

IceBand®

by MD R. Ihrman Patent Pend.



- Knee IB 4005
- Shoulder IB 4006 U/IB 4007
- Foot/Ankle IB 4008

Post-op Cryotherapy

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Facts about IceBand®?

IceBand® is a cooling and compression wrap that is specifically developed for the relief of pain and swelling after surgery or injury.

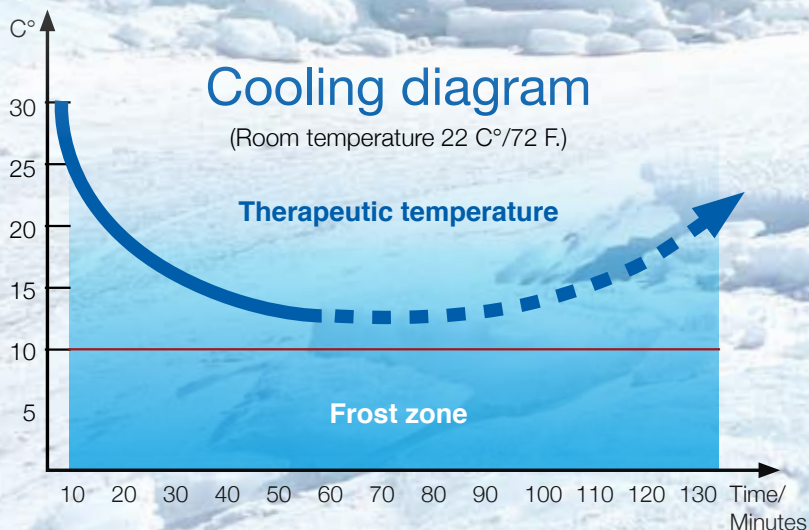
IceBand is safe and user friendly, with a very low risk of side effects and few contraindications. IceBand is ideal for cooling and compression therapy - two key elements of postoperative rehabilitation*. By using the PCE™ technology (Phase Changing Element), IceBand obtains an active cooling phase within the therapeutic interval for at least 60 minutes (see graph).

The design of IceBand is based upon scientific criteria to give optimal cooling and compression.

** During the acute inflammatory phase, the first 72 hours, and during the reparative phase, 72 hours to 6 weeks after injury/surgery cooling has a positive effect (6).*

5 reasons - why to use IceBand®

- Safe
- Easy to handle
- Efficient
- Hygienic (single patient use)
- Cost effective



Why Cryotherapy

General aspects of cooling treatment

- Cooling raises the pain threshold
- Reduced nociceptive nerve stimulation
- Reduces the speed of the nerve transmission
- Diminishes muscle spasms

Cooling reduces swelling and inflammation

- Sympathetic vasoconstriction of the capillaries
- Increased blood viscosity, coagulation and haemostasis.
- Locally reduces cellular metabolism, reduces the inflammatory reaction through a reduction of the release of metabolites.

Advantages of cooling treatment

- Can reduce consumption of pharmaceutical pain killers
- Shorter rehabilitation
- Pain reduction

Features & Benefits

Shoulder IB 4006 U / IB 4007

IceBand should be applied without delay directly after the operation. IceBand can facilitate postoperative rehabilitation and shorten recovery.



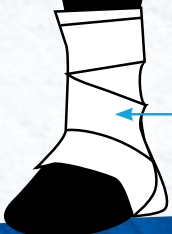
Knee IB 4005

A cooling and compression wrap that has been specifically developed for the relief of postoperative pain and swelling after knee surgery.



Foot/Ankle IB 4008

The unique design will cool the joint for approx. 1 hour. The elastic Velcro fastenings provides compression. All IceBands contains 4 cooling elements.



Efficient technology

- Uses PCET™ (Phase Changing Element) Technology – ice is the most efficient cooling medium and the product uses the superior latent heat of fusion properties of pure water to provide a longer cooling effect (maintains an active cooling phase within the therapeutic interval for around 60 minutes).
- The need for painkillers may be reduced.

Easy to handle

- IceBand is designed to be easy to handle and use in the clinic and can be mounted and adjusted to each patient. IceBand is easy to secure with Velcro bands, which allow control over fit and compression.
- IceBand is safe and easy for the patient to use at home – can be used without assistance. Therefore it is more likely that the patient will comply with the rehabilitation regime and continue to use it.
- 4 elements allow the patient to keep two in the freezer whilst two are being used – allows for continual cooling therapy if needed (nb: always rest the joint for 1 hour at least between applications).

Safe

- Side effects are minimized. The protective, non-woven fabric of the bandage will eliminate the risk of frostbite whilst allowing maximum cooling effect.

Hygienic and disposable

- Disposal: Consists of water, polyethylene, and polypropylene which makes it disposable – more hygienic than reusable products and therefore less of an infection control issue. It can be disposed of at the end of the rehabilitation in household waste. When incinerated, it will turn into CO₂ and water.
- Single patient use which means hygienic and also easy to handle (you do not have to administrate the product or rent out).
- Can be used 30 times – allows the patient to keep the IceBand for the entire rehabilitation period from hospital to home.

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References

1. Karlsson J, Rydgren B, Eriksson BI, Järholm U, Lundin O, Swärd I.
Cryo-cuff for control of post-operative pain Scand.
J Med Sci Sports 1994; 4 : 279
2. Levy A, Marmar F.
The role of cold compression dressing in the postoperative treatment of
total knee arthroplasty Clin. Ortho. Rel. Res. 1993: 174-8
3. Healy W, Seidman J, Pfeifer B, Brown D.
Cold compressive dressing after total knee arthroplasty
4. Schaubel H.
Local use of ice after orthopedic procedures Am J Surg
1946 :72: 771-14
5. McLean D.
The use of cold and superficial heat in the treatment of soft tissue injuries.
Br J Sports Med 1989 : 23 :53-4
6. Kellet J.
Acute soft tissue injuries. A review of the literature Med
Sci Sports Exerc 1986. 18: 489-500
7. Knight K, Londeree Br.
Comparison of blood flow in the ankle of uninjured subjects during therapeutic
application of heat, cold and exercise.
Med Sci Sports Exerc 1980. 12 76-80
8. McMaster WC, Liddle S, Waugh Tr.
Laboratory evaluation of various cold therapy modalities.
Am J Sports Med 1978: 6: 291-4
9. Marty Ivey, MD, Robert V. Johnston, MD, and Tatsuo Uchida, MS
Cryotherapy for postoperative Pain relief following knee arthroplasty
The journal of Arthroplasty vol. 9 no. 3 1994
10. Edzard Ernst, MD, and Veronica Fialka, MD
Ice freezes pain? A review of clinical effectiveness of analgesic cold therapy.
Journal of pain and symptom management vol. 9 no. 1 1994

CAUTION!

All cooling products should be handled with care and only be used in accordance with instructions from a physician.

Should not be used if you suffer from cold allergy,
Raynauds phenomenon or cryoglobulinaemia.

If you are uncertain, always ask your physician.

Patent Pend.
CE MD Class 1
Non Sterile
Manufacturer: IB Medical AB, Sweden

