



# *Vibro-Pulse*®

An effective treatment  
for venous leg ulceration.



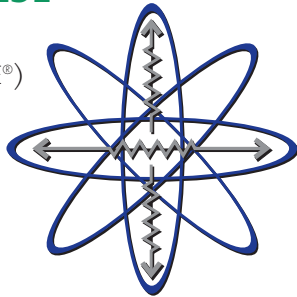


# An effective treatment for venous leg ulceration

- Reducing oedema and swelling.
- Stimulating blood flow and microcirculation.
- Aiding with pain relief.
- Reducing healing times, saving on treatment costs.
- Good patient compliance.

## How does VIBRO-PULSE® work?

Cycloidal vibration (VIBRO-PULSE®) is a 3 dimensional oscillating vibration action that is clinically proven to increase microcirculation and fluid turnover within skin tissue.



## VIBRO-PULSE® Therapy:

Consists of two parts -

- 1) **VIBRO-PULSE®** therapy pad
- 2) **VIBRO-PULSE®** single use cover and limb straps.  
Replace after each treatment.  
1 pack of 3 = 1 DAY of treatment

## VIBRO-PULSE® is simple and easily available for your patients.

If you have a suitable patient

**Contact us on Tel: (0114) 2242249**  
**or enquires@vibrant-medical.co.uk.**

We will allocate you a VIBRO-PULSE® therapy pad and training.

Each VIBRO-PULSE® pad requires 1 x pack of prescribed CYCLOIDAL VIBRATION ACCESSORIES (covers with straps) per day (see Drug Tariff part IXA). To prevent inconsistent daily treatment we advise a minimum of 7 packs.

Retain the VIBRO-PULSE® pads while ever they are in use. If a VIBRO-PULSE® pad is not being used we reserve the right to recover the pad and reallocate it elsewhere.



**Important:** The VIBRO-PULSE® pad will only work by applying a single use cover with limb straps to ensure effective treatment and infection control. Replace after each 30 minute treatment.

**Single use covers with limb straps are available on prescription.**  
**1 pack = 1 DAY of treatment.**

**Order details: Drug Tariff part IXA.**  
**CYCLOIDAL VIBRATION ACCESSORIES:**  
**VIBRO-PULSE® pack of 3.**  
**Product No: 23066. PIP: 294-3678**

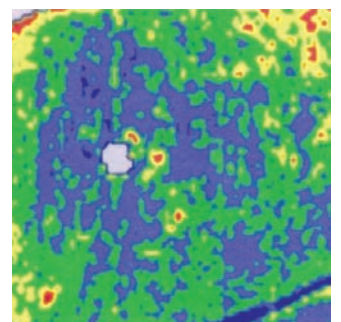
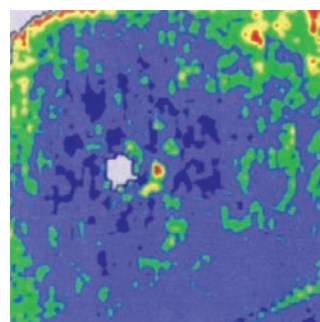
## Protocol:

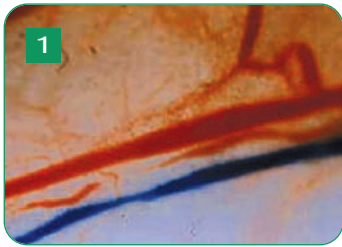
Apply VIBRO-PULSE® for 30 minutes, 3 x a day. (Allow 1 to 2 hours between treatments.)

## Duration of Treatment:

10 days then review, if no improvement is noted by day 10 cease the therapy.

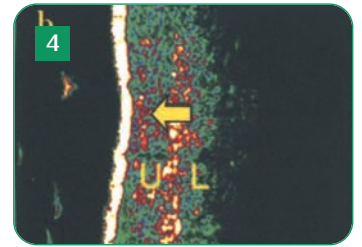
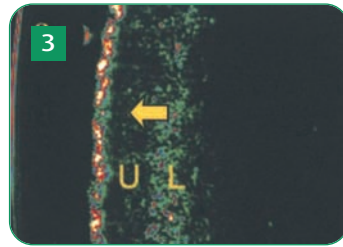
Scanning laser image of skin microcirculation of the leg BEFORE and AFTER VIBRO-PULSE®





**Vascular and Lymphatic vessels.**

1. Before **VIBRO-PULSE**® 2. After **VIBRO-PULSE**® Therapy



**Dermascan Ultrasound echographic images of the leg.**

3. Before **VIBRO-PULSE**® 4. Four weeks post **VIBRO-PULSE**® Therapy

**U** = upper dermis **L** = lower dermis. The **→** = low echographic pixels show oedema/swelling, demonstrating significant reduction after 4 weeks of **VIBRO-PULSE**® Therapy.

## Clinical study results:

"Average venous ulcer duration 29 months in compression bandaging. Then combine with VIBRO-PULSE® 62% healed within 12 weeks, remaining ulcers reduced in size by 31% to 91%".

### Summary:

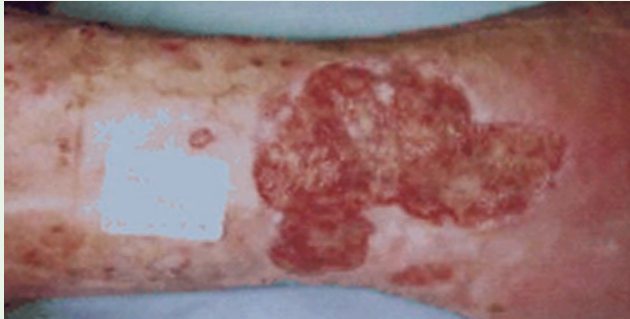
Venous leg ulcer duration 4 years.

**VIBRO-PULSE**® = **65% wound healing by week 12.**

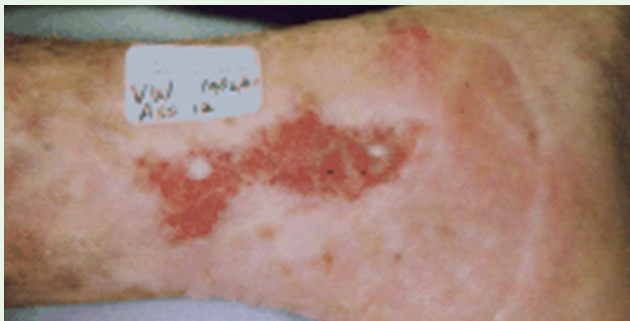
### Patient Information:

**Mrs W**, 83 years old. Long history of bilateral venous ulcers requiring daily bandage changes due to exudate.

On commencing VIBRO-PULSE® **Mrs W** had a 28.75 cm sq ulcer on her left medial gaiter for 4 years



Before and After 12 weeks of **VIBRO-PULSE**® therapy



### Summary:

Venous Leg Ulcer 4 months.

**VIBRO-PULSE**® = **healed week 5.**

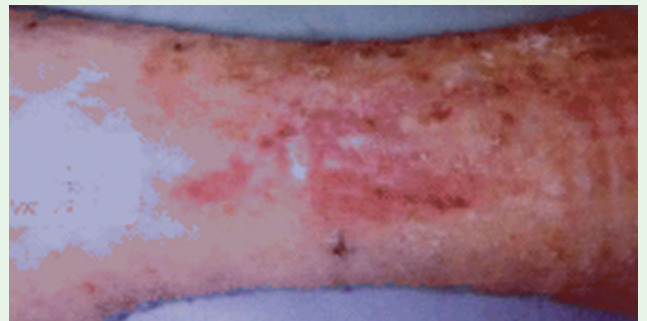
### Patient Information:

**Mrs R**, 86 year old. History of rheumatoid arthritis, DVT and left leg venous ulcers.

On commencing VIBRO-PULSE® **Mrs R** had a 7cm sq sloughy ulcer on the left lateral gaiter for 4 months.



Before and After 5 weeks of **VIBRO-PULSE**® therapy



## Important:

DO NOT REMOVE any bandaging when applying VIBRO-PULSE®. The therapy will penetrate the bandage

## Simple to use:

For healthcare professionals or carer's VIBRO-PULSE® is simple to use. Patients can self administer after instruction from their healthcare professional.

For more case studies see [www.vibrant-medical.co.uk](http://www.vibrant-medical.co.uk)



**CONTRAINDICATIONS:** Active deep vein thrombosis, Active Pulmonary embolism, Acute thrombophlebitis, Severe active rheumatoid arthritis, Osteomyelitis, Active cancer, Pregnancy, Uncontrolled epilepsy, Active bleeding or difficult haemostasis in the wound bed.

**CAUTION:** Infected wounds not receiving antibiotic therapy, Patients with unstable lower limb structures, e.g. bone fragments, Recent knee joint replacement.

References:

1. TJ Ryan, M Thoolen and Y Yang. "The effect of mechanical forces (vibration or external compression) on the dermal water content of the upper dermis and epidermis, assessed by high frequency ultrasound" Oxford Wound Healing Institute, Department of Dermatology, Churchill Hospital, Oxford. Journal of Tissue Viability July 2001 Vol 11 No3
2. J.M. Wilson, Y.M. Arseculeratne, Y. Yang, G.W. Cherry Healing venous ulcers with cycloidal multidirectional vibration therapy". Oxford Wound Healing Institute. Churchill Hospital. Oxford UK. Journal of Wound Care Vol 11, No 10, November 2002
3. Cherry G.W. Ryan TJ "Using cycloidal vibration to heal venous leg ulcers: a cost-analysis based on retrospective data". Journal of Wound Care Vol 14, No 4. April 2005

**Customer Service:**

Vibrant Medical Ltd, The Innovation Centre, 217 Portobello, SHEFFIELD, UK, S1 4DP

**Tel:** +44 (0) 114 2242249 **Fax:** +44 (0) 114 2232300

**Email:** [enquiries@vibrant-medical.co.uk](mailto:enquiries@vibrant-medical.co.uk)

Or: NHC Technology Ltd, Colomendy Industrial Estate, Rhyl Road, Denbigh, Denbighshire. UK, LL16 5TS  
Tel: +44 (0) 1745 811200 Fax: +44 (0) 1745 816106

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