

MYKUTIS[®]

MEDICATED SCAFFOLD

ADVANCED SKIN REGENERATION

PROMOTES THE ACCELERATION OF THE
SKIN LESION REGENERATION PROCESS

MD



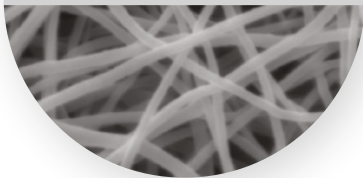
RI.MOS. | CARE

MYKUTIS®

MEDICATED SCAFFOLD

An interactive mesh support designed to **stimulate cellular proliferation and accelerate tissue repair in granulating wounds**, featuring slow-release growth factors. It is formulated with Poly-L-Lactic Acid (PLLA) and an oil-based solution containing St. John's Wort flower extract in Neem Oil.

PLLA
(Poly-L-Lactic Acid)



Load-bearing structure for tissue regeneration. Biocompatible and eco-friendly.

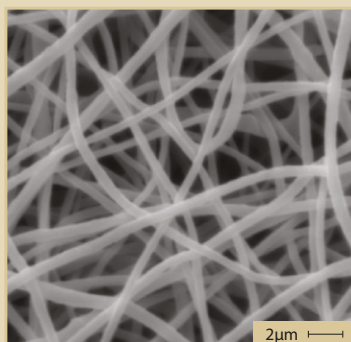
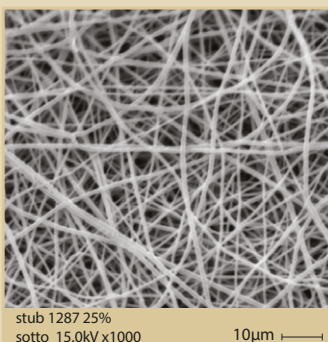
Neem
+
Hypericum



SYNERGISTIC ACTIVITY

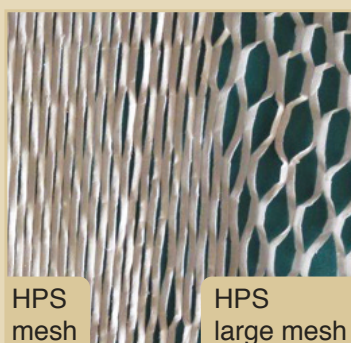
Antiseptic	Regenerating
Antimicrobial	Re-epithelializing
Anti-inflammatory	Soothing

PRODUCTION TECHNOLOGY



► ELECTROSPINNING

High-porosity scaffold.
Promotes cell substrate formation.



► MESH STRUCTURE

Reticulated, expandable structure designed to facilitate the flow of exudate.

USE MYKUTIS[®] IN CASE OF:

DIABETIC ULCERS



16/05



23/05



13/06



Traumatic injury resulting from a poorly performed pedicure. The patient is an 84-year-old woman with a history of diabetes, hypertension, heart disease and dialysis dependency.

16/05 Deep curettage of the toe, with MYKUTIS[®] applied to the phalanx and surrounding edges. The wound flaps were approximated with sutures.

23/05 Follow-up. The patient continues self-administered medication every other day, with outpatient evaluations every 15 days.

13/06 Suture removal at 30 days post-injury.

VASCULAR ULCERS



14/08



Accidental traumatic injury in an 81-year-old woman with chronic venous insufficiency, currently on treatment with new oral anticoagulants.

14/08 MYKUTIS[®] applied to the base of the granulating lesion, combined with a 15-21 mmHg compression bandage. Weekly follow-ups.

12/09 70% reduction in lesion size.

25/09 Full recovery achieved at 7 weeks.

12/09



25/09



VASCULAR LESION



14/08



46-year-old woman with a history of breast carcinoma, previous liver disease, mastectomy, chemotherapy, portal hypertension, bilateral pneumonia and sepsis secondary to port infection. She also has moderate chronic venous insufficiency and a histological diagnosis of pyoderma gangrenous.

14/08 MYKUTIS[®] applied to the base of the granulated lesion.

28/08 Lesion size reduced by 40%; pain decreased from 8 to 6 (VAS scale). Weekly dressings.

29/10 Lesion size reduced by 96%; pain reduced further from 6 to 4 (VAS scale).

28/08



29/10

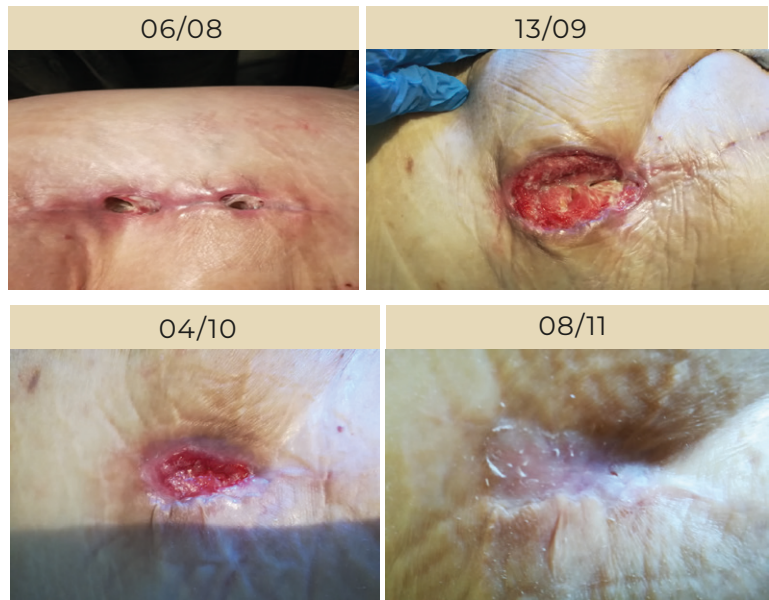


AUTOLOGOUS SKIN GRAFTING



64-year-old woman with chronic venous insufficiency and moderate renal insufficiency presents with a chronic lesion persisting for 5 years. Autologous skin graft.
04/07 Follow-up 3 days post-collection.
08/07 Additional MYKUTIS® applied to the necessary areas.
12/07 Achieved 90% re-epithelialization.

HIP DEHISCENCE FOLLOWING PROSTHESIS



Hip dehiscence following prosthesis.
06/09 MYKUTIS® applied to the dehisced area.
13/09 Continued application of MYKUTIS® as needed. Follow-up every 5 to 7 days to assess exudate and scaffold absorption.
04/10 80% reduction in dehiscence.
08/11 Complete recovery achieved.

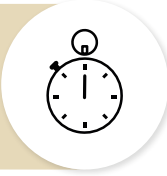
WHAT WILL I GET WITH MYKUTIS®?

MANAGEMENT
OF THE LESION



HOME CARE

SPEED



QUALITY OF LIFE

FEATURES:

- Protective barrier to prevent infections and maintain optimal wound conditions
- Promotes tissue regeneration and re-epithelialization
- Suitable for outpatient use
- Quick and easy to apply
- Expands and adapts to accommodate wound irregularities
- Does not require fixation with staples or sutures
- Breathable bandaging recommended

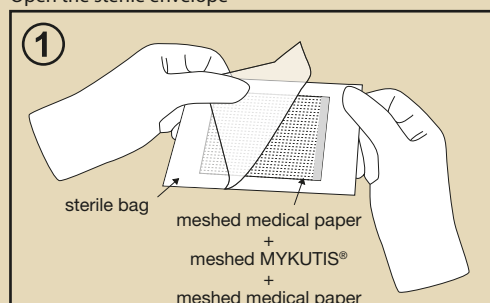
INDICATIONS FOR USE:

- Diabetic ulcers
- Chronic vascular ulcers
- Venous ulcers
- Trauma wounds (including abrasions, lacerations and skin tears)
- Surgical wounds (dehiscence or failed healing after surgery)

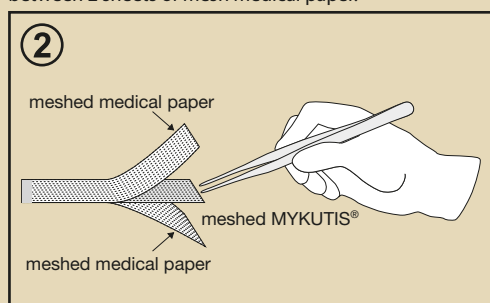


METHODS OF USE AND APPLICATION

Open the sterile envelope



CAUTION! Separate and remove MYKUTIS® sandwiched between 2 sheets of mesh medical paper.



INITIAL APPLICATION PROCEDURE

- Perform debridement
- Achieve hemostasis
- Apply MYKUTIS® on the bed of the granular wound, even beyond the edges of the lesion
- Cover with HYPEROIL® medicated gauze and sterile TNT gauze (secondary dressing)
- Secure the dressing with appropriate medical adhesive backings

FIRST ASSESSMENT (Day 1 or Day 2)

- Replace the secondary dressing
- Inspect for signs of infection
- If needed, reapply MYKUTIS® to any uncovered areas

SUBSEQUENT ASSESSMENTS (Every 7 days)

- Replace the secondary dressing
- Reapply MYKUTIS® to any uncovered areas, if necessary

DESCRIPTION	DATA	PACKAGING	REF.	UDI CODE
SINGLE SCAFFOLD DIMENSION	10X7 cm	BOX OF 5 ALUMINIUM ENVELOPES (no. 10 scaffolds of MYKUTIS®)	120015SC05	 8007279016352
STERILIZATION	EO			
SHELF-LIFE	4 years			

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Medical device IIb

MATERIAL FOR PROFESSIONAL USE ONLY

CE 0051



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RI.MOS.
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Via Manuzio, 15 - 41037 - Mirandola (MO) - ITALY
Tel: +39 0535 25755 - info@rimos.com - www.rimos.com

