

# **Bacteria**

#### High levels of bacteria delay healing.

# Mechanical stress caused by low-frequency ultrasound result in bacterial cell death and reduction of bacterial count



### **REMOVES BARRIERS TO HEALING**



## Biofilm

Biofilm is a structured community of bacteria tightly enclosed within a self-produced exopolymeric matrix, and its presence is a significant barrier to healing. Since it is metabolically inactive, it is extremely hard to disrupt with topical/ systemic antibiotics, antimicrobials, and/or antiseptics.



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- Established rabbit ear biofilm model using Pseudomonas aeruginosa
- 3 MIST treatments every other day over 6-day period
- Scanning Electron Microscopy of images (15.03x) demonstrate dense amounts of bacterial cells in untreated wounds
- MIST-treated wounds show dramatically reduced density of biofilm bacteria and large amounts of visibly bare wound bed

\*Data were compiled utilizing MIST Therapy. UltraMIST is the successor but maintains the same mechanism of action.

UltraMIST<sup>®</sup> Therapy can reduce a wide range of bacteria<sup>1-3</sup> including the most difficult to treat: VRE, MRSA, Acinetobacter, E. coli





For more information, please refer to the UltraMIST Therapy Instructions for Use.

**References: 1.** Kavros SJ, Schenck EC. Use of noncontact low-frequency ultrasound in the treatment of chronic foot and leg ulcerations: a 51 patient analysis. *J Am Podiatr Med Assoc.* 2007;97(2):95-101. **2.** Serena T, Lee SK, Lam K, Attar P, Meneses P, Ennis W. The impact of noncontact, nonthermal, low-frequency ultrasound on bacterial counts in experimental and chronic wounds. *Ostomy Wound Manage.* 2009;55(1):22-30. **3.** Kavros SJ, Wagner SA, Wennberg PW, Cockerill FR. The effect of ultrasound mist transfer technology on virulent bacterial wound pathogens. *Abstract.* Presented at SAWC 2002. **4.** Seth AK, Mustoe TA, Galiano et al. Noncontact, low-frequency ultrasound as an effective therapy against Pseudomonas aeruginosa-infected biofilm wounds. *Wound Repair Regen.* 2013;21(2):266-274.