E-QURE’s BST Device

The new generation of wound care, a noninvasive treatment curing chronic wounds and other hard to heal ulcers.

Wound healing Electrotherapy background

The human cell is in essence an electrical unit. Human cells are enveloped by a plasma membrane that operates on the electrochemical physiology principle of direct current exchange of ions.

Injury to the outermost layer or epithelial layer of the human skin disrupts the body’s naturally occurring electrical current therefore creating an electrical field called also “The Current of Injury”. This electrical field guides the epithelial cell migration during wound healing. When the wound becomes chronic, the electrical field weakens or ceases.

The patient is connected to the BST Device only for the duration of the treatment. A pair of electrodes are affixed around the wound location on healthy skin and are replaced according to the dressing regimen. E-QURE’s BST Device is positioned to treat severe stage II, as well as stage III and IV wounds including pressure ulcers, diabetic ulcers and venous ulcers.

The BST Device is a standalone and easy-to-operate Device for adjunctive therapy in wound healing. The Device automatically adjusts the electric amplitude based on the patient’s impedance reading.

The Bioelectrical Signal Therapy - BST Device

The E-QURE’s BST Device restarts and accelerates chronic wound healing by mimicking the natural electrical current that occurs in injured skin and which is absent around chronic wounds.

The BST Device, using electrodes affixed around the opposing sides of the wound, emits an electrical field to the wound site and induces local cell regeneration. Wound treatment with the BST Device is non-invasive, painless and remarkably efficient. The procedure initiates treatment to be performed 3 times a day for a duration of 30 minutes each.

E-QURE’s BST Device represents a cost-effective wound healing method that reduces treatment and hospitalization time, reduces the need for surgery and amputation, thus reduces patient treatment costs.

E-QURE’s BST Device provides the healthcare arena a decisive advantage in treating chronic wounds and ulcers:

- Efficient treatment of chronic wounds
- Promotes Rapid closure of wounds
- Stimulates the body’s natural healing process
- Painless, Noninvasive and Safe Treatment
- Portable and easy to use
- Cost Effective

E-QURE Corp. P: (972) 8-9167333 | F: (972) 8-9167331 | email: info@e-quare.com
Our US address: E-QURE Corp. 20 West 64th street Suite 39G New York, NY 10023

www.e-quare.com
E-QURE Corp. - The new generation of wound care, The Bioelectrical Signal Therapy - BST Device For Quick, Noninvasive and Painless cure of chronic wounds

Company Profile:

E-QURE Corp. - A public traded company, (OTCQB Market Symbol: "EQU") is a premier provider of innovative medical devices in the field of advanced wound care treatment.

The chronic wound care market is a critical matter in today’s healthcare system accounting for more than $30 billion in annual economic costs in the western world and growing at an annual rate of 10%. The average prevalence of chronic wounds is ~2% of the population affecting more than 6 million patients in the USA, and over 20 Million in the western and developed world countries.

E-QURE has developed a breakthrough novelty noninvasive technology aimed to treat and cure those who suffer from chronic wound in a most effective and cost-effective method.

The Bioelectrical Signal Therapy - BST Device treatment can be given in Hospitals, Clinics and Home care settings.

As modern Medicine evolves rapidly towards homecare and reduces hospitalization length, E-QURE’s BST technology is proven invaluable.

E-QURE’s breakthrough novelty noninvasive BST Device is clinically proven and its clinical results are published in professional journals and conferences:

- The safety and efficacy of the BST Device are shown in a multicenter, randomized controlled clinical trial published in journal of EWMA 2007.(1)
- Rapid therapeutic response to the BST Device, Published JWC (Journal of Wound Care) 2010(2).
- The BST mode of action was established in an exploratory studies on more than 600 patients (EWMA conference 2010). (3)

The clinical use of the BST Device for the treatment of chronic wounds and ulcers has been granted regulatory approvals in Europe (CE), Canada, Brazil and Israel. FDA regulatory approval is currently under clinical trials in the USA.

Electrotherapy in wound healing

Electrical flow in the human body plays a significant role in many physiological and pathophysiological conditions (health and disease). Electrotherapy has been also applied specifically to the use of electrical current to speed wound healing(7, 8). The successful use of electrotherapy (Electrical Stimulation) as an adjunct treatment for chronic wounds such as Diabetic foot ulcers, Venous or Arterial leg ulcers and Pressure ulcers has been reported by numerous studies.4 - 8

The international pressure ulcer guidelines including the American and European Pressure Ulcers Advisory Panel (EPUAP & NPUAP) and the National Institute of Health (NIH) rates electrical stimulation as the only treatment for pressure ulcers with highest strength of evidence “A”.4

E-QURE’s BST Electrotherapies Technology

E-QURE’s Bioelectrical Signal Therapy BST breakthrough noninvasive micro current electrotherapy technology was developed after discovering a unique electrical signal measured during the natural healing process of acute healing wounds1-3.

E-QURE’s BST technology, A novel and patented method of operation - mimics the naturally occurring signal of healing wounds ("Normal wounds") and creates an electric induction field around the hard to heal chronic wound, which accelerates the natural wound healing process. The BST Device transmits the signal through a pair of electrodes affixed around the wound on healthy skin and is completely noninvasive and painless.

References:
3. Ricci, E., Aflagan, M. Implications of stochastic resonance in a novel electrical frequency pattern associated with chronic wounds and changes of pattern upon healing. EWMA J 2010