



Medical history:

52-year-old male patient with peripheral artery occlusive disease in L3-L5. Scheduled for leg amputation. Meanwhile, the wound problem has only remained on the outer right lower leg. The wound repeatedly shows critical colonisation and fibrinous tissue.



Why the decision for MOMOSAN?

zur Reduzierung der Fibrinbelege und Verbesserung des Exsudatabflusses.

Problem solution:

Application of **MOMOSAN** white 15x10x0.5; Sorbion sachet 20x10 as secondary medication

Further course of treatment:

The coating has clearly decreased without the dressing sticking to the wound.

MOMOSAN[®]

Application report