Healing wounds naturally

L-Mesitran Ointment
Antibacterial ointment with 48% medical grade honey, hypoallergenic medical grade lanolin, aloe, calendula, ZnO and antioxidant vitamins C and E. Indicated for the removal of necrosis and debris. Cover with alginates, hydrofiber, foam or compress. Replace the ointment after 1-3 days.

L-Mesitran Soft
Antibacterial gel with 40% medical grade honey, hypoallergenic medical grade lanolin, PEG and vitamins C and E as antioxidants. Indicated for all superficial and deep wounds. Cover with foam, alginates, hydrofiber or compress. Replace the gel after 1-3 days.

L-Mesitran Tulle
Hydro-active antibacterial synthetic sheet with L-Mesitran Soft. Does not adhere to the wound. Indicated for wounds with none to moderate exudates. Cover with absorbent dressing, fixate with regular adhesive gauzes. Replace the dressing after 3-5 days.

L-Mesitran Hydro
Hydro-active antibacterial dressing with 30% medical grade honey, polymers and water. Indicated for superficial wounds. Self-adhesive, showering or swimming is possible. Replace the dressing after 3-5 days.

L-Mesitran Border
Hydro-active antibacterial dressing with 30% medical grade honey, polymers, water and an adhesive border. Indicated for smaller superficial wounds. Self-adhesive, showering/swimming is possible. Replace the dressing after 3-5 days.

L-Mesitran Active
Hydro-active antibacterial dressing with 30% medical grade honey, polymers, water and an adhesive border. Indicated for smaller superficial wounds. Self-adhesive, showering/swimming is possible. Replace the dressing after 3-5 days.

L-Mesitran Net
Hydro-active antibacterial wound contact layer with 20% medical grade honey, polymers and water. Indicated for wounds with moderate to heavy exudates. Cover with absorbent dressings or compresses and fixate with regular adhesive gauzes. Replace the dressing after 3-5 days.

References
- Chatzoulis G et al. (2012) Salvage of an infected titanium mesh in a large incisional ventral hernia using medicinal honey and VAC. Hernia 16(4):475-9
Pioneering wound care
L-Mesitran is a pioneering product range, based on Medical Grade Honey and available worldwide since 2002 with excellent clinical results. These advanced wound care dressings from Holland were the first to receive the CE mark and FDA approval. They have been used on a variety of severe wounds, including antibiotic resistant (MRSA) infected wounds. The founding father of the products, dr. Theo Postmes, published in the renowned Lancet journal and since then the efficacy of the L-Mesitran products has been the subject of many publications. L-Mesitran is currently incorporated in many standard wound care protocols around the world.

Antibacterial activity (incl. MRSA)
Test results show that the most common wound bacteria will be killed within 24-48 hours, like Staph. aureus (fig. 1), MRSA and ESBL producing bacteria. The antibacterial activity of L-Mesitran is based on its high osmolarity, its low pH and the ability to produce hydrogen peroxide (H₂O₂).

Debrides and reduces malodour
Osmosis encourages lymphatic fluids to flow to devitalized tissue in the wound bed, debriding the wound. Bacteria preferably metabolize the glucose in honey to lactic acid (odourless), instead of amino acids from the wound bed into malodorous (sulphur/ammonia) compounds. The removal of malodour is quick and immediately enhances the quality of life of the patients.

Anti-inflammatory
Prolonged inflammation is associated with delayed wound healing. Honey changes the wound bed environment positively and supresses bacterial and other particles present in the wound bed that induce inflammation. Honey ‘scavenges’ the free oxygen radicals by functioning as an anti-oxidant.

Stimulates wound healing, less scarring
L-Mesitran promotes new tissue regeneration and healing. The unique ability to stimulate angiogenesis is important for treating delayed (chronic) wounds. L-Mesitran supplies nutrients to the wound bed, aiding in speeding up the healing process. It also creates a moist wound healing environment, important to minimize scarring.

Easy to apply, safe to use and cost effective
To date no adverse effects have been reported. The products are easy to apply with maximum patient comfort. Because only small amounts of product are necessary for an optimum effect, the products contribute to a cost effective approach in wound management.

Less scarring in antibiotic resistant wound infection
An obese woman (48) had an E. cloacae infected wound of 9.6x9.0x0.6cm (fig. a). Antibiotics and povidone iodine had no effect. L-Mesitran was applied and on the 5th day, the malodour, debris, swelling and the wound exudates already dramatically reduced. The trauma epithelialized completely within two months with almost no scarring (fig. b).

Debridement of a diabetic pressure sore
An 80-year-old woman (diabetes, stroke, high blood pressure) with a reasonable health had a pressure ulcer on her left heel (fig. e). This was caused by her stroke and the numbness she had as a result in the foot. L-Mesitran was (bi-) daily applied after cleaning the wound with a saline solution. This was covered with an absorbent gauze dressing. In roughly four weeks the wound was completely debrided and stimulated to heal in 3 months (fig. f). The wound did not get infected and no antibiotics were used, despite the underlying pathologies.

Infection, malodour
A male (43) was brought to the hospital for a post-op infected right thigh wound (fig. g). The wound (30x12x4cm) produced malodour and lab results showed Ps. aeruginosa. L-Mesitran was applied on the wound and covered with regular absorbent dressings for fixation. The severe infection was cleared and malodour controlled within three days without the use of antibiot- ics. Twenty days after the start with L-Mesitran the wound was clean and granulating (fig. h). Four weeks later the wound was completely healed.