What is a **REGENERATIVE MEDICINE?**

Regenerative Medicine provides a unique framework for wound care management: MEBT through MEBO Ointment!

Guidelines can be as easy as ONE to FOUR:

- 1. Eliminate causative factors
 Ex. Repositioning
 - Risk Factor management Offloading methods
- 2. Provide adequate nutrition, nutritional support and systemic treatment
- 3. Remove nonviable tissues by debridement
- 4. Cleanse and promote regeneration through MEBO ointment

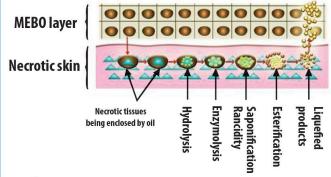
MEBO solved the 4 major difficulties of burn and wound management.

- 1. Relieves PAIN
- 2. Decrease risk for INFECTION
- 3. Prevents PROGRESSIVE NECROSIS
- 4. Minimizes or prevents SCAR FORMATION

MEBO principles in BURN and WOUND Management

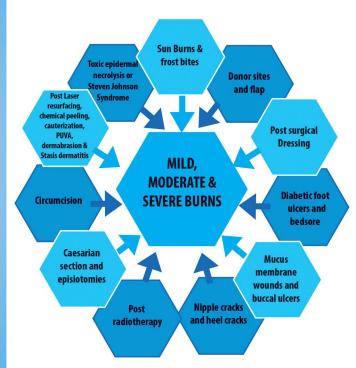
- Superior results are evident when MEBO is applied at earliest possible time (within 12 hours of injury)
- Avoid the use of water (including normal saline), disinfectants and other topical antibiotics to treat the wounds.
- Avoid causing pain, bleeding or any secondary injuries when cleaning and during dressing change
- Timely remove the liquefied products, necrotic tissues, exudates and remnant MEBO before smearing a new layer of MEBO.

MECHANISM OF LIQUEFACTION AND DISCHARGE NECROTIC SKIN



- Oil drop
- Necrotic tissue granules
- Tiny drops enclosing necrotic tissues

SUCCESSFUL APPLICATIONS



Before and After Application

Before treatment

After treatment

CASE 1 : Burn Treatment

Diagnosis: Superficial Second Degree Burn, Healing time after 14 days.





CASE 2 : Diabetic Foot Ulcer Treatment

Diagnosis : Diabetic Foot Ulcer





CASE 3: Electric Injury Treatment

Diagnosis: Electric Injury via MEBT/MEBO





CASE 4 : Bedsore Treatment

Diagnosis: Bedsore Treatment, Healed after 3 months.





USES:

For topical treatment of the following:

- Chemical burns
- Superficial first degree burn
- Adjunctive treatment for second and third degree burns
- Acute and chronic wounds
- Presure ulcer(bedsore)
- Diabetic wounds
- Traumatic wounds
- Corneal burn
- Vascular wounds
- Traumatic keratitis
- Post operative sites

Recommended Treatment Guide

Type of Wound	Exposed	Semi-Exposed	Bandage
BURN WOUND	_/_		
First 24 - 72 hours	/	/	/
After 72 hours	1		
<50%, 1st degree - 2nd degree	/ /	/	-
<50%, 3rd degree - 4th degree	//	/	/
>50%, 1st degree - 2nd degree	V	/	
>50%, 3rd degree - 4th degree	-	/	/
TRAUMA WOUND			
First 24 hours	/	/	/
After 72 hours		/	/
ULCERATED WOUND			
Stage 1 - 2	/	/	/
Stage 3 - 4		/	/

Note: Surgical management can be done when wound has granulated. If patient is not a viable candidate for surgery, treatment can be continued with MEBO bandage therapy. Systemic therapy and nutritional support should be carried out depending on patients need.







A Breakthrough in Burn and Wound treatment...

ACU HERB

Your ONE unique solution



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