Міністэрства аховы здароўя Рэспублікі Беларусь

ДЗЯРЖАЎНАЯ ЎСТАНОВА «РЭСПУБЛІКАНСКІ НАВУКОВА-ПРАКТЫЧНЫ ЦЭНТР ТРАНСФУЗІЯЛОГІІ І БІАТЭХНАЛОГІІ»

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Areas of use of Alufer-Bel®

Combined haemostatic agent for topical use, the main components of which are iron and aluminum chloride hexahydrates. The main purpose of the Medical Device is to provide a rapid hemostatic effect.

Alufer-Bel® has a local rapid hemostatic effect, occurring immediately after placing it to the wound surface for 7-22 seconds, provides the formation and organization of a blood clot that tightly fixes on the wound surface. Alufer-Bel® additionally has an antiseptic and antiedematous effect.

Alufer-Bel® does not have local necrotic and toxic resorptive effect, there are does not also allergic, embryotoxic and teratogenic properties. Alufer-Bel® is recommended for use as a local haemostatic agent in conditions associated with bleeding from local superficial wounds of the skin and subcutaneous tissue; with bleeding after tonsillectomy, nasal and other bleeding.

Alufer-Bel® is recommended for fixation or gluing of tissues for various surgical interventions, for example, to stop bleeding in case of liver, kidney and spleen injury, hepatectomy, enucleation of the hepatic cyst, adhesion of the parenchyma in kidney, liver, spleen and pancreas surgery; to stop bleeding in gastrointestinal erosive-ulcer hemorrhages.

In patients suffering from Verlhof disease, aplastic, hypoplastic anemia, hemophilia and other conditions that are accompanied by capillary bleeding.

In medical endoscopy, to ensure reliable hemostasis in gastroduodenal bleeding, Alufer-Bel® is injected into a syringe, and then 5 ml of the drug is irrigated under visual control with a Teflon catheter installed in the endoscope instrumental canal. The moment of achievement of hemostasis occurs when a black blood clot is formed, which is tightly fixed to the vessel or damaged mucosa. Irrigation during treatment is carried out from the top down, which ensures the best contact of the source of bleeding with the haemostatic fluid.

If it is necessary to irrigate a large area of the mucous membrane (bleeding acute multiple ulcers or ulcers more than 3 cm in diameter, erosive hemorrhagic gastritis), Alufer-Bed® should be diluted with a solution (5%) of aminocaproic acid or isotonic sodium chloride solution in a ratio of 1: 5. It is necessary to raise the drug even when it is injected through the probe. In this case, the recommended dilution should be 1: 8.

To stop bleeding from the parenchymal organs, the method of application therapy is used, consisting of the following: a gauze pad moistened with Alufer-Bel® is applied to the bleeding surface and pressed lightly. Exposure time necessary to achieve complete hemostasis is 10-15 seconds. If necessary, it can be brought to 30 sec.

the liver is damaged with a wound depth of 5-8 cm, with mixed bleeding, hemostasis is performed by injecting the preparation with a syringe through a thin needle directly into the

depth of the wound. Given the likelihood of elution of fresh blood clots from the lumen of damaged vessels by blood flow, it is necessary to use the high adhesion properties of Alufer-Bel®. To do this, after hemostasis, the edges are reduced and slightly pressed against each other for 5-20 seconds, which ensures their "gluing" without cavity formation. When resecting the lobes of the liver, removing the cyst after topical application of Alufer-Bel® large blood vessels are additionally stitched with catgut. After monitoring the effectiveness of hemostasis, the edges of the wound are sutured in order to restore the anatomical integrity of the organs, as well as to reduce the likelihood of washing out thrombi in the postoperative period.

With bleeding after tonsillectomy, a cotton ball measuring 1x1 cm is impregnated with the Alufer-Bel, pressed against the bleeding site of the tonsillar niche. After 15-2c a blood clot forms. If necessary, the manipulation can be repeated several times (if there is an extensive bleeding zone) without removing the initially formed clot. Then, with a cotton or gauze pad, tightly press the clot formed for a few seconds and remove the swab.

With nasal bleeding come in a similar way. With spontaneous nasal bleeding, a cotton ball measuring 0.5×0.5 cm, impregnated with Alufer-Bel®, is pressed against the bleeding point and held for 20-30 sec. If the bleeding continues, you can, without removing the tampon, to enter next to him another. Since Alufer-Bel® can cause a short-term irritation of the nasal mucosa (burning sensation, sneezing), the nasal mucosa can be lubricated with a 2% solution of dicaine, which prevents the appearance of the above unpleasant sensations.

Stopping bleeding from local skin and skin subcutaneous tissue wounds is done by irrigation the Alufer-Bel® wound or applying a cloth impregnated with Alufer-Bel® to the wound for 10-15 seconds. If you repeatedly use Alufer-Bel® (in the treatment of skin lesions), temporary skin staining in a yellow-brown color, which disappears after discontinuation of the drug.

Contraindications to the use of Alufer-Bel® are not revealed. To date, examples of overdose are also not fixed. Optimal use of Alufer-Bel® does not allow it to enter the mucous surface of the eyes. Alyufer-Bel® is produced in 10 ml vials in the form of a solution. You can leave the pharmacy without a prescription.

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