













Skin and Wound Product Information Sheet

Medihoney Apinate		
Classification	Antimicrobial: Honey – Alginate	
Key Points	 Calcium alginate with medical grade Manuka honey (leptospermum) Antimicrobial effect due to low pH (3.2-4.5) and high osmolarity 	
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Indications	For wounds that show signs and symptoms (S&S) of local wound infection	
	For wounds with moderate to large amounts of exudate	
Precautions	Low pH may cause transient stinging; discontinue if stinging persists.	
Contraindications	Do not use for clients with known sensitivity or allergy to honey or alginates	
	 Do not use for full thickness burns 	
	Do not use to control heavy bleeding	
Formats & Sizes	 Sheet 5 x 5 cm 10 x 12cm Ribbon 1.9 x 30 cm 	MEDIHONEY MEDIHONEY
Application Directions		Rationale
Cleanse/irrigate wound with sterile normal saline or agency		Reduces wound debris and allows for adhesion of
approved wound cleanser; dry peri-wound skin.		dressing or tape.
If required, apply skin barrier to peri-wound skin.		To protect the peri-wound skin from maceration and to
		improve the adhesion of the dressing or tape.
To Apply		
May be cut to wound size. Apply directly to the wound bed. Ensure honey is in contact with all areas of wound bed. Pack lightly into any cavities.		Honey will liquefy with body temperature and melt out. Sufficient honey must be in contact with the wound bed to maintain full therapeutic effect.
Apply appropriate cover dressing to maintain a moisture-		The choice of cover dressing is depended upon the
balanced wound environment.		amount of exudate expected.
To Remove		
Using forceps, gently lift dressing from the wound bed.		To avoid trauma to the wound bed.
If primary dressing adheres to the wound bed then flush the wound with sterile normal saline to loosen dressing.		
Frequency of Dressin	g Change	
·	e amount of exudate. Product is	Ensure sufficient amount of honey is maintained for
	as long as sufficient honey remains in	full therapeutic effect.
contact with the wound bed and is not diluted/washed away		
by the exudate.		
Expected Outcome		
S&S of local wound i	nfection are resolved within 2 weeks.	
S&S of local wound i &/or	nfection are resolved within 2 weeks. with no peri-wound skin maceration. For further information, please co	