto wound
- overlap healthy peri wound skin area with +/- 2cm.
- 3** No secondary dressing needed.
- 4** Spincare matrix peels off spontaneously when burn/donor site is healed.

Handling the Spincare device

- Keep the Spincare in its docking station for overnight charging.
- Make sure the Spincare tip is clean - with no residues of solution.
- Load the Spincare Ampule immediately before use.
- Connect the patient cable - 50cm distant to treatment location.
- Before start, make sure there is a drop at the end of the cannula; wipe off the drop prior to starting the application.
- When application is complete - clean the tip of the cannula and take the syringe out of the Spincare; make sure the Spincare metal tip is clean - with no residues of solution.
- Discard of the ampule - remember it is for single patient/single use.

Treatment Tips

- Ensure the Spincare matrix covers the wound and frame by about 2-3 cm.
- Keep the “treatment surrounding” area dry especially around the wound.
- The Spincare matrix is transparent allowing wound assessment.
- Secondary dressing is not required; it is recommended only during the exuding phase.
- Patient can shower regularly 24-48 hours post-treatment.
- Spincare matrix should not be removed until complete healing; unless indicated by wound condition.
- If there is colored secretion (and no other infection signs) on the Spincare matrix - wash with a sterile solution but do not remove the matrix.
- If there is a significant accumulated secretion underneath the matrix - wash the wound and re-apply Spincare matrix if required.
- If needed, moisturize on top of the Spincare matrix.
- Allow the matrix to peel off by itself.

Most common mistakes made

- When taking the lid off ampule – hold on plastic, NOT ON THE GLASS! The same when you put on the cannula!
- When pressing plunger forward – don't 'over-prime' (not too much pressure).
- Keep environment dry (e.g. no wet towels in vicinity of wound).
- Keep device pointed downwards during application.
- Laser point is a distance tool – NOT an aiming/'sniper' tool (picture right).
- As soon as application is finished, remember to offload pressure on the ampule.



White (matrix) versus laser dot



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