MEDIHONEY® Barrier Cream
General Modes of Action of Medihoney®

- Antibacterial, broad spectrum
- Neutralises malodour
- Osmotic action
- Debridement
- Immune stimulation
- Anti-inflammatory
Benefits of Medihoney® Barrier Cream

- Maintains the skin’s natural pH & barrier properties
- Provides protection from body fluids & moisture
- Contains 30% Medihoney® Antibacterial Honey
- Helps in the prevention of pressure ulcers
- Soothes and treats irritated skin or first degree burned skin.
- Ideal for sunburns
Active Ingredients:
- Medihoney® Antibacterial honey
- Dimethicone
- Trimethylsiloxysilicate

Wide range of natural ingredients:
- Coconut oil
- German Chamomile flower extract
- Evening Primrose oil
- Aloe Vera
- Vitamin E

- NO added colour or fragrance
- NO lanolin
- NO parabens
- NO steroids
- NO mineral oils
Indications

Protects - Prevents - Treats

✅ Protects at-risk skin from breakdown
✅ Protects wound margins from exudate damage
✅ Protects skin from damage caused by friction or shear (bed sores)

  Prevention & treatment of maceration****
  Prevention & treatment of excoriation****

 ➢ Treats incontinence-associated dermatitis and atopic eczema**
 ➢ Treats blistered skin*
 ➢ Treats Candida****
 ➢ Treats Intertrigo***
 ➢ Helps maintain the skin pH

*Seckam A, Case studies to demonstrate the use of Medihoney barrier cream to treat blisters. Proceedings of Wounds UK Conference, Nov 2014 Harrogate, UK. Poster. (^^^)
**Seckam A, Turkos M. Case reports to demonstrate the use of Medihoney™ Barrier Cream to treat atopic eczema. Proceedings of Wounds UK Conference, Nov 2013, Harrogate, UK. Poster. (˄˄˄)
**ACTIONS**

*Protects - Prevents - Treats*

**Actions:**

1. Antibacterial
2. Anti-inflammatory*, **
3. Anti- Candida****

*Seckam A, Case studies to demonstrate the use of Medihoney barrier cream to treat blisters. *Proceedings of Wounds UK Conference*, Nov 2014 Harrogate, UK. Poster. (^^^)

**Seckam A, Turkos M. Case reports to demonstrate the use of Medihoney™ Barrier Cream to treat atopic eczema. *Proceedings of Wounds UK Conference*, Nov 2013, Harrogate, UK. Poster. (^^^)


****GREENWOOD PAPER
A randomized trial of Medihoney barrier cream versus zinc oxide ointment


Zinc oxide ointment
A skin-drying agent, which acts like a barrier, and may treat skin conditions which are associated with decreased plasma zinc levels

Medihoney® Barrier Cream
Film barrier cream containing 30% sterile Medihoney® (Active Leptospernum Manuka Honey), for protection and healing damaged or injured skin. Honey has been known for its healing properties in wounds for years. Medihoney® has Antibacterial, antifungal and anti-inflammatory properties. It improves wound healing and reduces pain.

Objective
To compare the beneficial effect of honey barrier cream (Medihoney®) to standard treatment with zinc-oxide ointment in patients with chronic Intertrigo
A randomized trial of Medihoney® Barrier Cream versus zinc oxide ointment


• **Study design**
  – Randomized cross-comparative (left-right comparison) study of the therapeutic efficacy of Medihoney® Barrier Cream versus zinc oxide ointment

• **Sample size**
  – 31 patients

• **Study protocol**
  – *Both products were applied twice daily for 3 weeks to the symmetrical skin folds with intertrigo. By consistent application of the products on the same side, patients were used as their own controls.*
Measurement

- Examination of the severity of Intertrigo: days 7 (Primary endpoint), 14 and 21
- Severity of symptoms: pruritus, pain, burning or odor, was evaluated with a 4-point scale (never, seldom, sometimes, often).
- Treatment preference of patient and nursing staff: evaluated at day 21

<table>
<thead>
<tr>
<th>Table 1. The intertrigo-severity scale</th>
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<tbody>
<tr>
<td><strong>Erythema</strong></td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>None</td>
</tr>
<tr>
<td><strong>Moisture</strong></td>
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<tr>
<td>0</td>
</tr>
<tr>
<td>None</td>
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<tr>
<td><strong>Skin</strong></td>
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<tr>
<td>0</td>
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<tr>
<td>None</td>
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</tbody>
</table>

Table 1
0–3 Intertrigo
4–6 Intertrigo of moisturised skin
7–9 Intertrigo of infected skin
• **Results**

  – Primary endpoint:
    * 55% of the patients in the Medihoney® had a positive 2-point difference for the honey side, while 37% for the Zinc oxide ointment side

  – Symptom resolution:
    * Mean complaints of pruritus was 2 for the Zinc oxide side, while it was only 1.6 for the Medihoney® side (p<0.05). 20% reduction in symptoms

  – Users satisfaction survey:
    * 66% of the patients preferred the Medihoney® treatment

Mean intertrigo severity scores
Mean complaints of pruritus

Honey side

Zinc side

Mean complaints of pruritus

Day 1  Day 7  Day 14  Day 21
A randomized trial of Medihoney® Barrier Cream versus zinc oxide ointment


• **Conclusion**
  
  – **Medihoney® Barrier Cream** is as effective as the standard treatment, with the advantage of not needing to be cleansed from the skin, which is required with zinc-oxide ointment
  
  – **Medihoney® Barrier Cream** reduced pruritus more effectively and is comfortable for patients
CASE STUDIES
SKIN BREAKDOWN – SEVERE EXCORIATION

• **CASE**
  
  – 67 years old woman with multiple areas of moisture and pressure-associated skin damage.
  
  – History:
    
    • Self-neglect, reduced mobility, malnutrition, dehydration, cerebral vascular accident, hypoxia, extensive skin excoriation and pressure ulcers, sepsis, & incapacitated
  
  – Protocol:
    
    • Medihoney® Barrier Cream 3 times daily x 3 days, then once daily x 7 days, then once every 3 days until complete healing

CASE – 81 year old man admitted for acute coronary syndrome

History:
- Ischemic Heart Disease, pacemaker in situ, reduced mobility, recent biliary sepsis

Previous treatments:
- Self-changed wound management products & E45 cream, no improvement

Initial ulcer size: 3.5 x 1.5 cm

Protocol:
- Medihoney® Barrier Cream 2 times daily for 6 days “Complete healing”

Figure 3: photograph taken prior to application of Medihoney

Figure 4: photograph taken six days after application of Medihoney

CASE

51 year old woman admitted for severe abdominal sepsis from faecal contamination post-op. Infected buttocks wound with *Candida Albicans*.

History:
- Obesity, reduced mobility, arthritis, reduced caloric intake, full-thickness dehiscence, sepsis, anemia, moisture damage to the buttocks

Previous treatments:
- Barrier spray for the previous 8 days, ineffective, no improvement.

Protocol:
- Medihoney® Barrier Cream 3 times daily for 10 days “Complete healing”

Figure 5: photograph taken prior to any treatment for moisture damage

Figure 6: photograph taken after 8 days following treatment with traditional barrier spray

Figure 7: photograph 10 days after commencement of Medihoney treatment
Application

• Medihoney® Barrier Cream can be applied to damaged, injured or intact skin.
• It provides protection from body fluids and moisture and can help treat infected, damaged, or injured skin.
• It can be applied around wounds and under skin folds, wound dressings and incontinence pads where the skin can be at risk of damage.
• Medihoney Barrier Cream helps maintain the skin moisture.

• Suitable for babies, even neonates*
• Suitable for prolonged use
• Suitable for large areas
• Suitable for the face
• Ideal for use with Medihoney® wound dressings

### INDICATION PROTOCOL

<table>
<thead>
<tr>
<th>INDICATION</th>
<th>PROTOCOL</th>
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| Prevention of Nappy rash | » Apply a small amount to clean, dry skin  
  » Spread over the whole area  
  **Frequency:**  
  » Reapply at nappy change or after cleansing |
| Treatment of Nappy rash | » After washing & cleansing the area:  
  » Spread over the whole area  
  **Frequency:**  
  » Apply to skin after each nappy change |

- Safe for use on any age (the honey in the cream is sterile)
- Can be used to prevent nappy rash
- Can be applied at every nappy change if required
STORAGE

- Store at room temperature
- **Do not put in refrigerator!**
- Can be used for up to 4 months once opened
<table>
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| **1. Prevention of Pressure Ulcers** | Areas under pressure:  
- Apply a small amount to clean, dry skin  
- Spread over the whole area  
- **Frequency: once daily, reapply after bathing** |
| **2. Incontinence**             | After washing & cleansing the area:  
- Apply to clean, dry skin after each incontinence episode or clean up |
| **3. Peri-wound area protection** | 1. Apply a small amount to the clean & dry peri-wound area  
2. Spread over the whole area  
3. Leave to dry  
4. Apply dressing |
| **4. Treatment of maceration & excoriation** |  
- Apply to clean, dry skin  
- Spread evenly  
- Leave to dry  
- **Frequency: As required or after clean up** |
| **5. Sunburn**                  | - Apply as early as possible to sunburn areas  
- **Frequency: reapply as needed** |
MEDIHONEY® Barrier Cream

THANK YOU!