

EPIGLU®

THE MOST BRILLIANT INVENTION SINCE BAND-AID ADHESION **INSTEAD OF SUTURES!**

NOWADAYS, WOUND TREATMENT IS NOT THE SAME AS IT WAS 100 YEARS AGO



Fresh deep laceration at the lip.



After the manual adaptation of the wound edges the wound is fixated with a drop of EPIGLU® and then covered with a thin, smoothed out layer of the adhesive.



Already 11 days after the adhesion the wound is hardly visible.

Many emergency rooms, private practices and hospitals just could not imagine wound treatment without adhesion and many physicians would never go on holiday without a supply of wound adhesive for themselves and their families.

When a laceration at the lip is treated traditionally the result often is not cosmetically satisfying. This differs much from the quick and easy treatment with EPIGLU®.



Are all tissue adhesives the same?

There are different acrylate tissue adhesives which differ in polymerization and firmness. EPIGLU® is an Ethyl-2-Cyanoacrylate which polymerizes very quickly and closes even wounds which are under tension safely.

Are tissue adhesives more expensive than traditional wound treatment with sutures?

The common opinion that tissue adhesives are always more expensive than sutures is not valid for EPIGLU®. This Ethyl-2-Cyanoacrylate tissue adhesive is available in 3g tubes and as Single Dose Dosette with 0.3 ml/cc. The 3g tubes are re-usable. Because each 3g tube is sufficient for at least 20 wound treatments, the cost per treatment is lower than for traditional wound treatment with sutures. Also the Single Dose packages in Dosettes with 0.3 ml/cc adhesive are still cheaper than the treatment with sutures. It also should be considered that after a smaller or bigger accident no anesthetic is necessary and there is no need for a second appointment to remove the stitches.

How long does it take to treat a wound traditionally or with adhesive?

Experiences prove that the traditional wound treatment takes approx. 50 minutes (including inspection of the wound, anesthesia, sewing, clearance of the work equipment, sterilisation of the instruments and removing the stitches), meanwhile the adhesion takes 10 minutes only.

Why do no infections occur to the re-usability of EPIGLU® from tubes?

EPIGLU® is applied with disposable dispensing pipettes or with the Single Dose Dosettes which are thrown away after application. EPIGLU® is no culture medium for germs and even has an inhibitive effect on existing germs. Sterile application sets for the operation theatre are available. The EPIGLU® solution is sterile (Medical Device Services May 2008 / MedCert October 2008).

For how long EPIGLU® is known on the market and where is it used?

In December 1995, EPIGLU® has got the approval and it is used within Germany and many other countries. Samples are shown on our homepage www.meyerhaake.com. Allergic reactions or other occurrences were not observed so far. At the Tehran Burn Clinic skin meshes had been adhered at the edges very successfully instead of sewing them. The time of operation could be reduced about 50%, complications did not occur.

When EPIGLU® is applied is it possible to abstain from subcutaneous sutures?

No, basically all acrylate tissue adhesives are for the closures of skin surfaces only. If because of the situation subcutaneous sutures are necessary, nevertheless, the closure of the skin can be performed with EPIGLU®.

Is it possible to treat long wounds which are under tension with EPIGLU®?

Yes, because EPIGLU® is an Ethyl-2-Cyanoacrylate. These acrylates are more tear-proofed than other acrylate compounds. To our knowledge we are the only company on the world producing a tissue adhesive made of Ethyl-2-Cyanoacrylate. Irrespective of the length, all cuts, lacerations and surgical incisions can be closed with EPIGLU® if they do not bleed any more, are not infected and not older than 6 hours. EPIGLU® is particularly suitable for the treatment of wounds after removal of skin lesions or excisions (basaliomas, nevi, senile freckles, keratosis, xanthelasma, warts and many other more). EPIGLU® can also be applied onto the oral mucosa and the external genitalia. Bites and abrasions should not be treated with adhesives.

Why should EPIGLU® be applied in several layers?

Because all tissue adhesives peel off easier from the healthy skin which surrounds the wound it is safer to apply 2 to 3 thin layers, each overlapping the other, after the primary wound adhesion. With the pipettes or the twisted off upper part of the Dosettes it is possible to smooth out the adhesive thinly.

How fast does EPIGLU® polymerize?

The first layer which was directly applied onto the wound hardens in approx. 10 seconds. The wound edges are now fixated already safely. Other layers harden in 2 to 3 minutes.

What to do if after some hours the patient has got an unpleasant "throbbing" feeling?

It must be assumed that the wound had been inflamed or that there had been foreign objects before the adhesion. In this case, once it has set, EPIGLU® can be peeled off.

Does EPIGLU® has to be removed after the wound healing is completed?

No, with the formation of new skin lamellae (after 5 to 10 days) EPIGLU® detaches itself from the skin like scab.

Why do wounds heal faster after adhesion?

Wounds closed with Ethyl-2-Cyanoacrylate tissue adhesive are protected from infections. Also the wound edges are closely laying side by side for the whole length of the wound and, therefore, the healing process is accelerated. Ugly scars are avoided and according to our experience keloids develop rarely. Allergic reactions are not known.

Can EPIGLU® be used additionally for already sutured wounds?

If a wound had been treated with sutures already it is possible to apply EPIGLU® additionally. This will help to stabilize the wound and to protect it against infections.

Why does patients feel better after a wound treatment with EPIGLU®?

The patients are much more painless because there are no stitch channels and, therefore, no tensile strength pain.

What should patients pay attention to after the treatment with EPIGLU®?

The patient can immediately resume the daily personal hygiene (washing/showering) and is able to work or play again. Nevertheless, we recommend for children or nervous patients to put a band-aid over the treated wound. So, it can be avoided that the patient who is nearly pain-free peels off the adhesive layers with or without intention.

How EPIGLU® has to be stored?

The longest shelf life of EPIGLU® can be achieved if EPIGLU® is stored in a deep freezer. As EPIGLU® is high-graded pure it does not freeze into a solid block and can be used immediately after removal from the deep freezer. Deep freezing is recommended especially for private practices, where wound treatment does not occur so often. If EPIGLU® is used several times a day, e. g. in emergency rooms or operation theatres, it is not necessary to store the adhesive in the deep freezer between the applications.

Which is the shelf life of EPIGLU®?

If stored in a deep freezer EPIGLU® has a shelf life of 36 months. If stored in a refrigerator or at room temperature the shelf life decreases. Discontinue use of EPIGLU® if the solution does not drip in a clear watery consistency any longer. The material has then started to polymerize and the adhesive can not be used any longer.

How does EPIGLU® polymerize?

Acrylates polymerize by absorption of OH-ions. OH-ions are in the air. On a warm and humid summer day the polymerization occurs faster than on a cold and dry winter day. This is one reason why the first layer of the adhesive is hardening much faster on the still humid wound. It should not be forgotten that Ethyl-2-Cyanoacrylates as EPIGLU® are polymerizing faster than other acrylates in general.

THE BEST INVENTION SINCE BAND-AID

EPIGLU® – Adhesion Instead of Sutures!
CASE STUDIES

Removal of a Nevus

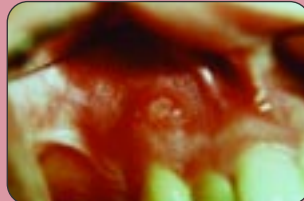


Removal of a nevus with wedge excision and sutures. After 14 days the result is not satisfying.



Removal of a nevus on the collateral side of the same patient with radio surgery* and wound treatment with EPIGLU®. Excellent wound healing after 14 days.

Treatment of an Aphthae



Acute painful aphthae prior to treatment.



Aphthae during the healing process, at the 4th day after treatment.

Removal of a Nevus, left Forearm, Intracutaneous Sutures, Wound Closure with EPIGLU®



Wound treatment postoperative.



Very satisfying result after 10 days.

Treatment of Injuries in Belize – an Aid Project which we are supporting



Treatment of injuries in the face, with EPIGLU® only. The lumberjack instantly went on working.



The gaping wound at the back of the head was treated with EPIGLU®. After 6 weeks the flat and unobtrusive cured spot could not be pictured any more.

Epidermal Nevus on Nevuscellnevus, Wound Closure and Suture Stabilization with EPIGLU®



Preoperative



Postoperative

Lipoma



Removal of an egg-sized lipoma in the neck with radio surgery*.



Subcutaneous sutures and closing of the skin surface with EPIGLU® – situation postoperative.

Treatment of Plantar Warts with Radio Surgery* (with ball electrode and coagulation current only) and Postoperative Treatment with EPIGLU®



Despite a simultaneous treatment of both feet the patient classified the pain as bearable as she could walk and drive her car instantly after the treatment.

Removal of a Cystic and Very Deep Basalioma, Intracutaneous Sutures, Wound Closure with EPIGLU®



After 10 days, the result is highly satisfying even with older patients.

Removal of a Seborrhic Keratosis with a Sharp Spoon, Wound Treatment with EPIGLU® only



Wound closure instantly postoperative. The colourless adhesive does not bother.

*The radio surgical treatments were performed with the radioSURG® 2200 of the company Meyer-Haake GmbH, Wehrheim, Germany.

EPIGLU® – Adhesion Instead of Sutures! CASE STUDIES

Samples for the Dental Application Field



Fig. 1



Fig. 2



Fig. 3



Fig. 4

The applied EPIGLU® (Fig. 2 and 4) leads to immediate pain relief and a fast healing process for the treatment of an acute, therapy resistant aphthous ulcer (Fig. 1) and decubitus of an indolent patient (Fig. 3).

Removal of a Pigmentary Disorder at the right Cheek via Radio Surgery, Treatment of the Wound with EPIGLU® only



preoperative

Status preoperative, the pigmentary disorder was gently ablated via radio surgery.



3 weeks postoperative

After 3 weeks only a slight redness is still visible which disappeared shortly thereafter.

The Treatment Glove can easily be worn after the Injury at the Hand was treated with EPIGLU®



After an injury at the physician's thumb the wound was treated with EPIGLU®. Due to the moistening of the adhesive which leads to an immediate polymerization, the colour changes to white. Without loss of time the physician could put on the glove over the treated wound.

EPIGLU® – Adhesion Instead of Sutures! CASE STUDIES

Closure of Thorax after Bypass Surgery



The application of the first layer of EPIGLU®.



The application of the second layer of EPIGLU®.



Complete wound closure with EPIGLU®.

Also this long wound could completely be closed with EPIGLU® without any problems. The healing process took place fast and free of infections. The scar presents itself esthetic.

Adhesion of Artificial Membrane (e.g. BIOBRANE®) on Skin Extraction Areas



The colourless adhesive is applied with a pipette to the wound edges and the membrane gets fixed to the wound with slight pressure and under tension. For the patient the adhesion of the membrane is absolutely free of pain, the wounds are closed infection secure and the healing takes place without scars. For the hospital this method provides substantially savings of time and costs compared to the traditional method via clamps or sutures.

Removal of a Pigmentary Papillomatous Nevus Cell Nevus at the Neck via Radio Surgery – Treatment of the Wound with EPIGLU® only



Status preoperative and after the treatment of the wound with the crystal clear tissue adhesive.



EPIGLU® – Adhesion Instead of Sutures PACKAGING FORMS

FOR PRIVATE PRACTICES, EMERGENCY ROOMS AND OUTPATIENT CARE:

EPIGLU® Tissue Adhesive in tubes (3g) with application aids

Test Package: 1 tube with 3g of solution and 20 application aids
for 20 applications

Twin Package: 2 tubes with 3g of solution each and 40 application aids
for 40 applications

Economy Package: 4 tubes with 3g of solution each and 80 application aids
for 80 applications



FOR THE OPERATION THEATRE IN HOSPITALS AND PRIVATE PRACTICES:

EPIGLU®-OP

Tissue Adhesive in tubes (3g) with 20 sterile application sets

**EPIGLU®-OP consisting of one tube with 3g of solution
and 1 package with 20 sterile application sets**
(containing 1 sterile drop-in palette and 1 sterile pipette each)



Sterile Application Sets

for the application of EPIGLU® and other watery fluids, can be ordered separately.

FOR DISPOSABLE USE IN PRIVATE PRACTICES, EMERGENCY ROOMS AND OUTPATIENT CARE:

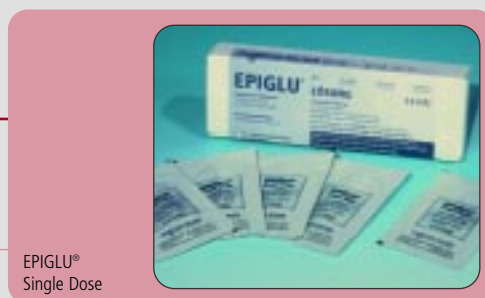
EPIGLU® Single Dose

Aluminium bags with 1 Dosette and 1 dispenser content 0.3 ml/cc EPIGLU® tissue adhesive

Package with 5 Dosettes in aluminium bags with 0.3 ml/cc EPIGLU® each

Package with 10 Dosettes in aluminium bags with 0.3 ml/cc EPIGLU® each

Package with 25 Dosettes in aluminium bags with 0.3 ml/cc EPIGLU® each



CYANO-EX: Remover for EPIGLU® and other acrylate adhesives

Bottle with 20g CYANO-EX

**By the way: We are supporting an aid project in Belize, Physicians for the Third World and other aid projects.
If you still have any questions concerning EPIGLU® please contact us. It is a pleasure for us to answer them.**

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