

The Next Generation of Vashe®

For Rx and OTC use



Today's wounds are more complex then ever.



60% of chronic wounds contain bioburden.¹

Bacterial colonization reforms within 24 hours.²

Wounds require continuous debridement.³⁻⁵

Chronic wounds have an alkaline pH, impeding the healing process.⁶

The United States sees 2.8 million antimicrobial-resistant infections annually.⁷

Primary wound care products fall short in today's complex wound environments, **often delivering singular benefits** and forcing clinicians to combine multiple products to address basic healing needs:



Hypochlorous acid (HOCl)-based **vashe®** has been trusted for 10+ years in liquid form for wound hygiene.

How could the benefits of hypochlorous acid be used in **gel** form?



Introducing

vashe[®]gel

Simple. Effective. Accessible.⁸

- ✓ Addresses bioburden
- ✓ Bactericidal, viricidal, sporicidal, fungicidal
- ✓ Supports debridement
- ✓ Delivers moisture

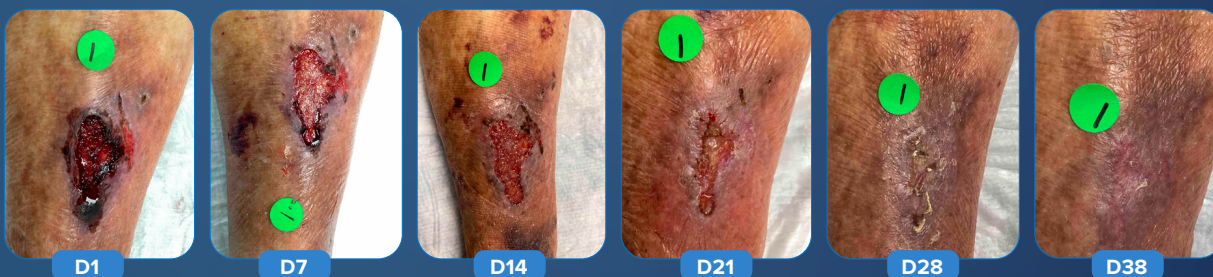
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- ✓ Mildly acidic pH conducive to wound healing
- ✓ Has no known contraindications
- ✓ HOCl has no known clinical resistance
- ✓ Reduces odor



Clinical results

Case Study: A non-diabetic, 80 year-old female with mild underlying venous insufficiency. The patient was instructed to soak wound daily with Vashe solution for 5-10 minutes, followed by Vashe Antimicrobial Wound Gel application and wrapped with a conforming gauze roll. Dressings were changed daily.



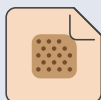
VasheGel is easy to use.



Effectively **cleanse** the wound, periwound and surrounding skin per facility cleansing protocol (i.e., Vashe® Wound Solution). Pat dry.



Shake tube and **apply Vashe Antimicrobial Wound Gel** (5mm thick) to the wound bed.



Cover with a secondary dressing (i.e. bordered gauze)



Change dressing daily or as recommended by a healthcare provider.

Vashe Antimicrobial Wound Gel	Catalog Code
4.0 fl. oz. (118 ml) Tubes/12-case	00360

Vashe Solution	Pour-Top Catalog Code	Instillation Bottle Catalog Code
4.0 fl. oz. (118 ml) Bottles/24-case	00312	Not available
8.5 fl. oz. (250 ml) Bottles/12-case	00313	00316
16.0 fl. oz. (475 ml) Bottles/12-case	00314	00317
34.0 fl. oz. (1 Liter) Bottles/6-case	00322	00323



References: 1. James GA, Swogger E, Wolcott R, et al. Biofilms in chronic wounds. Wound Repair and Regeneration. 2008;16(1):37-44 2. International Wound Infection Institute (IWII) Wound Infection in Clinical Practice. Wounds International. 2022. 3. Lazareth I, et al. The role of a silver releasing lipido-colloid contact layer in venous leg ulcers presenting inflammatory signs suggesting heavy bacterial colonization: Results of a randomized controlled study. Wounds. 2008;20(6):158–66. 4. European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel and Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline. The International Guideline. Emily Haesler (Ed.). EPUAP/NPIAP/PPPIA: 2019. 5. Mayer, D. et al. (2024). International Consensus Document. Best Practice for Wound Debridement. Journal of Wound Care; 33 (6). 6. Schneider, L. A., Korber, A., Grabbe, S., & Dissemond, J. (2007). Influence of pH on wound-healing: a new perspective for wound-therapy? Archives of Dermatological Research, 298(9), 413–420. 7. Centers for Disease Control and Prevention. Antibiotic Resistance Threats in the United States, 2019. Atlanta, GA: U.S. Department of Health and Human Services; 2019. 8. Data on file with Urgo Medical North America.