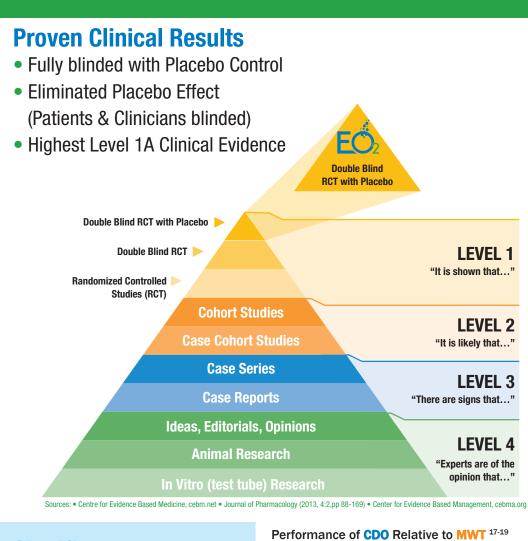
You Breathe Continuously YourWound Should Too

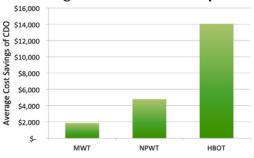
Full Closure Oxygen Therapy

We provide advanced wound care solutions using Continuous Diffusion of Oxygen (CDO) Therapy



Significant Improvements in:

- Healing Time & Outcomes
- Cost Savings
- Pain Reduction



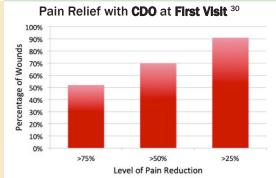




100% 0%

CDO Works Even Better:

- as Wounds get Larger
- in More Chronic Wounds
- in Weight Bearing areas



HOW IT WORKS

What is Continuous Diffusion of Oxygen (CDO)?

CDO uses pure, humidified oxygen to continuously treat a wound. This allows for sustained delivery of oxygen to the tissue, full patient mobility during treatment, and application of the therapy in virtually any setting.



- (247) Continuously treats a wound with oxygen (0_2)
- (O2) Generates pure, humidified O2 from air
- (<) O2 diffuses directly into wound, similar to breathing
- (🔊 Silent, wearable and discreet

How CDO Works in Wound Healing

Oxygen has been shown to be an essential component in multiple mechanisms of action required for wound healing, and increasing the amount of oxygen to levels higher than normal has been shown to result in increased, and often proportional, levels of activity.

Increases Cell Metabolism & Energy²⁻¹⁶

• Continuous Pure Oxygen boosts vitality to support increased demand during healing

Faster Cell Growth & Wound Closure¹⁷⁻³¹

• Increased collagen deposition (faster repair)

• Up to 460% faster closure relative to moist wound therapy alone

Rapid Pain Relief 30-34

- Over half of patients experience
- >75% reduction within 4 days
- Significant pain relief in a variety
 of wounds

Greater Wound Perfusion^{25,35-42}

• Rate of angiogenesis proportional to oxygen concentration

Enhances Bodies Own Anti-Bacterial Capacity^{19,43-51,53}

• Create Reactive Oxygen Species (i.e. Hydrogen Peroxide)

Better Strength and Appearance^{24,52-64}

- Higher tensile strength (reduced recurrence)
- Better collagen organization (reduced scarring)

CASE STUDIES



Day 93 of CDO 99% Closed Scan blue QR Code for number references.

Surgical Wound

PATIENT:

48 Year old male suffering from non-healing surgical wound

MEDICAL HISTORY:

Diabetes, vascular issues, PVD, not a candidate for vascular interventions or HBO treatment

WOUND HISTORY:

Patient was scheduled for BKA, but showed enough improvement to cancel surgery after one week of CDO treatment

TREATMENT:

3 OxyGeni[®] units set at 10 ml/hr paired with OxySpur[®] dressing, along with other standard MWT care

OUTCOME:

Wound reached 99% closure with CDO therapy in 93 days



Day 0 of CDO

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Day 55 of CDO - Closed

OxyGeni[®] is a direct replacement for TransCu 02[®]. Refer to eo2.com for more details.

Diabetic Foot Ulcer

PATIENT:

50 year old caucasian female suffering from a pressure ulcer **MEDICAL HISTORY:**

Diabetes, diabetic retinopathy & peripheral neuropathy

WOUND HISTORY:

The wound has been open for 90 days, ulcer has progressively gotten larger, deeper, more malodorous, fibrotic, and necrotic **PREVIOUS THERAPIES:**

Multiple debridements, local wound care with various wound care products, and an attempt at primary closure

TREATMENT:

OxyGeni® unit set at 3 ml/hr

OUTCOME:

Wound reached full closure with CDO therapy in 55 days

The EO₂ Solution

The EO₂ System employs an OxyGeni[®] device which uses fuel cell technology to continuously generate pure, humidified oxygen at adjustable flow rates from 3-15 ml/hr and deliver it directly to the wound bed environment within the OxySpur® dressing. The OxySpur® Oxygen Diffusion Dressing is an all-inone dressing for medium to high exudating wounds. It's design ensures even distribution of oxygen over the entire wound.

Layer 4a Hvdrocolloid Hi-Tac Adhesive Border

Perforated Cannula

O2Delivery

Layer 2

-N-ADHESIVE 4"X5" (10.2X1-

Layer 3 Polymer Laminate Super-absorbent

Laver 4

Thin Film

Isolation

Layer 1 -Hydrocolloid Foam Tissue Contact/Absorbent

Day 0 of CDO





ADHESIVE NON-ADHESIVE

2"x2" (5.1x5.1cm) 4"x5" (10.2x12.7cm) 2"x2" (5.1x5.1cm) 4"x5" (10.2x12.7cm)

Hydrocolloid Foam O2 Distribution/Absorbent

ADHESIVE

2"x8" (5.1x20.3cm)

Venous Leg Ulcer

PATIENT:

53 year old female suffering from a large, painful venous leg ulcer

MEDICAL HISTORY:

Venous insufficiency, obesity

WOUND HISTORY:

Patient suffered from bilateral ulcers for over 5 months **PREVIOUS THERAPIES:**

Four-layer compression, cadexomer matrix dressing, collagenase and silver nitrate

TREATMENT:

OxyGeni[®] unit set at 10 ml/hr paired with OxySpur[®] dressing covered with four-layer compression

OUTCOME:

Wound reached full closure with CDO therapy in 79 days over hypergranulation. Patient's pain was reduced quickly (within 3 days) and pain medication was no longer needed



Keep Your Patients Moving





800.825.2979

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