

CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

MD Sofia Zafiropoulou - Health Director

Tutati Medical Center - Milan

**Prof. Norberto Confalonieri - Orthopedics and
Traumatology**

Turati Medical Center - Milan

Dr. Emilio Bonizzoni - Health Director

Bonizzoni Medical Office - Busto Arsizio (VA)

Prof. Roberto Reali - Clinical Oncology

Ippocrate Specialist Medical Practice - Vigone (TO)



Orthopedic therapies – Rehabilitation and Pain Therapy
Multicentric Experience From 2015 to 2020

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Scope of work

Multicenter prospective study carried out in the orthopedic field which includes experience on over 13,000 solvent patients treated with CRYOPASS THERAPY, divided into the main orthopedic pathologies, at the aforementioned medical offices in Milan, Busto Arsizio and Vigone. Evaluation and cross-analysis of the evaluation parameters for a more realistic interpretation of the analyzed data.

CRYOPASS THERAPY

-Orthopedic therapies-

REHABILITATION and PAIN THERAPY

Multicentric Experience

From 2015 to 2020

Inclusion criteria

For each pathology, reference was made to the following inclusion criteria:

- Age range*
- Sex*
- Pathology diagnosis made by a specialist doct*
- Patients previously treated with other techniques with little success*
- Exacerbation of the disease not resolved in the previous 6 months*

Identical therapeutic protocol applied using CRYOPASS THERAPY in all cases treated



Orthopedic therapies – Rehabilitation and Pain Therapy
Multicentric Experience From 2015 to 2020

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Evaluation parameters

- *VAS (Visual Analgic Scale) at the beginning and end of treatments*
- *MOTOR DIFFICULTY - flexion
(MOB) - extension
 - *left / right rotation*
 - *LEFT / RIGHT flexion**
- *CALCIFICATIONS calcification dimension at the beginning and end of treatments
(if any)*
- *INSTRUMENTAL EVALUATIONS (any radiographs / CT / MRI / ultrasounds)*

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Visual Analogical Scale – VAS (Scott Huskisson, 1976)

It is the visual representation of the extent of pain that the patient subjectively feels. The VAS is represented by a 10 cm long line in the original validated version, with or without notches at each centimeter.

One end indicates the absence of pain and corresponds to 0, the other end indicates the worst pain imaginable and corresponds to 10. The scale is filled in manually by the patient who is asked to draw on the line a sign representing the perceived pain . The distance measured from the 0 end corresponds to the subjective measure of pain.

The patient indicates on the line the point that represents the intensity of his pain at that moment; the examiner scores using a graduated scale placed on the rear face of the ruler.

Compared to the verbal numerical scale, this scale has the limit of requiring a certain visual and motor coordination and cannot be used during a telephone interview in the patient at home.

It is an easy to use scale that is widely used and understood by most patients. Easily repeatable, it is also used in children aged > 7 years.

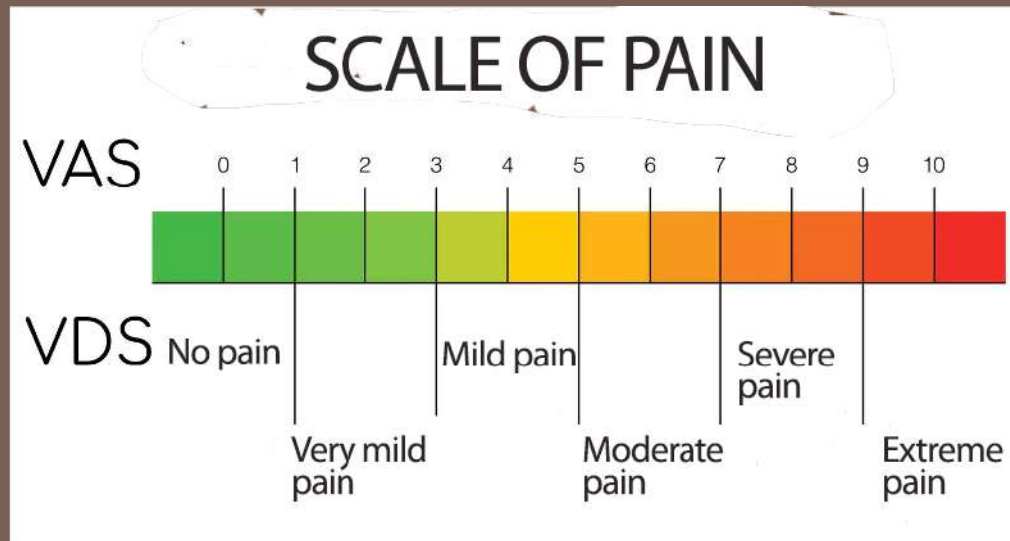


Orthopedic therapies – Rehabilitation and Pain Therapy
Multicentric Experience From 2015 to 2020

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

Visual Analogical Scale – VAS (Scott Huskisson, 1976)



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

MOB – Visual assessment of the Motor Difficulty

It is the visual representation of the range of movement that the patient is able to perform in the absence of pain.

The MOB according to the cases is represented by movements of flexion, extension, LEFT / RIGHT rotation, LEFT / RIGHT flexion

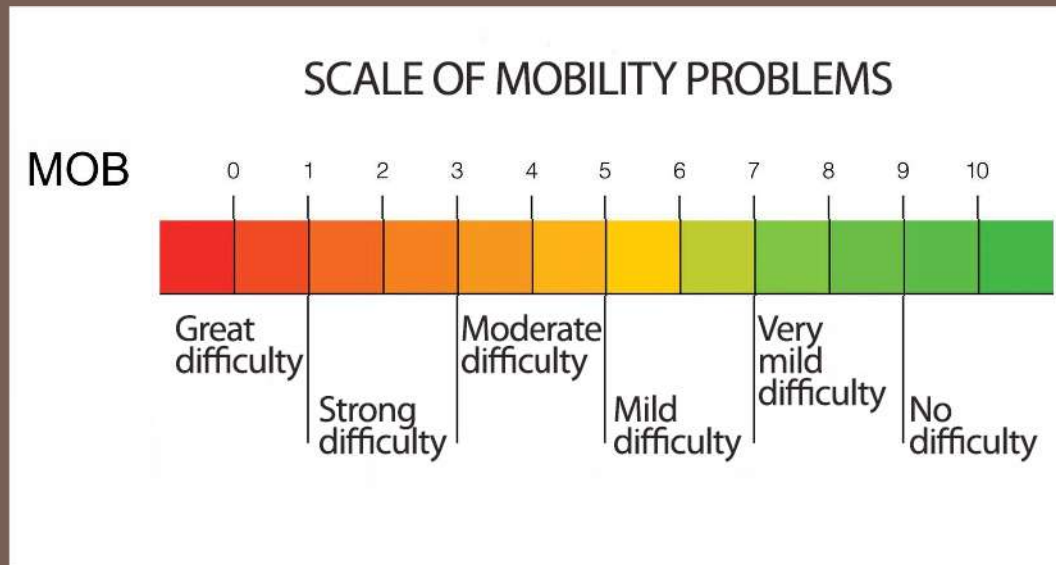
The parameters are shown on a scale from 0 to 10 where 10 is the total freedom of movement and 0 is the impossibility of movement.

The evaluation is performed with postural exercises specific to the anatomical district concerned, aimed at highlighting any movement deficits

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

MOB – Visual assessment of the Motor Difficulty

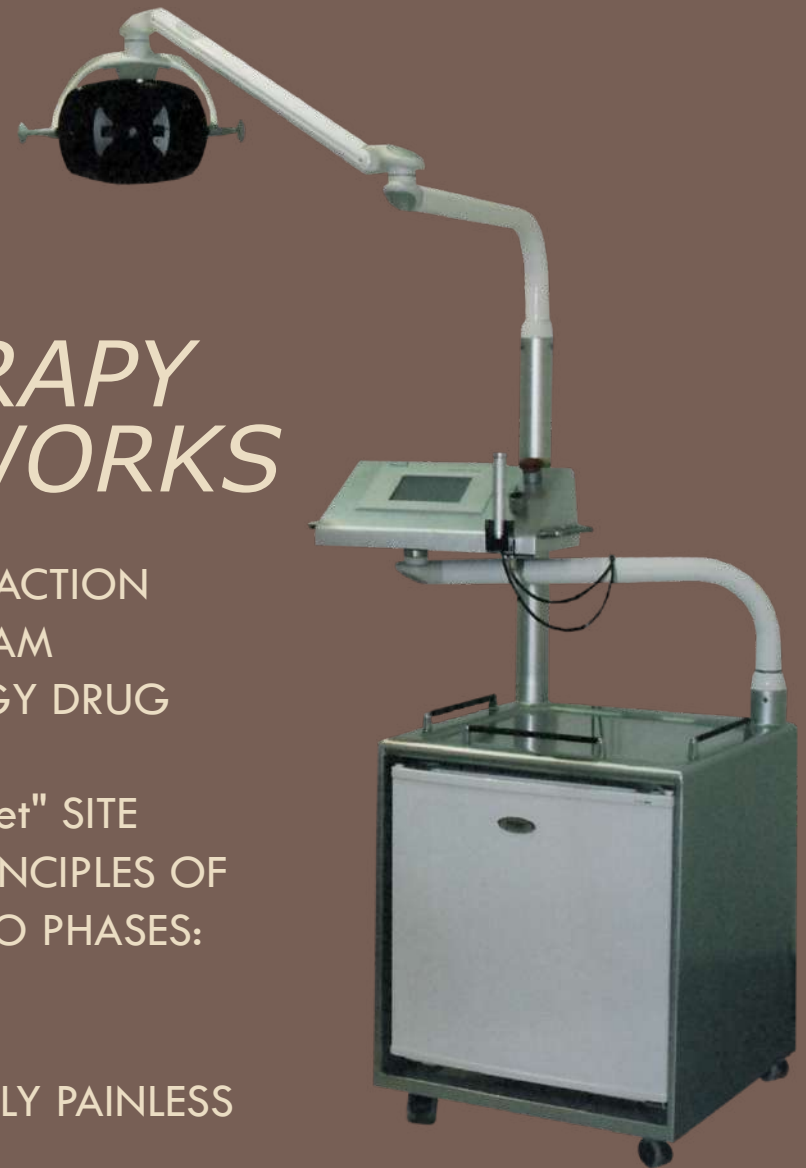


Materials and methods

- Various drugs, galenics or active ingredients are used according to the protocols established for each pathology applied transcutaneously through CRYOPASS THERAPY
- Molecular application by technique CRYOPASS THERAPY (Lasericemed molecular laser)

CRYOPASS THERAPY THIS IS HOW IT WORKS

IT IS AN INSTRUMENT THAT USES THE KINETIC ACTION
GENERATED BY THE PHOTONS OF A LASER BEAM
(wavelength 635 nm) TO "charge" WITH ENERGY DRUG
MOLECULES FROZEN AT -18C, FAVORING THE
TRANSDERMAL PENETRATION UP TO THE "target" SITE
THE CRYOPASS THERAPY IS BASED ON THE PRINCIPLES OF
QUANTUM PHYSICS AND TAKES PLACE IN TWO PHASES:
FIRST PHASE - "molecular excitation"
SECOND PHASE - "molecular diffusion"
THE DRUG PENETRATION TREATMENT IS TOTALLY PAINLESS



HERE'S HOW IT'S USED

AS THE FIRST OPERATION, THE DRUG THAT IS INTENDED TO BE CARRIED OUT IS DISSOLVED IN THE "Laser Ice" CRYOAPPLICATOR CONTAINING A "gel" DESIGNED SPECIALLY TO HELP THE DISTRIBUTION OF THE DRUG

THEN IT IS FROZEN TO - 18C °

THERAPY IS PERFORMED BY CONNECTING THE FROZEN CRYO APPLICATOR TO THE LASER SOURCE TO PERFORM THE APPLICATION IS TRANSDERMAL



DRUG PENETRATION

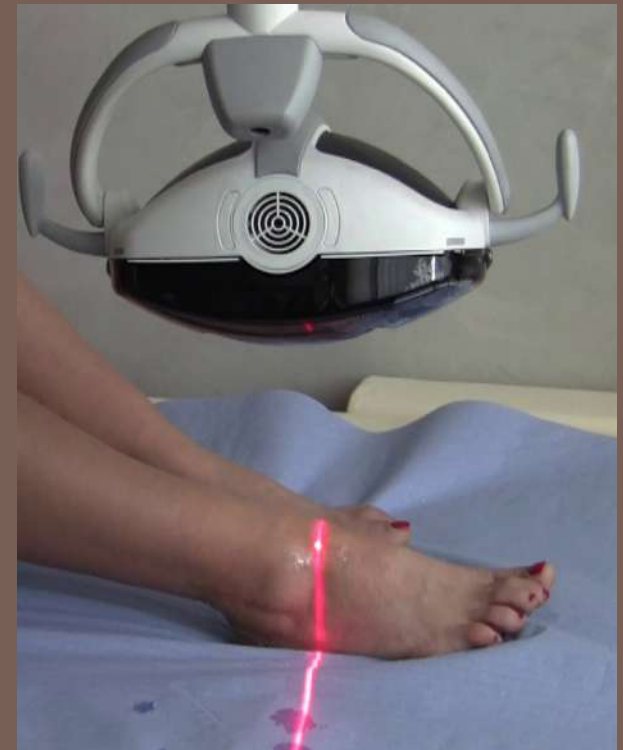
FIRST PHASE "molecular excitation"
THE "Laser Ice" CRYO APPLICATOR IS
APPLIED DIRECTLY ON THE SKIN IN
THE ANATOMICAL DISTRICT TO BE
TREATED
THE BODY HEAT MELTS THE FROZEN
CRYO APPLICATOR RELEASING THE
ENERGY "trapped" IN THE DRUG
MOLECULES THAT PASS THE SKIN
BARRIER CONCENTRATING UNDER
THE DERMA



DRUG PLACEMENT

SECOND PHASE "molecular diffusion"
THE DRUG MOLECULES CONCENTRATED IN
THE EXTRACELLULAR MATRIX ARE AGAIN
"excited" USING A SECOND SCyearsNG LASER
TO OBTAIN AN EXPLANATION OF THE DRUG
THROUGH THE TISSUES UNTIL THEY REACH
THE "target" SITE

A SPECIAL SOFTWARE AUTOMATICALLY
ADJUSTES ALL PARAMETERS TO OBTAIN THE
DRUG CONCENTRATION IN THE SELECTED
ANATOMICAL DISTRICT



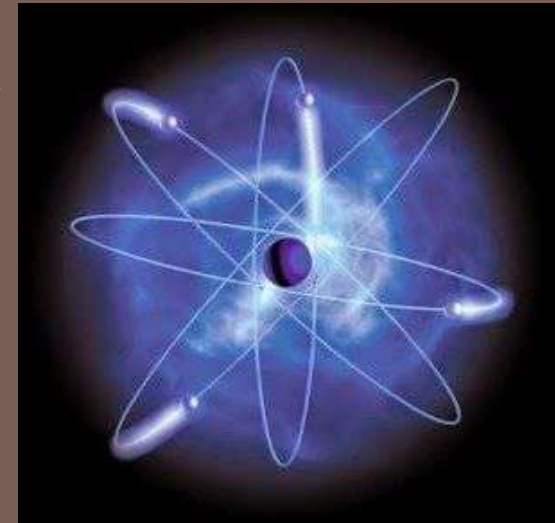
CRYOPASS - QUANTUM PHYSICS

QUANTUM PHYSICS IS THE STUDY OF VERY SMALL OBJECTS, SUCH AS ELECTRONS AND ATOMS, CONSEQUENTLY QUANTUM MEDICINE DESCRIBES THE INTERACTION OF THEM WITH THE ELEMENTARY STRUCTURES OF THE HUMAN BODY

THE UNIT OF MEASUREMENT: "how much" OF LIGHT IS THE "photon", "how much" OF MATTER IS "the electron".

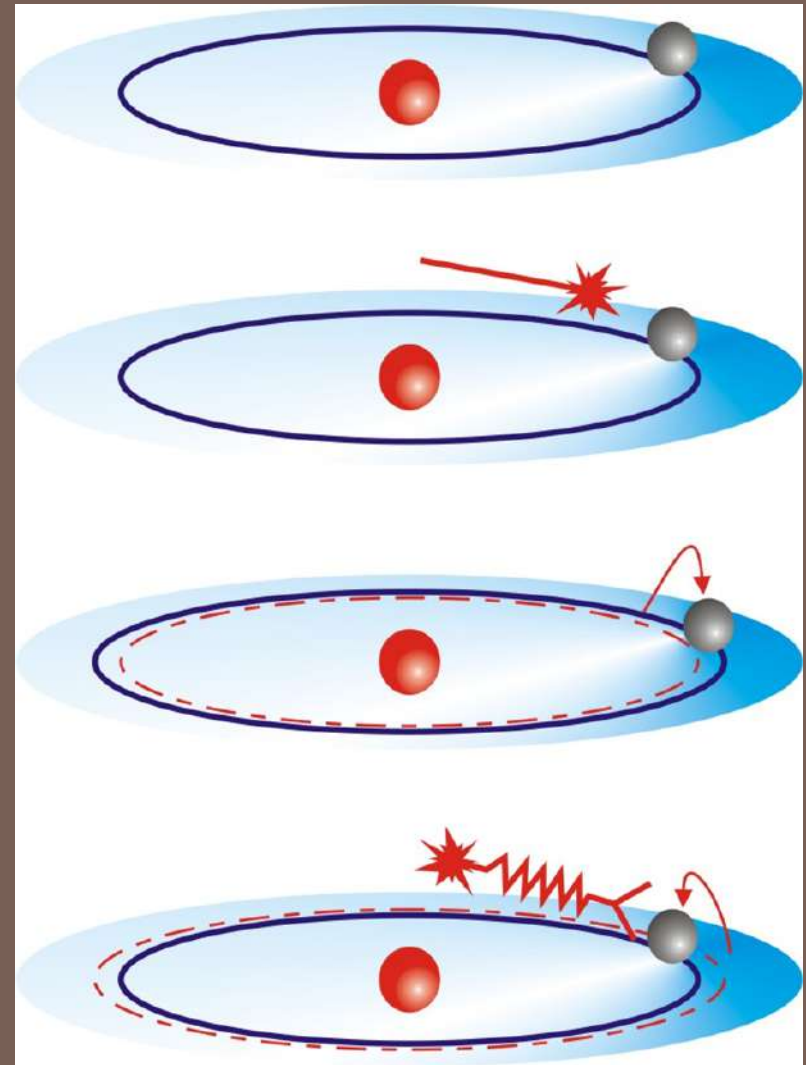
A "how much" CAN BE BOTH WAVE AND PARTICLE
QUANTUM PHYSICS DOES NOT FOLLOW THE TRADITIONAL RULES OF CLASSICAL PHYSICS, IN THE INFINITELY SMALL NOTHING IS CERTAIN, BUT ONLY PROVABLE, OR YOU CANNOT KNOW WITH PRECISION WHERE A "how much" IS OR WHERE IT IS GOING, BUT YOU CAN PROBULD IT ', AS FOR EXAMPLE THE PROBABILITY THAT AN ELECTRON FOLLOWS A CERTAIN TRAJECTORY OR A PHOTON IMPACT WITH AN ELECTRON CAUSING

"A quantum leap"



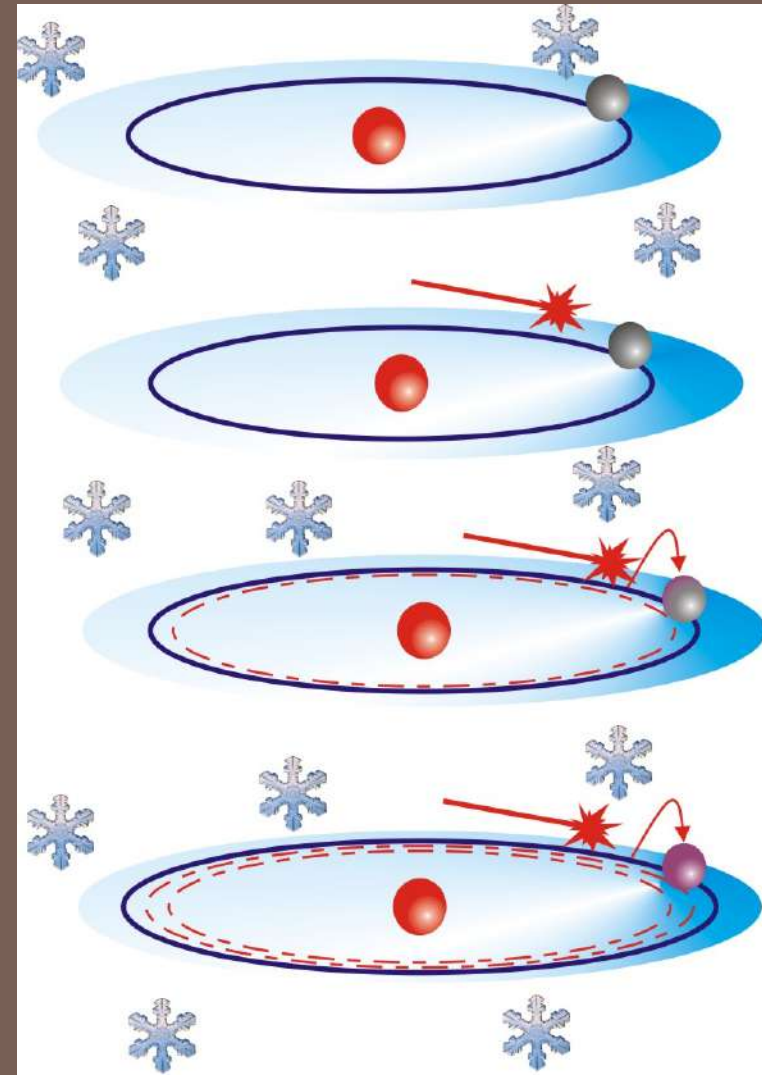
FIRST PHASE MOLECULAR EXCITATION

AT ROOM TEMPERATURE
IF A PHOTON HITS THE ELECTRON OF A
MOLECULE, THE ENERGY APPLIED TO THE
ELECTRON CAUSES IT TO PASS TO A
HIGHER ENERGY LEVEL. "Quantum leap"
THIS ENERGY LEVEL IS NOT STABLE, SO THE
ELECTRON RETURNS TO ITS ORIGINAL
LEVEL BY RE-EMITING A PHOTON



FIRST PHASE MOLECULAR EXCITATION

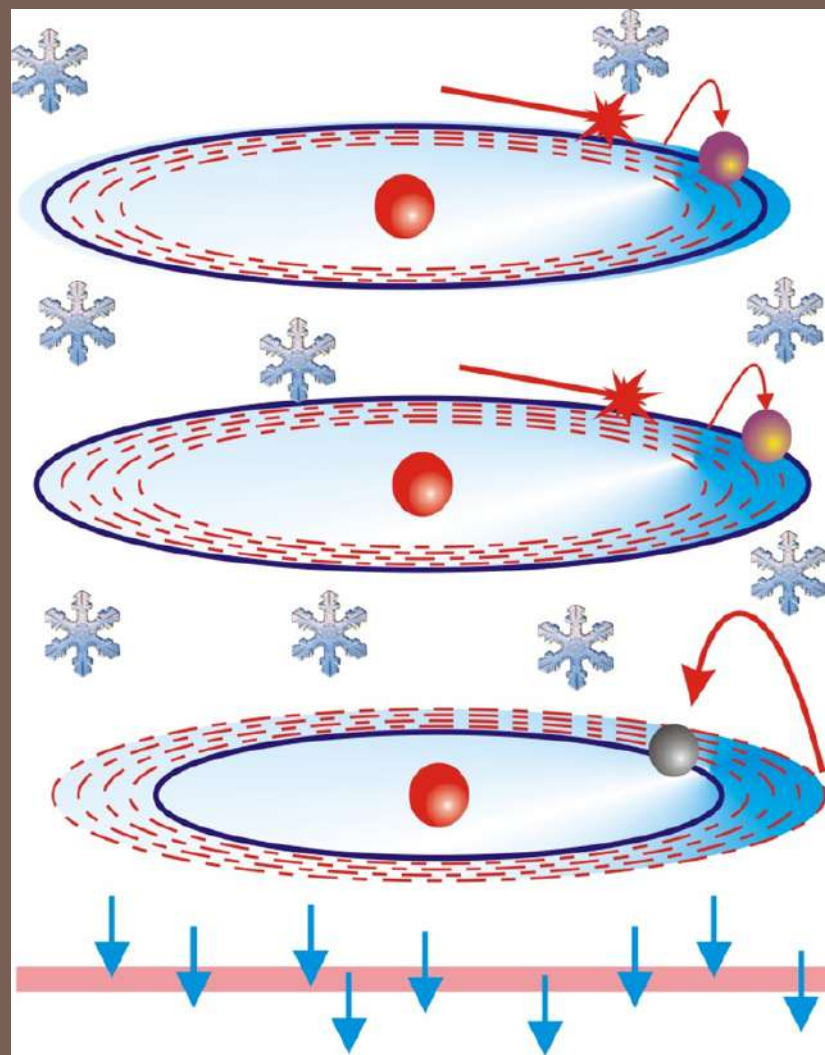
AT TEMPERATURE - 18C °
IF WE APPLY "photonic" ENERGY TO THE
LOW TEMPERATURE MOLECULE AGAIN, WE
OBSERVE THAT THE ELECTRON DECAY
PROCESS AT THE INITIAL LEVEL IS SLOWER
THAN THE ELECTRON EXCITATION PROCESS
AT A HIGHER ENERGY LEVEL
THEREFORE THEREFORE AN
ACCUMULATION OF POTENTIAL ENERGY AT
THE MOLECULE LEVEL



Orthopedic therapies – Rehabilitation and Pain Therapy
Multicentric Experience From 2015 to 2020

FIRST PHASE MOLECULAR EXCITATION

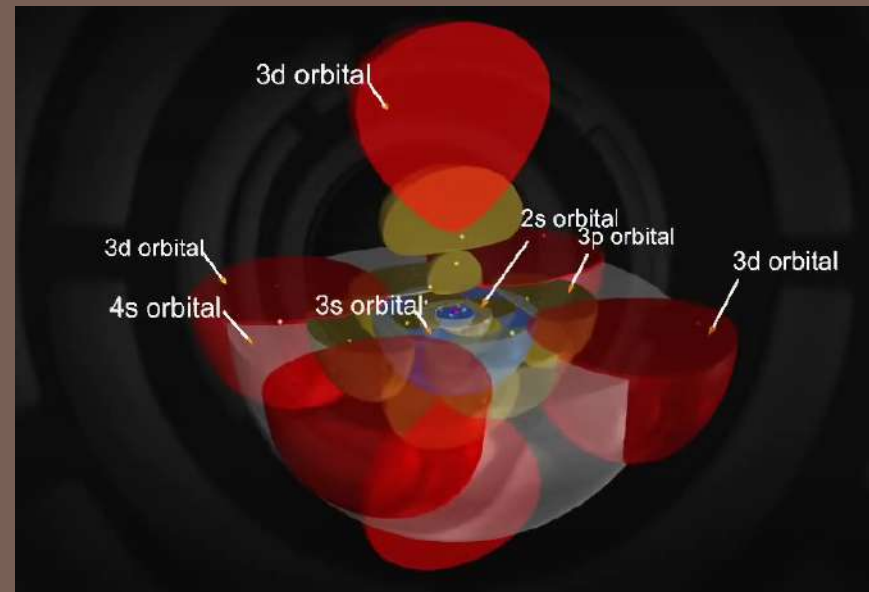
CRYOAPPLICATOR - CUTE INTERFACE
THE ENERGY FORWARDED BY THE
MOLECULE IS HELD IN THE ORBITALS AT A
HIGHER ENERGY LEVEL BY LOW
TEMPERATURES IN THE FORM OF
POTENTIAL ENERGY. IN CONTACT WITH THE
SKIN, THE PRODUCT INCREASES THE
TEMPERATURE AND MELTS, INSTANTLY
RELEASING THE ENERGY ACCUMULATED AS
KINETIC ENERGY, ALLOWING THE
PENETRATION OF THE DRUG UP TO THE
DERMA



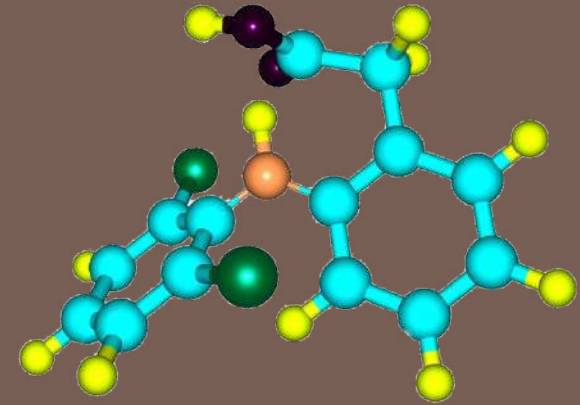
FIRST PHASE MOLECULAR EXCITATION

LET'S SEE WHAT ACTUALLY HAPPENS, THE MOLECULES HAVE AN ELECTRONIC CLOUD IN WHICH THE ELECTRONS ORBIT, THE PHOTONIC STIMULATION AT "LOW TEMPERATURE" CAUSES A DEFORMATION OF THE ORBITAL DUE TO THE ABSORPTION OF ENERGY ON THE MOLECULE

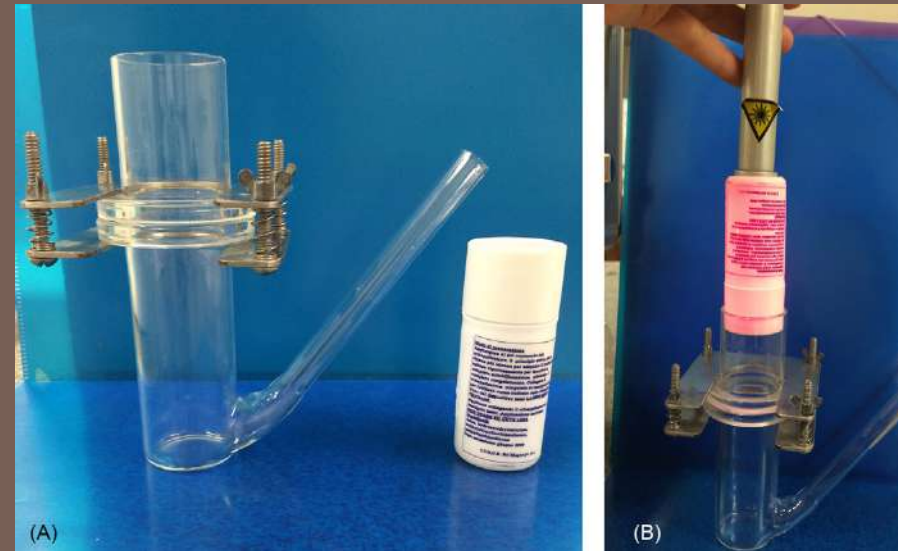
"The release of this energy will allow the passage of the skin barrier"



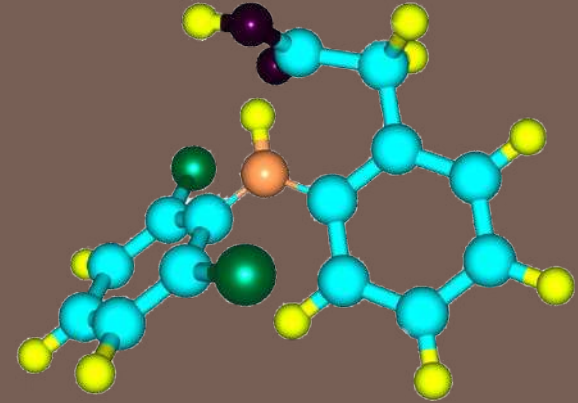
FIRST PHASE MOLECULAR EXCITATION



A SIMPLE EXPERIMENT ALLOWS TO TEST THIS CAPACITY OF PENETRATION USING "Franz Cell" WHERE A DISC OF EPIDERMIS SEPARATES THE PRODUCT TO BE TESTED ON ONE SIDE, A RECEIVING SOLUTION ON THE OTHER THE SYSTEM IS THERMOSTATED AT 37C ° TO SIMULATE THE BODY TEMPERATURE. THE EXPERIMENT PROVIDES A TEST WITH A DRUG SOLUTION, COMPARED WITH THE SAME CONCENTRATION INSERTED IN A FROZEN CRYOAPPLICATOR AND COUPLED TO THE LASER SOURCE



FIRST PHASE MOLECULAR EXCITATION



DICLOFENAC SODIUM TEST

SOLUTIONS USED:

DICLOFENAC SODIUM 1%

DICLOFENAC SODIUM 1,5%

DICLOFENAC SODIUM 2%

FROM THE "red" GRAPH IT IS NOTED

THAT THE DRUG APPLIED WITH THE

CRYO APPLICATOR GUARANTEES

THE PASSAGE TO THE UNDERLYING

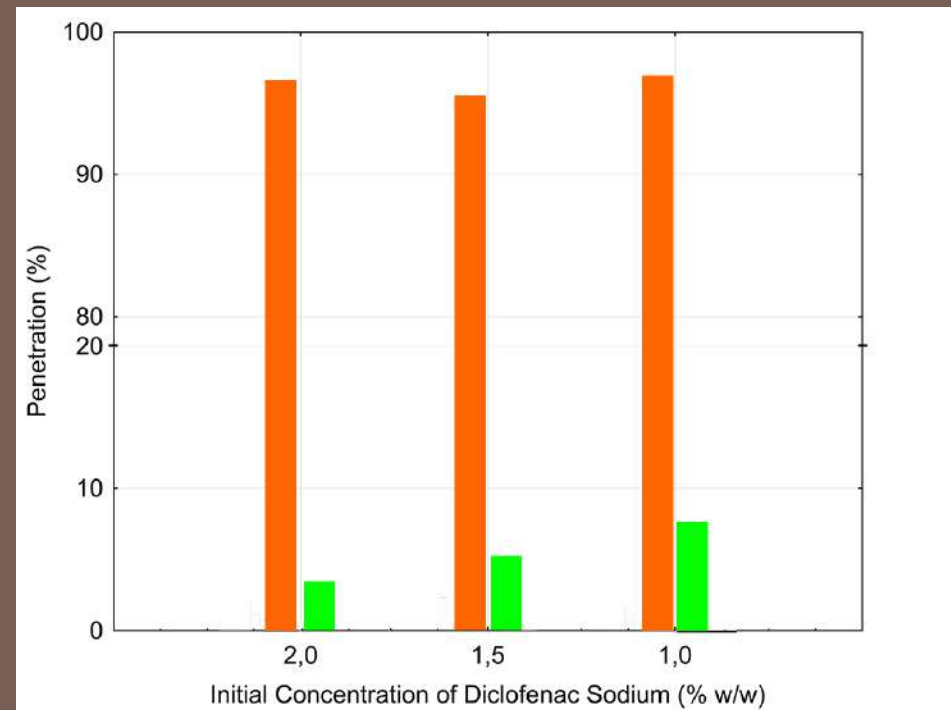
SOLUTION OF MORE THAN 90% OF

THE PRODUCT, WHILE USING A

SOLUTION WITHOUT LASER

APPLICATION THE PASSAGE IS

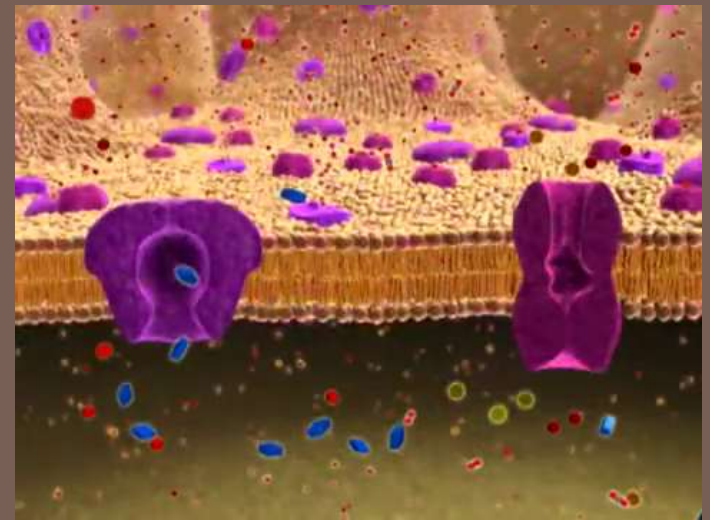
ALWAYS LESS THAN 10% "green"



SECOND PHASE - MOLECULAR DIFFUSION

THE "matrix of life" MODEL IS ONE OF THE MOST IMPORTANT DEVELOPMENTS IN MODERN SCIENCE FOR A BETTER UNDERSTANDING OF THE STRUCTURE AND OF THE ENERGY EXCHANGES THAT OCCUR IN THE EXTRACELLULAR MATRIX, A WHOLE "interconnected" CONTINUOUS SYSTEM COMPOSED OF A DYNAMIC CRYSTAL MULTI NETWORK AND DYNAMICS, "liquid crystal structure"

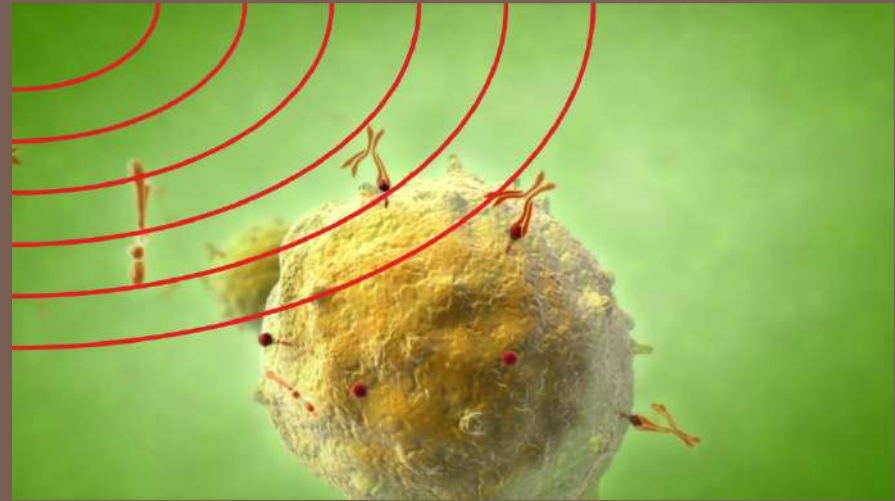
FORM A "semiconductor" COMMUNICATION NETWORK CAPABLE OF CARRYING BIOELECTRONIC SIGNALS AND MOLECULES BETWEEN CONNECTIVES AND CYTOSKELETERS OF ALL THE BODY CELLS



SECOND PHASE - MOLECULAR DIFFUSION

PHOTOBIOLOGY EXPLAINS THE EFFECT THAT LIGHT HAS ON A LIVING BIOLOGICAL SYSTEM, IN PARTICULAR THE ABSORPTION OF LOW INTENSITY PHOTONS BY THE "matrix of life"

THERE IS AN "optical window" BETWEEN 600 TO 950 nm WHERE TISSUE PENETRATION IS MAXIMUM IN WHICH "photons" CAN ACTIVATE CELLULAR PHOTORECEPTORS OR ACCELERATE ELECTRONIC TRANSFER REACTIONS

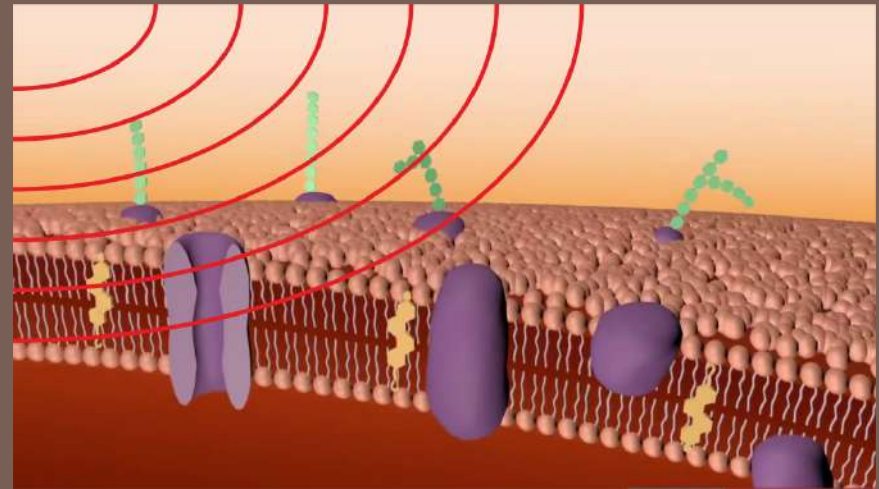


SECOND PHASE - MOLECULAR DIFFUSION

, THE INTERACTION BETWEEN "photons" AND PHOTORECEPTOR TAKES PLACE ON ENZYMATIC PROTEIN COMPONENTS, THE "C-cytochrome-oxidase" WHOSE EXCITATION FREQUENCY IS 635nm, ACTIVATION INCREASES ENERGY PRODUCTION IN THE FORM OF ATP

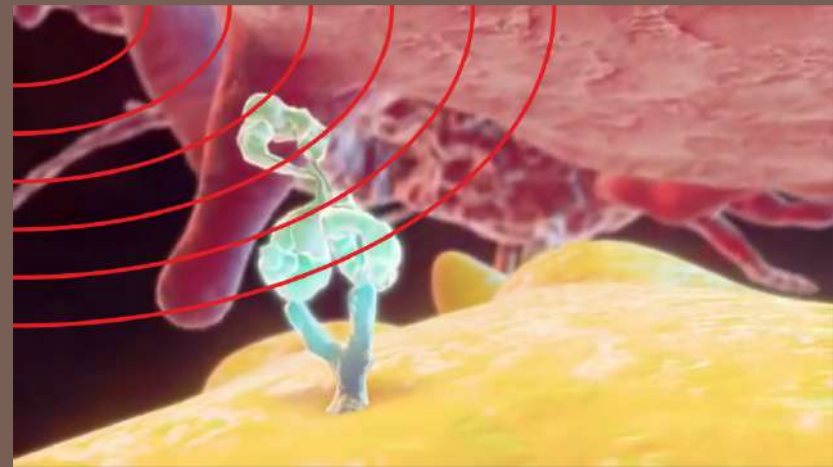
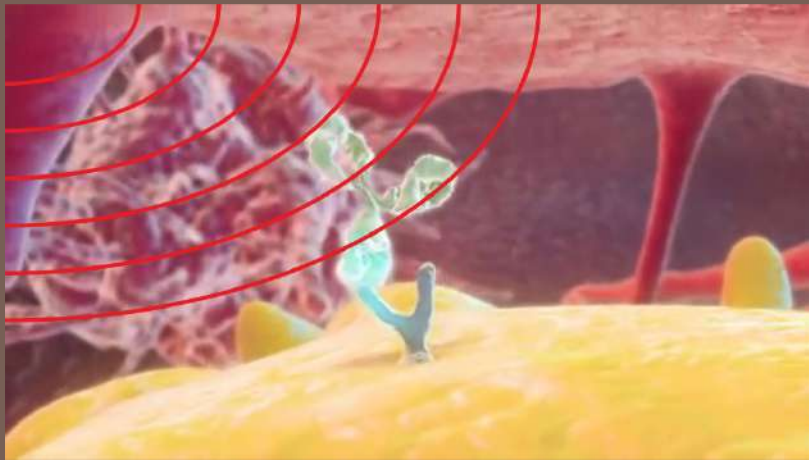
THE DRUG MOLECULES NOW DIFFUSED IN THE "matrix of life" ARE FREE TO MOVE THROUGH THE LIQUID CRYSTAL STRUCTURES, TO REACH THE ENERGY EXCHANGE POINTS PRESENT ON THE CELL MEMBRANE AND BE USED.

- EXACTLY THE SAME MECHANISM THAT OCCURS WITH A SYSTEMIC ADMINISTRATION, BUT WITH A MORE TARGETED ACTION.



SECOND PHASE - MOLECULAR DIFFUSION

LASER STIMULATION FURTHER PROMOTES THE CAPACITY OF DRUG MOLECULES, BY CELLULAR RECEPTORS, INCREASING THE CAPACITY OF THE THERAPEUTIC EFFECTIVENESS, ESPECIALLY IN ALL THOSE STREETS OF POSTAL STREETS



SECOND PHASE - MOLECULAR DIFFUSION

INSTRUMENTAL INVESTIGATION

WITH A SIMPLE EXPERIMENT IT IS POSSIBLE
TO HIGHLIGHT THE ANSWER IN THE "matrix
of life" OF INCREASE IN ATP PRODUCTION

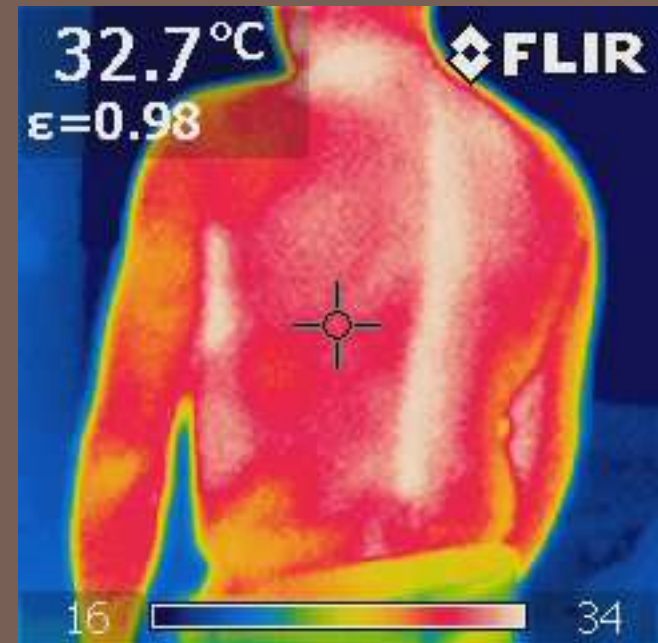
PATIENT WITH SPORTS TRAUMA BILATERAL
MUSCULAR CONTRACTURE IN LUMBUS -
SACRAL CORRESPONDENCE TREATED WITH
CRYOAPPLICATOR CONTAINING MUSCORIL
AND DICLOFENAC.



SECOND PHASE - MOLECULAR DIFFUSION

YOU ARE USING A THERMAL CAMERA WITH
A TEMPERATURE RESOLUTION 0.1C°

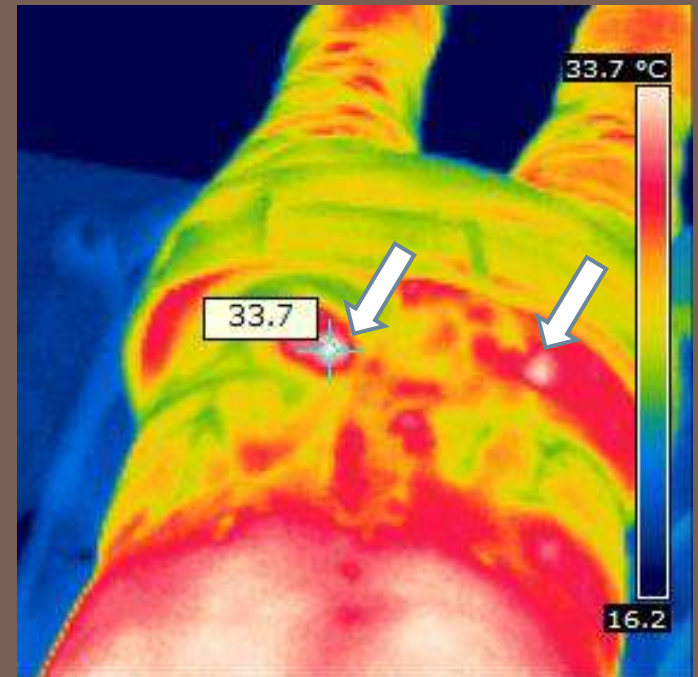
THERMOGRAPHY BEFORE CRYOPASS
THERAPY TREATMENT
NO PARTICULAR TEMPERATURE CHANGES ARE
NOT OBSERVED IN THE AREAS AFFECTED BY
TRAUMA
ONLY BY USOGRAPHY IT IS POSSIBLE TO
HIGHLIGHT THE ALTERATIONS OF THE
STRUCTURES



THERMOGRAPHY BEFORE TREATMENT

SECOND PHASE - MOLECULAR DIFFUSION

AFTER THE TREATMENT, THE APPEARANCE OF TWO POINTS OF HYPERTHERMIA LOCALIZED EXACTLY IN CORRESPONDENCE OF THE MUSCULAR INJURY POINTS, THAT IS TO EMPHASIZE HOW THE THERAPY IS TARGETED BECAUSE IN CORRESPONDENCE OF THE CELLS INTERESTED WITH THE PROCESSES ATP RELEASE, WHICH CAN BE REVEALED BY THE INCERMENTATION OF TEMPERATURE



THERMOGRAPHIC IMAGE AT THE END OF THERAPY

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Pathology: TREATED PATIENT
ARTHROSIS n° 1675



CLINICAL CASES



Orthopedic therapies – Rehabilitation and Pain Therapy
Multicentric Experience From 2015 to 2020

CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Pathology: TREATED PATIENT ARTHROSIS n° 1675

- Cervical arthrosis n° 236
- Shoulder osteoarthritis n° 182
- Elbow arthrosis n° 225
- Hand osteoarthritis n° 195
- Arthrosis of the spine n° 247
- Coxo-femoral arthrosis n° 170
- Knee osteoarthritis n° 260
- Ankle arthrosis n° 160



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: CERVICAL ARTHROSIS

- *Total cases 236*
- *Age from 54 to 86 years*
- *110 men – 126 women*
- *Pathology diagnosis made by a specialist doctor*
- *Patients previously treated with other techniques with little success*
- *Exacerbation of the disease in the previous 6 months*
- *Use of a single therapeutic protocol using CRYOPASS THERAPY*



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020



Therapeutic Protocol: **CERVICAL ARTHROSIS**

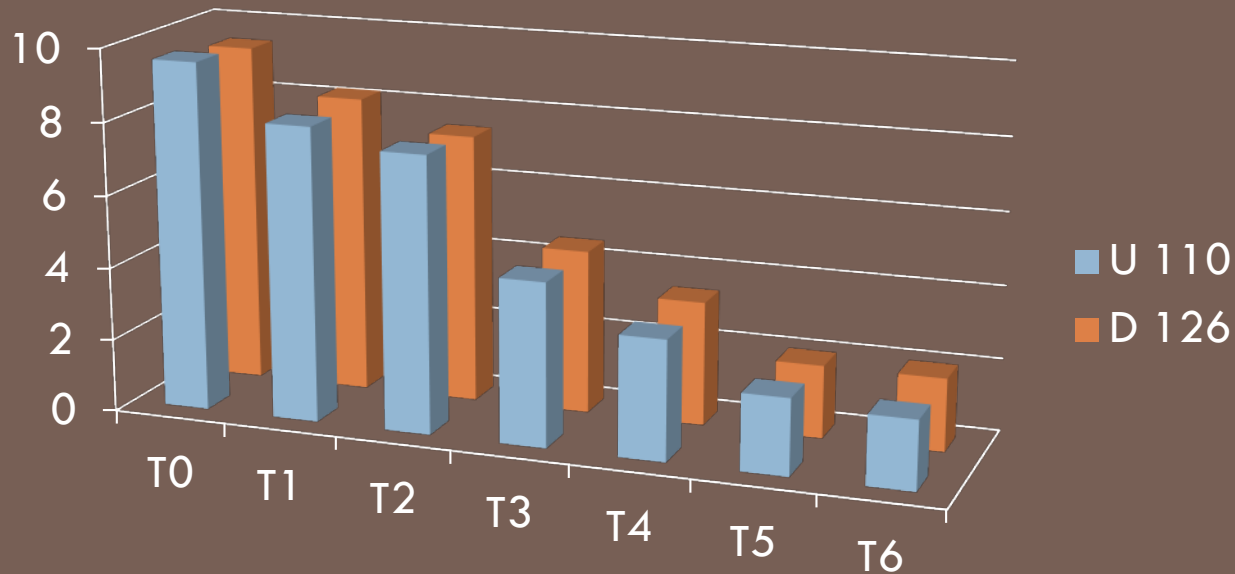
- **Methylprednisolone hemisuccinate 40mg**
- **Glucosamine sulfate 600mg**

- **Diclofenac 75mg**
- **Chondroitin sulfate 600mg**

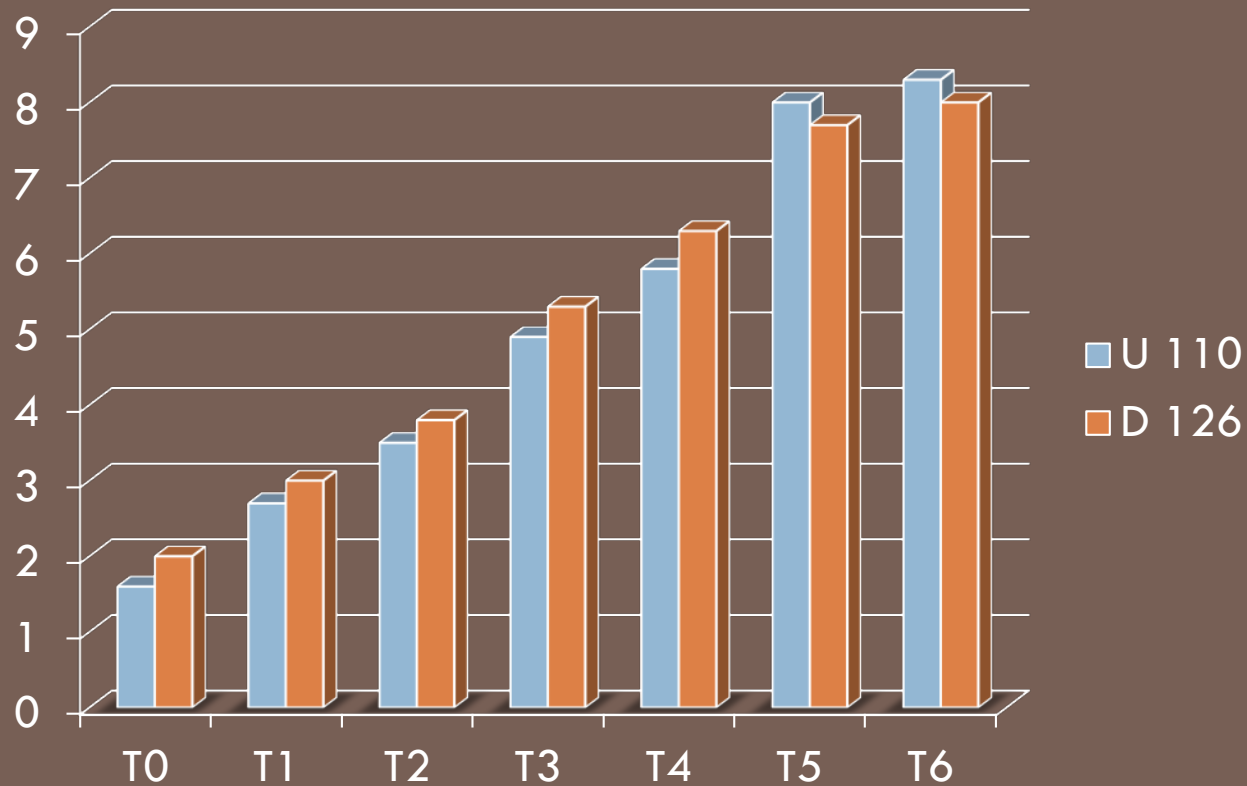
- **1 therapy every 5 days for 4 weeks**

- **(if there are CALCIFICATIONS)**
- **+ EDTA 600mg**

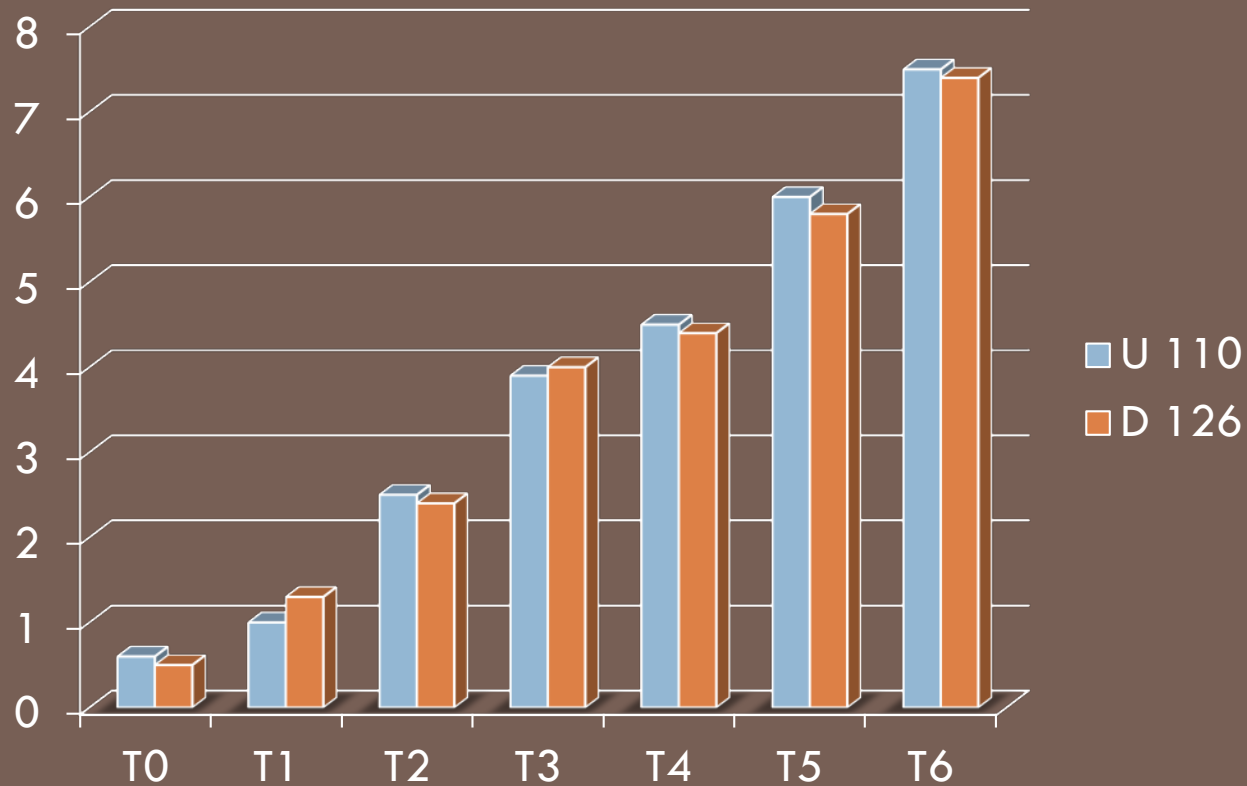
VAS: CERVICAL ARTHROSIS



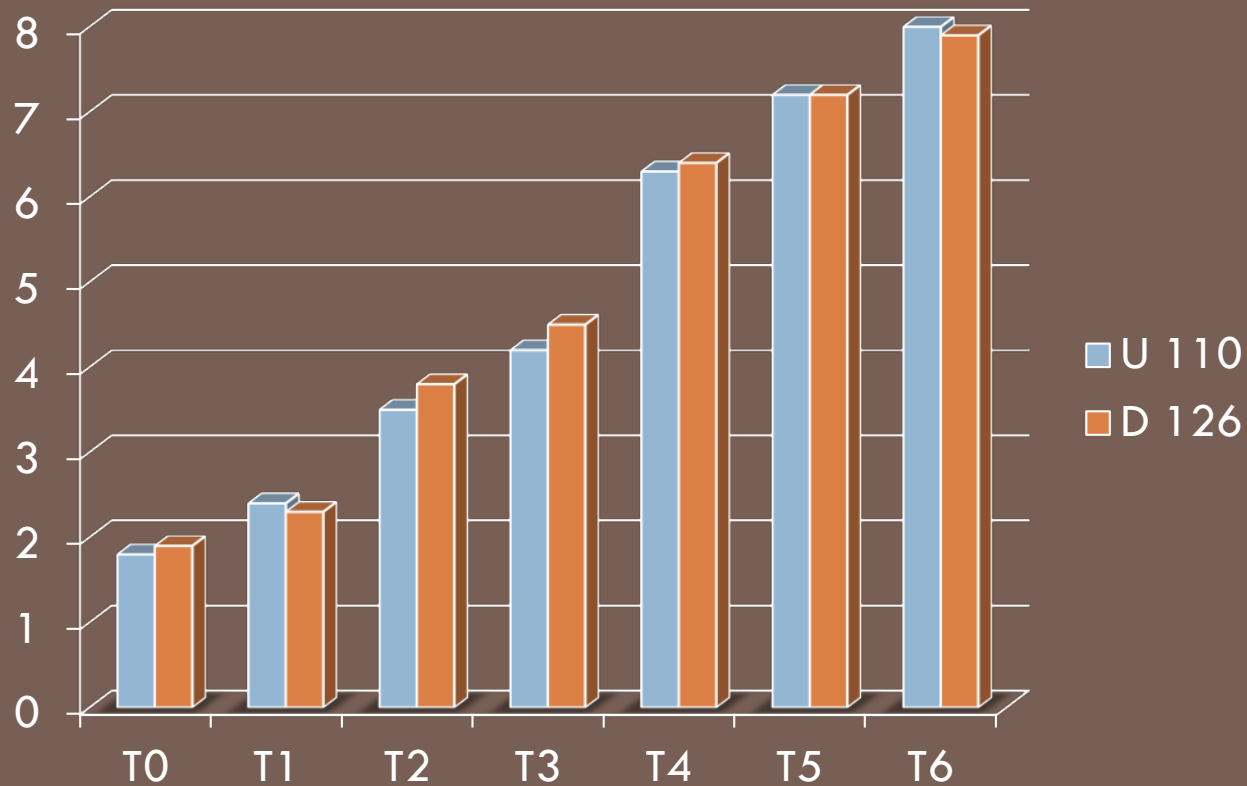
MOB flex: CERVICAL ARTHROSIS



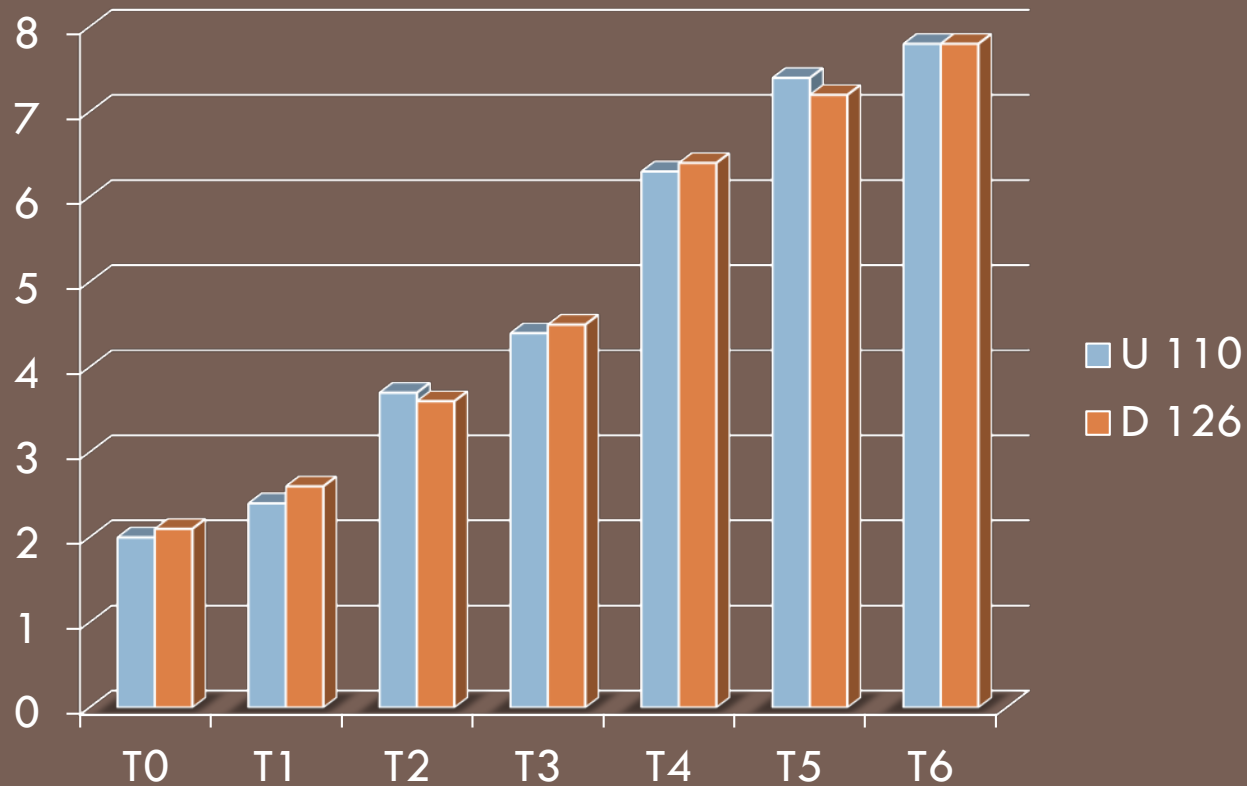
MOB extension: CERVICAL ARTHROSIS



MOB rotation LEFT/RIGHT: CERVICAL ARTHROSIS

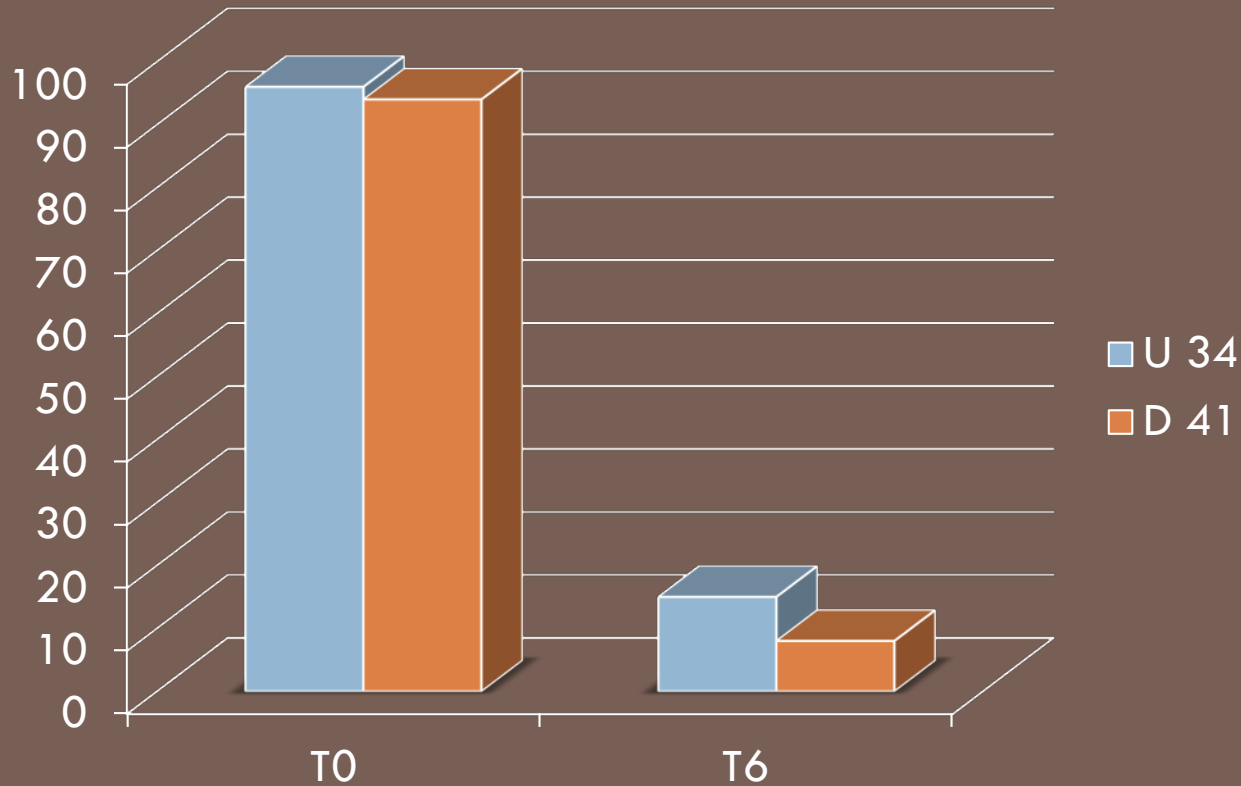


MOB flex LEFT/RIGHT: CERVICAL ARTHROSIS

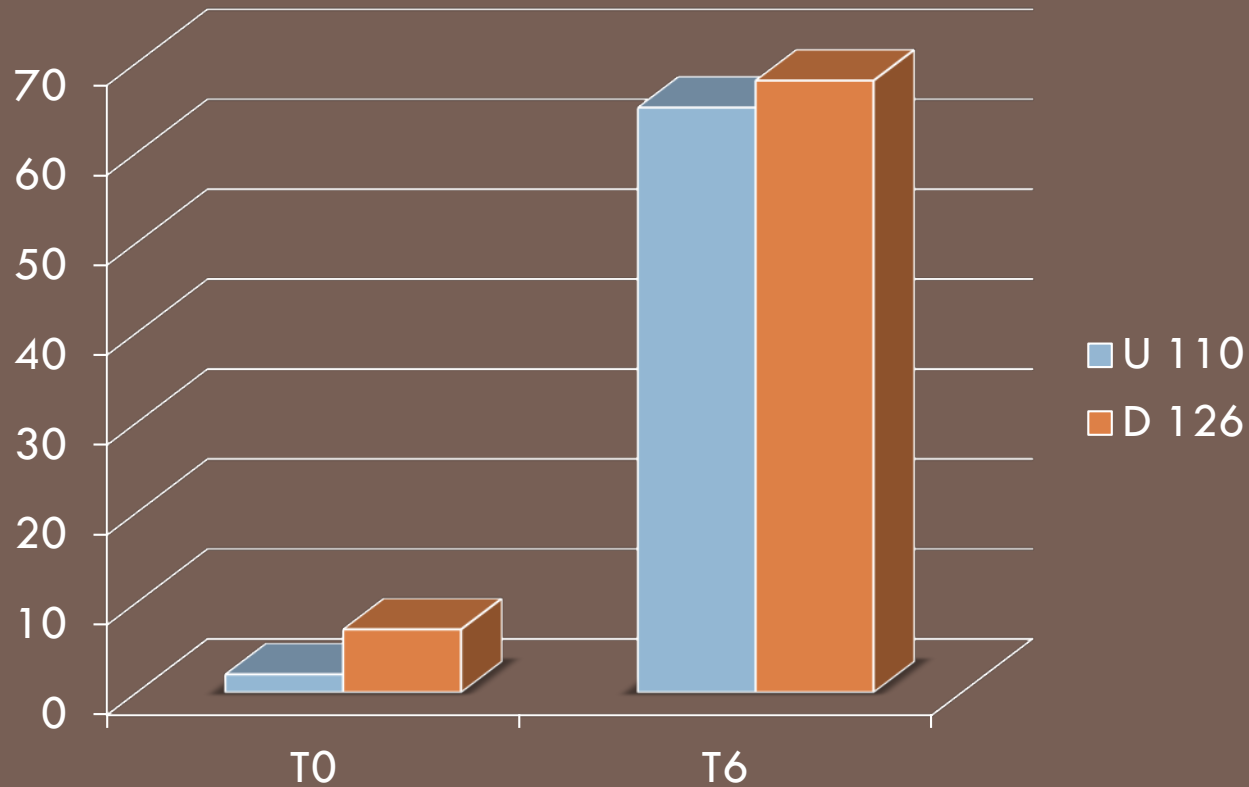


CALCIFICATIONS rid.%: CERVICAL ARTHROSIS

(present in campione 31,78% con CALCIFICATIONS trattati anche con EDTA)



Instrumental Improvement Investigation %: CERVICAL ARTHROSIS



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020



results: CERVICAL ARTHROSIS

- VAS rid. 75,5%
- MOB flex mig. 63,5%
- MOB est mig. 69%
- MOB rot LEFT/RIGHT mig.
61%
- MOB flex LEFT/RIGHT mig. 57,5%
- Calcif. (if any) rid. 83,5%
- Ind. instrumental mig. 62%

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020



conclusions: **CERVICAL ARTHROSIS**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: **SHOULDER ARTHROSIS**

- Total cases 182
- Age from 47 to 76 years
- 94 men – 88 women
- Pathology diagnosis made by a specialist doctor
- Patients previously treated with other techniques with little success
- Exacerbation of the disease in the previous 6 months
- Use of unique Therapeutic Protocol through CRYOPASS THERAPY



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Therapeutic Protocol: **SHOULDER ARTHROSIS**

- **Methylprednisolone hemisuccinate 40mg**
- **Glucosamine sulfate 600mg**

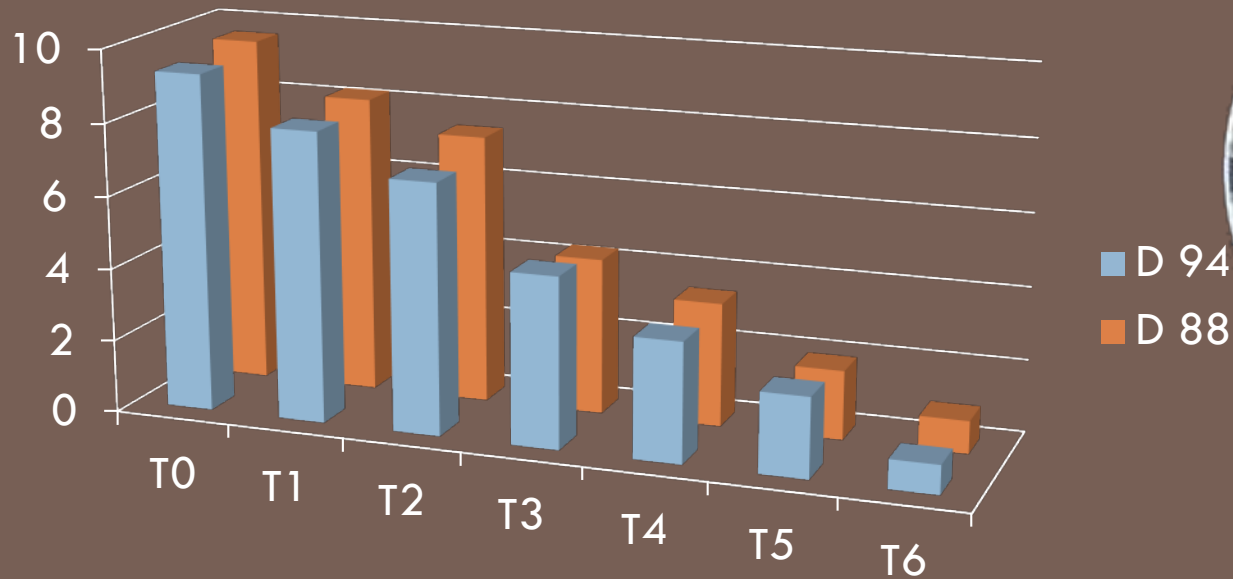
- **Diclofenac 75mg**
- **Chondroitin sulfate 600mg**

- **1 therapy every 5 days for 4 weeks**

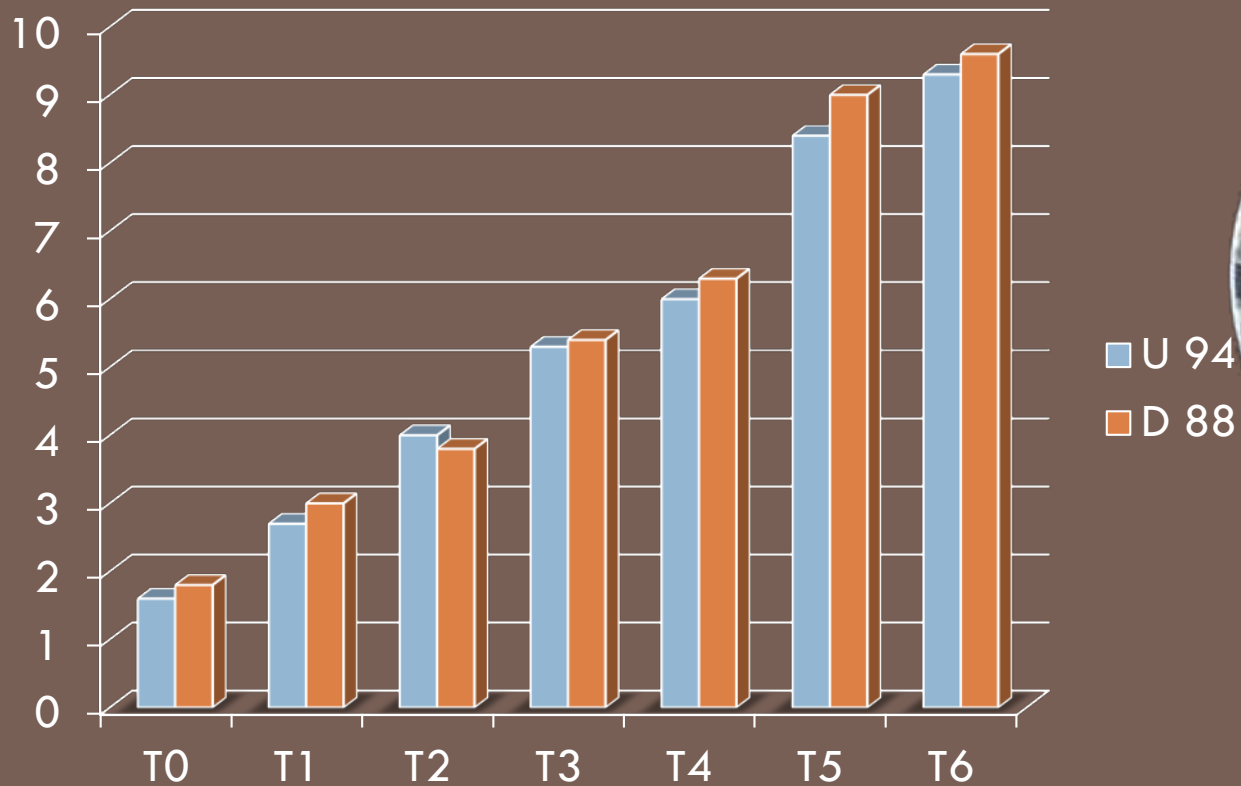
- **(if there are CALCIFICATIONS)**
- **+ EDTA 600mg**



VAS: SHOULDER ARTHROSIS

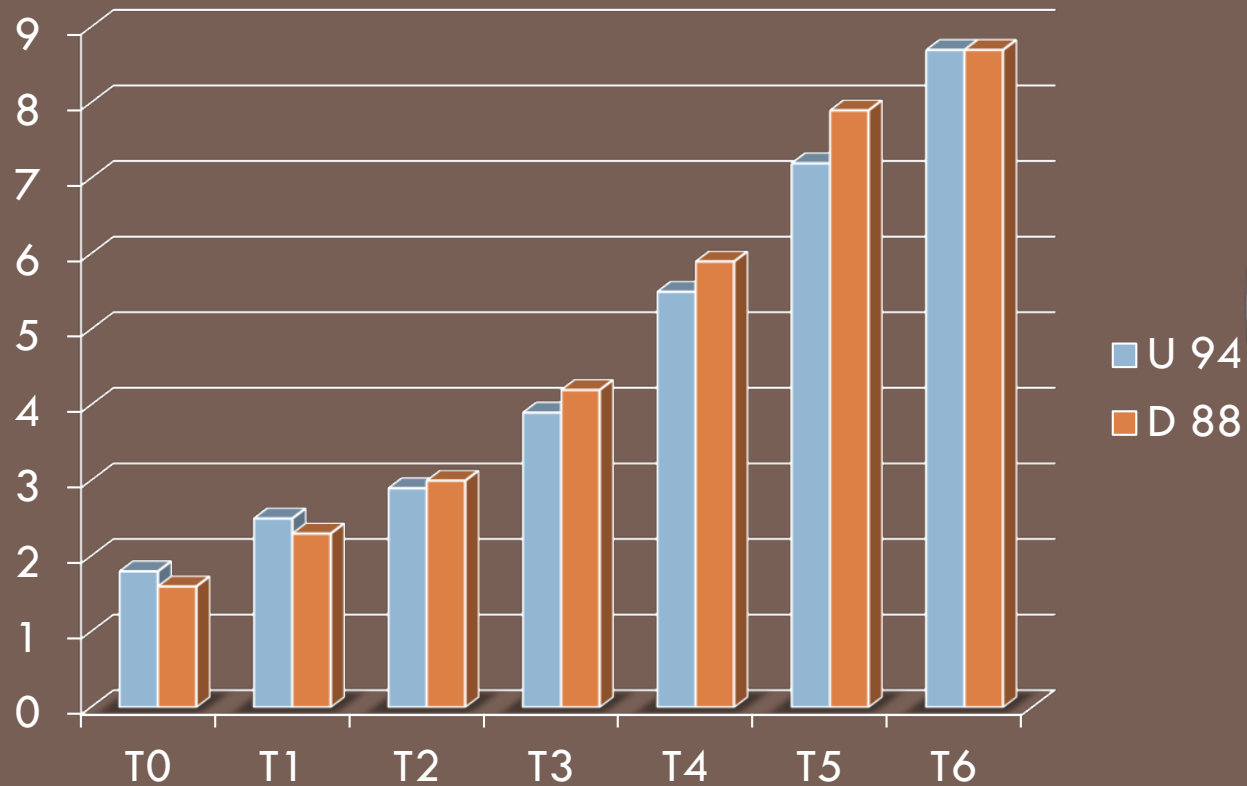


MOB flex: SHOULDER ARTHROSIS

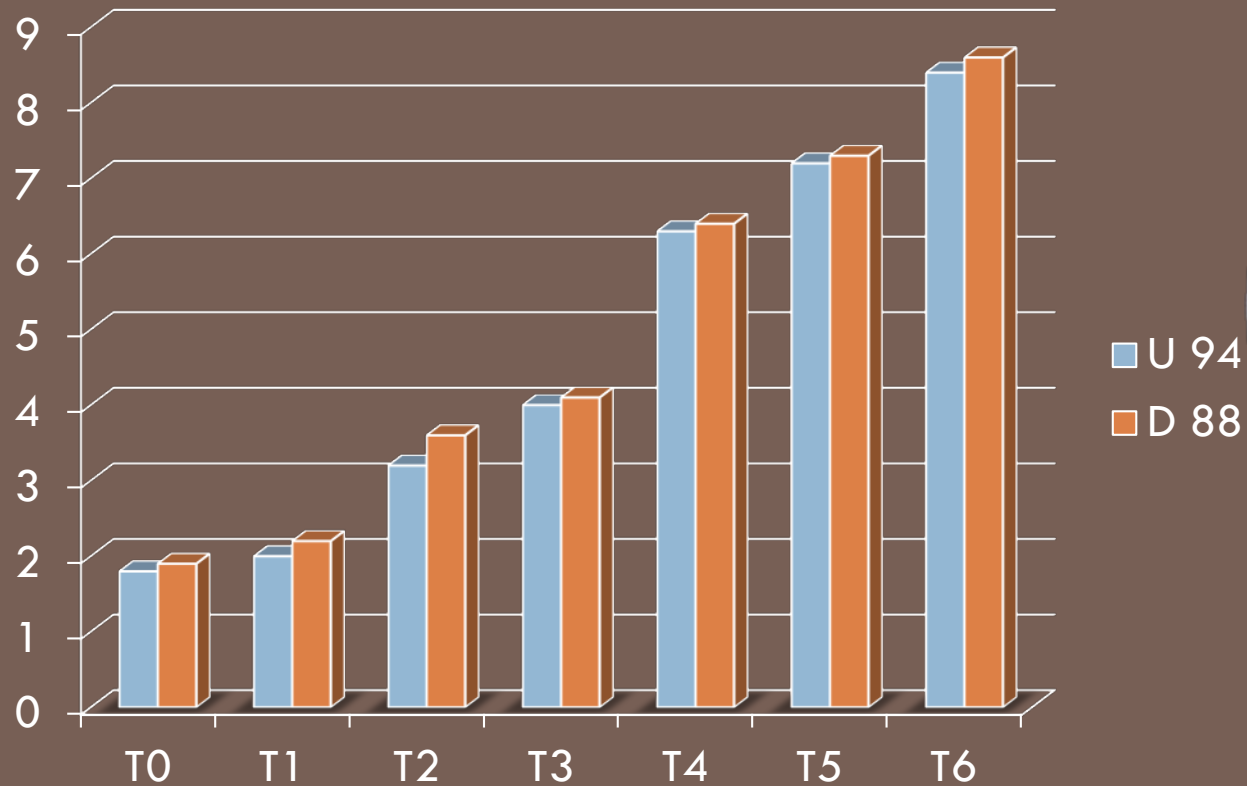


■ U 94
■ D 88

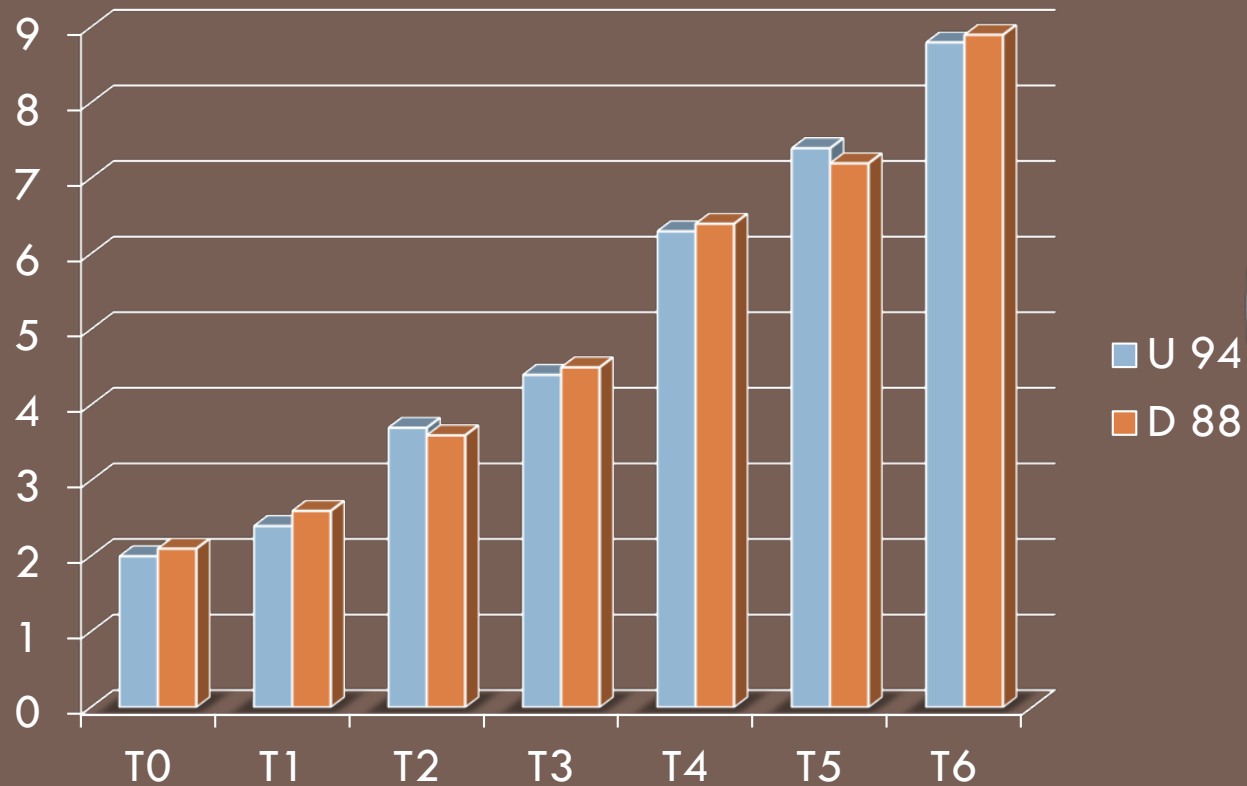
MOB extension: SHOULDER ARTHROSIS



MOB rotation LEFT/RIGHT: SHOULDER ARTHROSIS

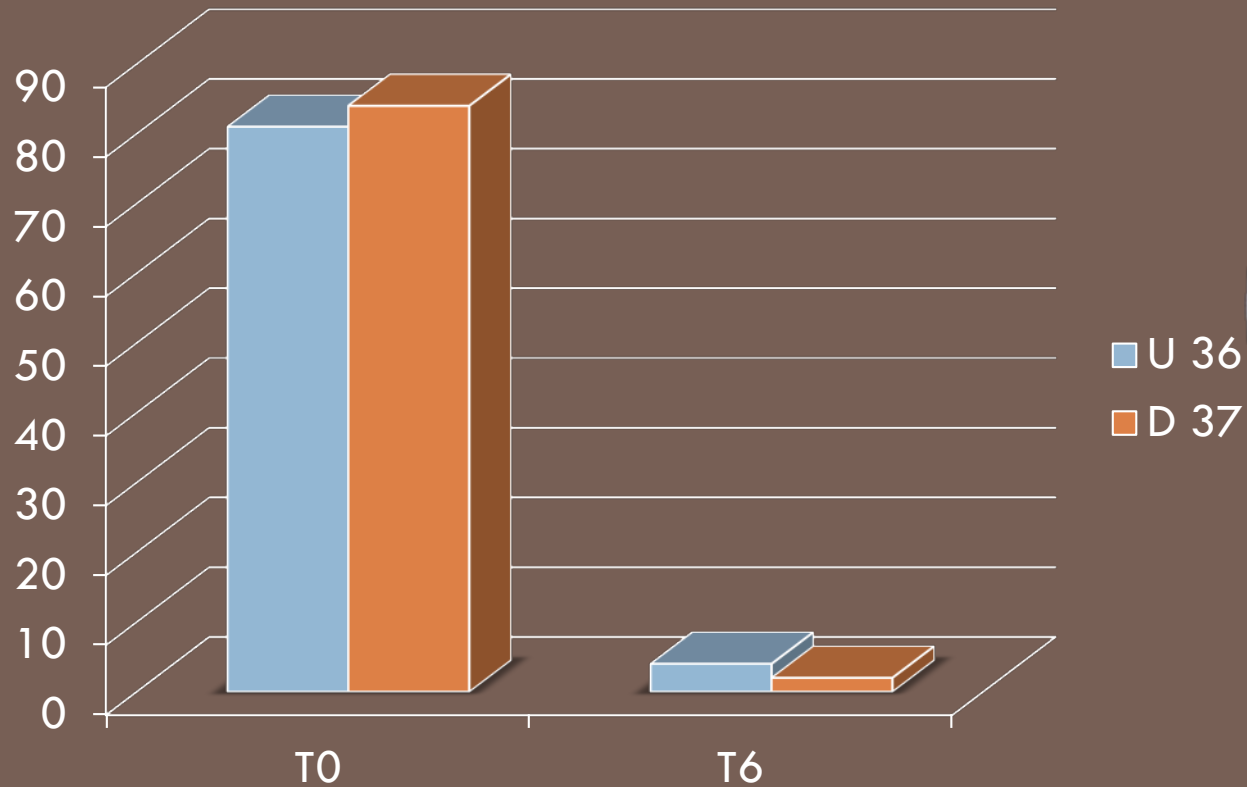


MOB flex LEFT/RIGHT: SHOULDER ARTHROSIS

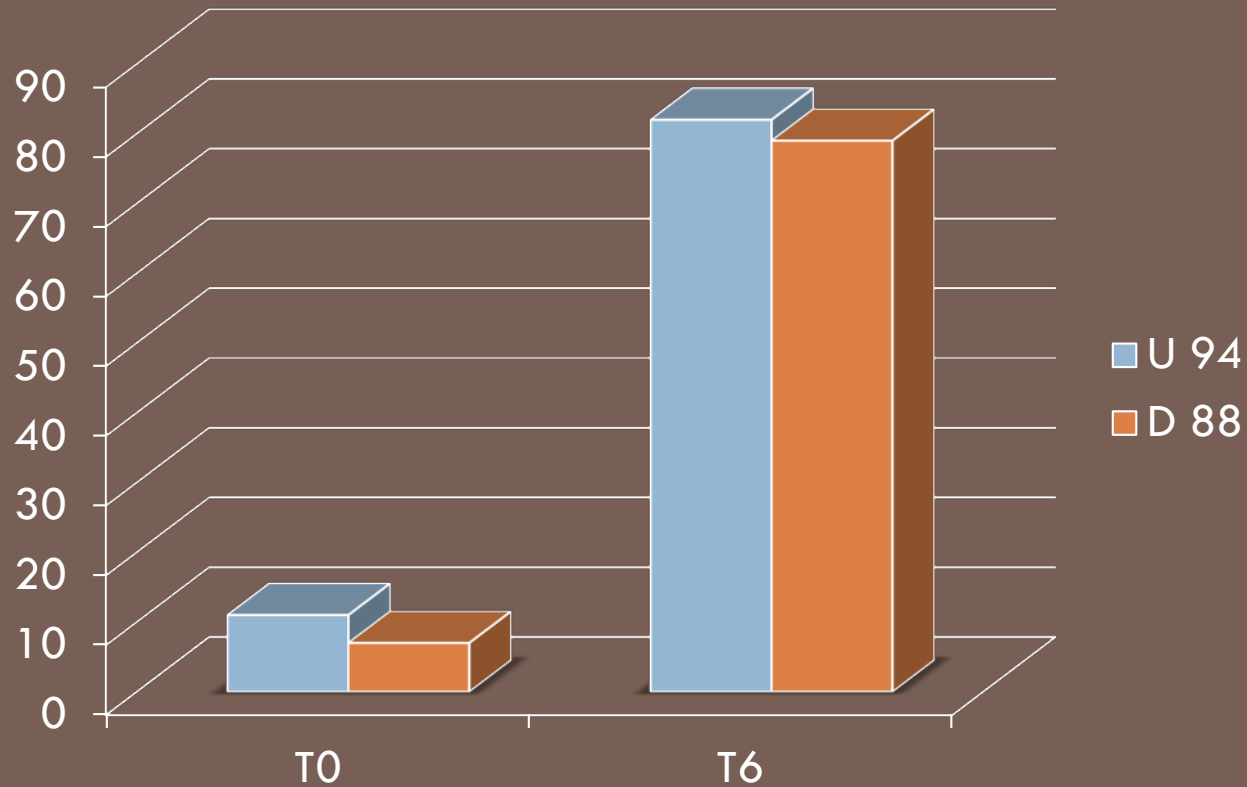


CALCIFICATIONS rid.%: SHOULDER ARTHROSIS

(present in the sample 40.11% with CALCIFICATIONS also treated with EDTA)



Instrumental Improvement Investigation %: SHOULDER ARTHROSIS



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

results: SHOULDER ARTHROSIS

- VAS rid. 86%
- MOB flex mig. 77,5%
- MOB est mig. 70%
- MOB rot LEFT/RIGHT mig.
66,5%
- MOB flex LEFT/RIGHT mig. 68%
- Calcif. (if any) rid. 79,5%
- Ind. instrumental mig. 71,5%



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

conclusions: **SHOULDER ARTHROSIS**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: **elbow osteoarthritis**

- Total cases 225
- Age from 44 a 68 years
- 118 men – 107 women
- Pathology diagnosis made by a specialist doctor
- Patients previously treated with other techniques with little success
- Exacerbation of the disease in the previous 6 months
- Use of unique Therapeutic Protocol through CRYOPASS THERAPY



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020



Therapeutic Protocol: **elbow osteoarthritis**

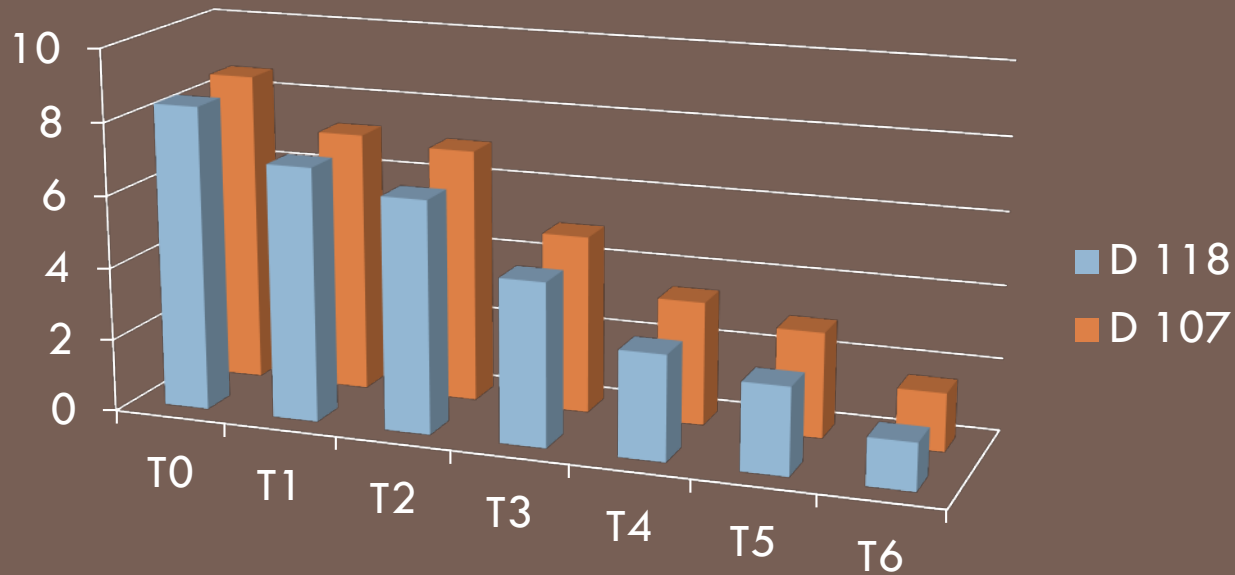
- **Methylprednisolone hemisuccinate 40mg**
- **Glucosamine sulfate 600mg**

- **Diclofenac 75mg**
- **Chondroitin sulfate 600mg**

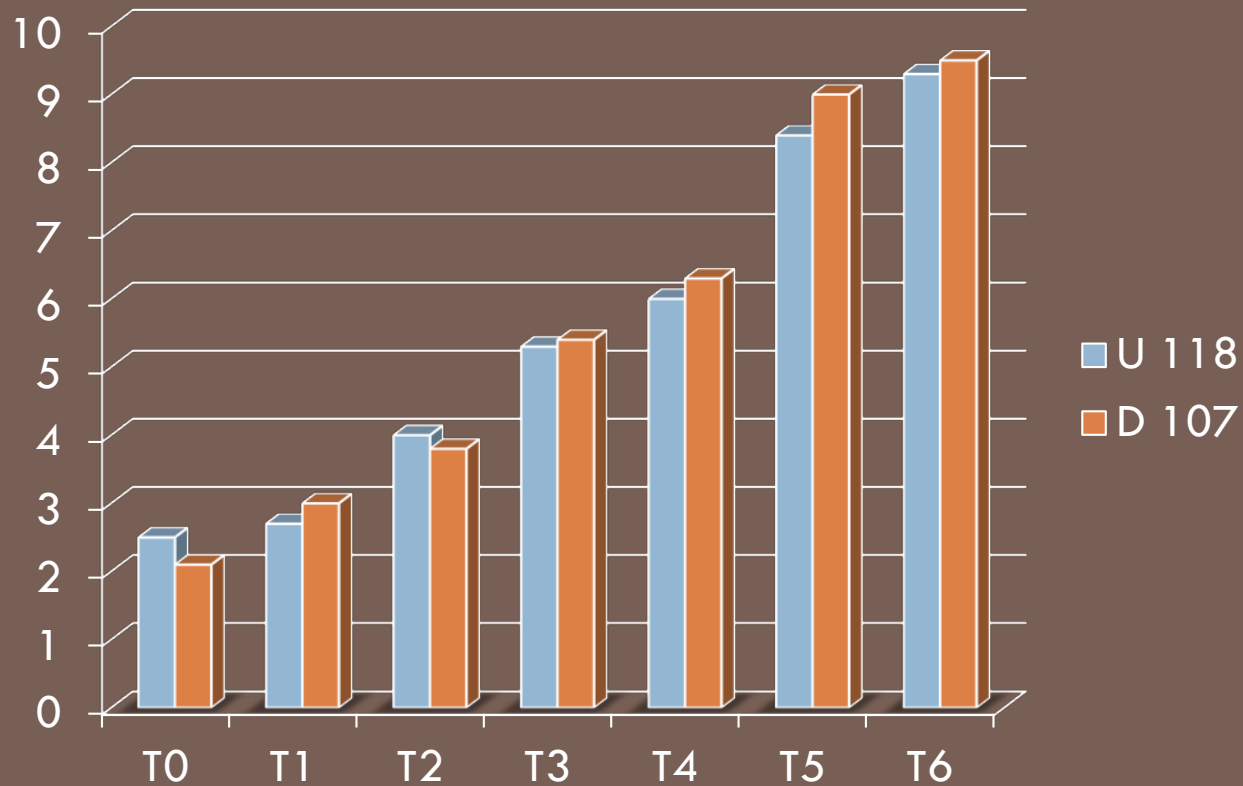
- **1 therapy every 5 days for 4 weeks**

- **(if there are CALCIFICATIONS)**
- **+ EDTA 600mg**

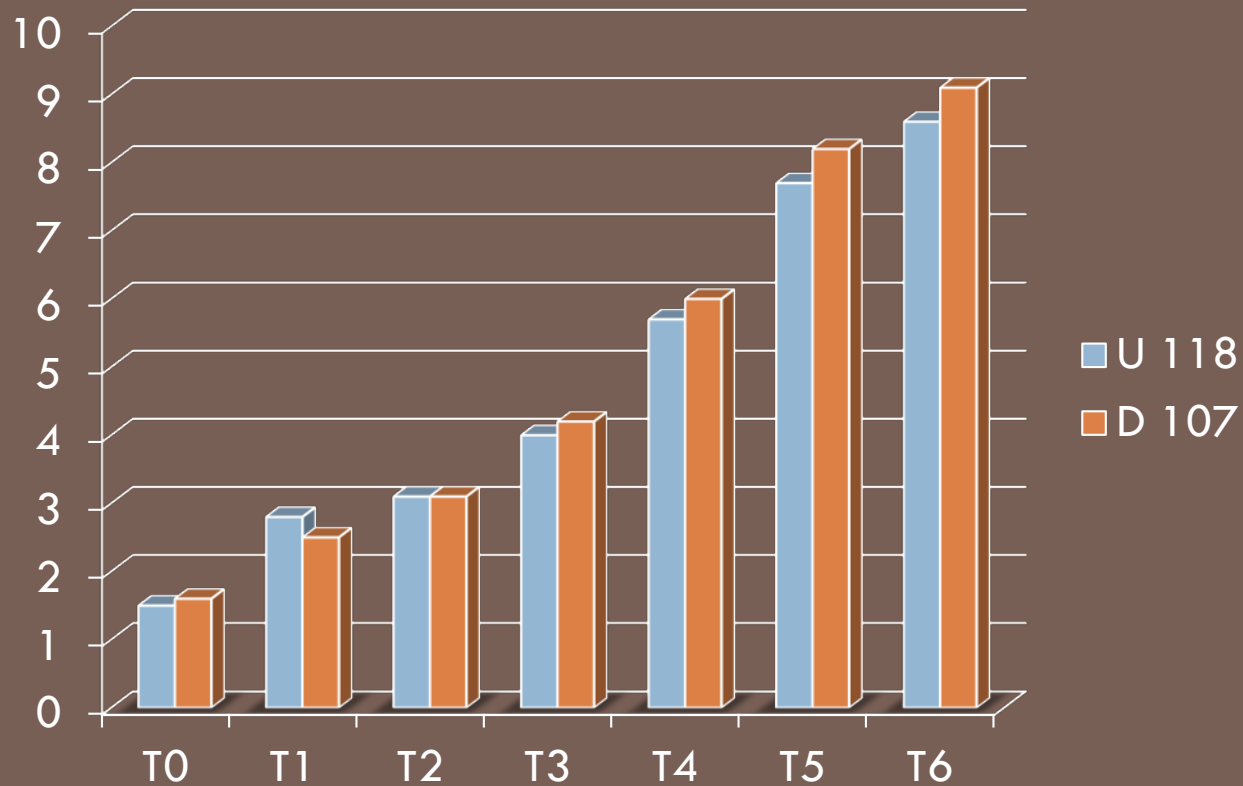
VAS: elbow osteoarthritis



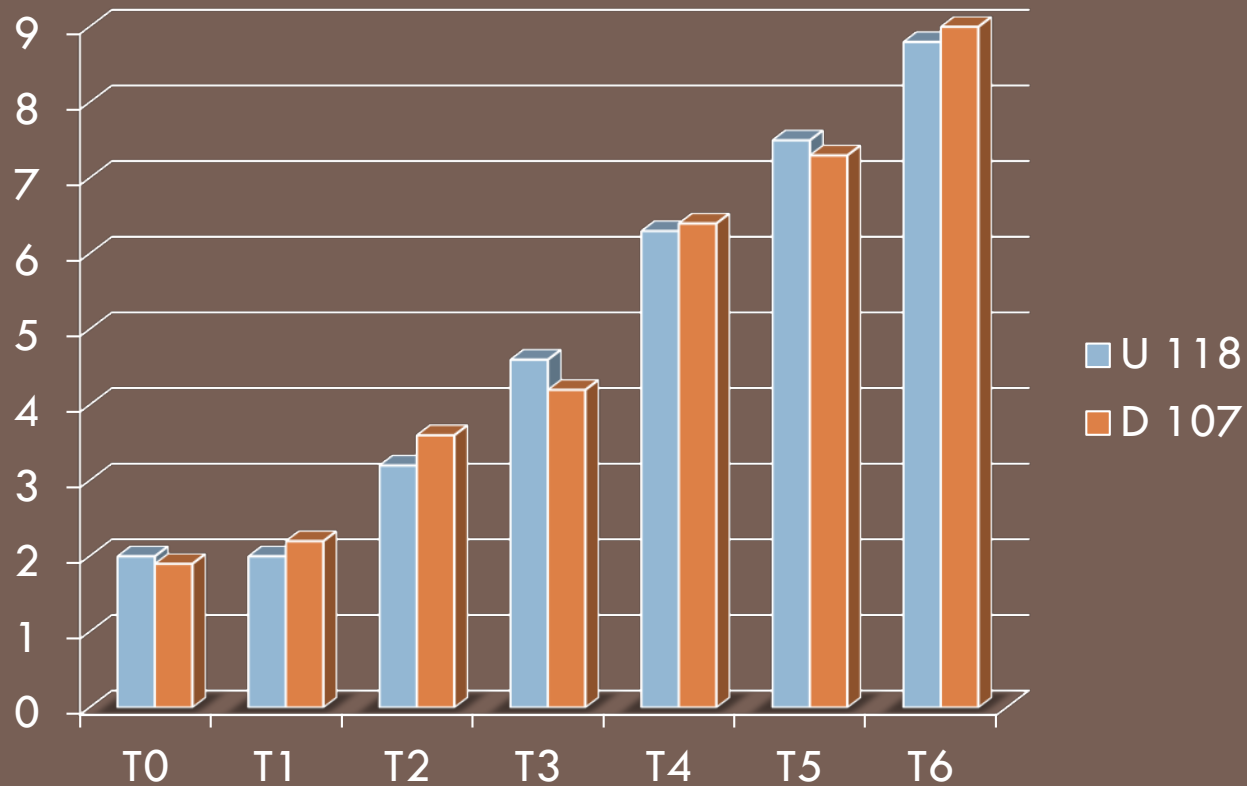
MOB flex: elbow osteoarthritis



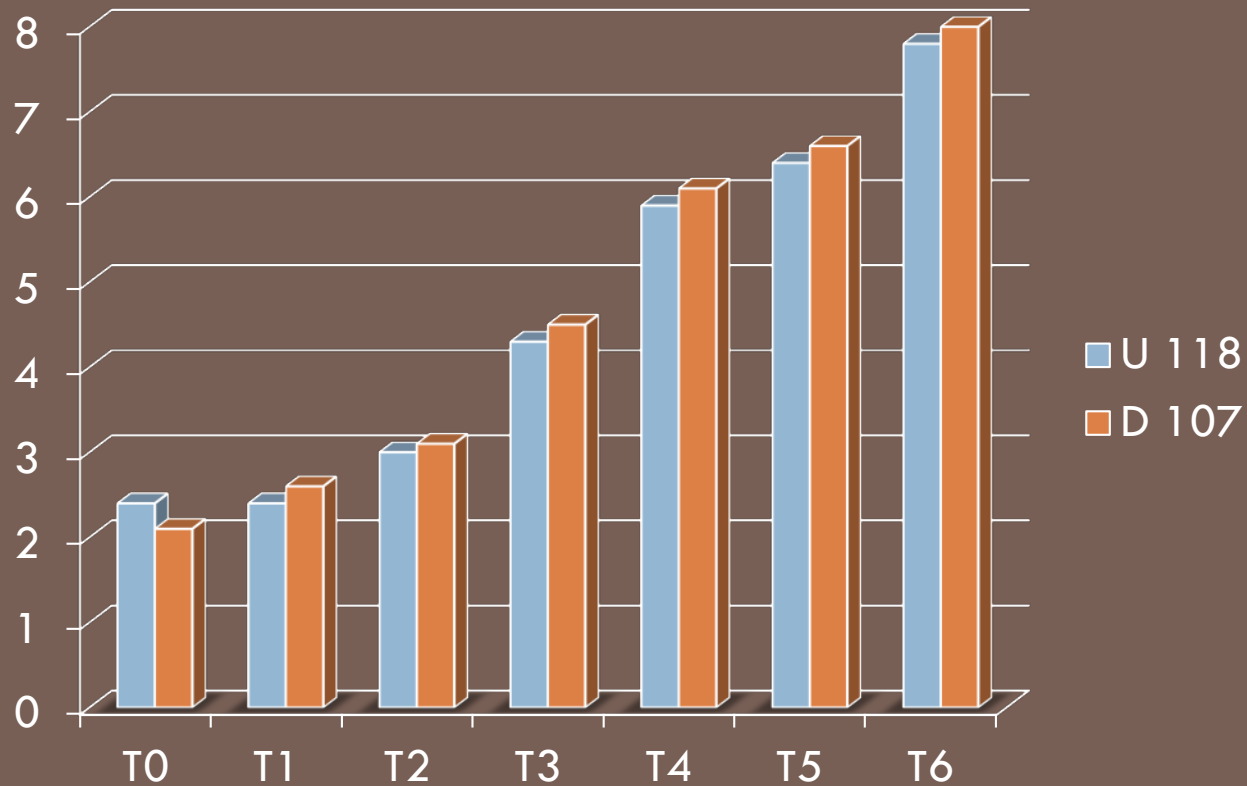
MOB extension: elbow osteoarthritis



MOB rotation LEFT/RIGHT: Elbow

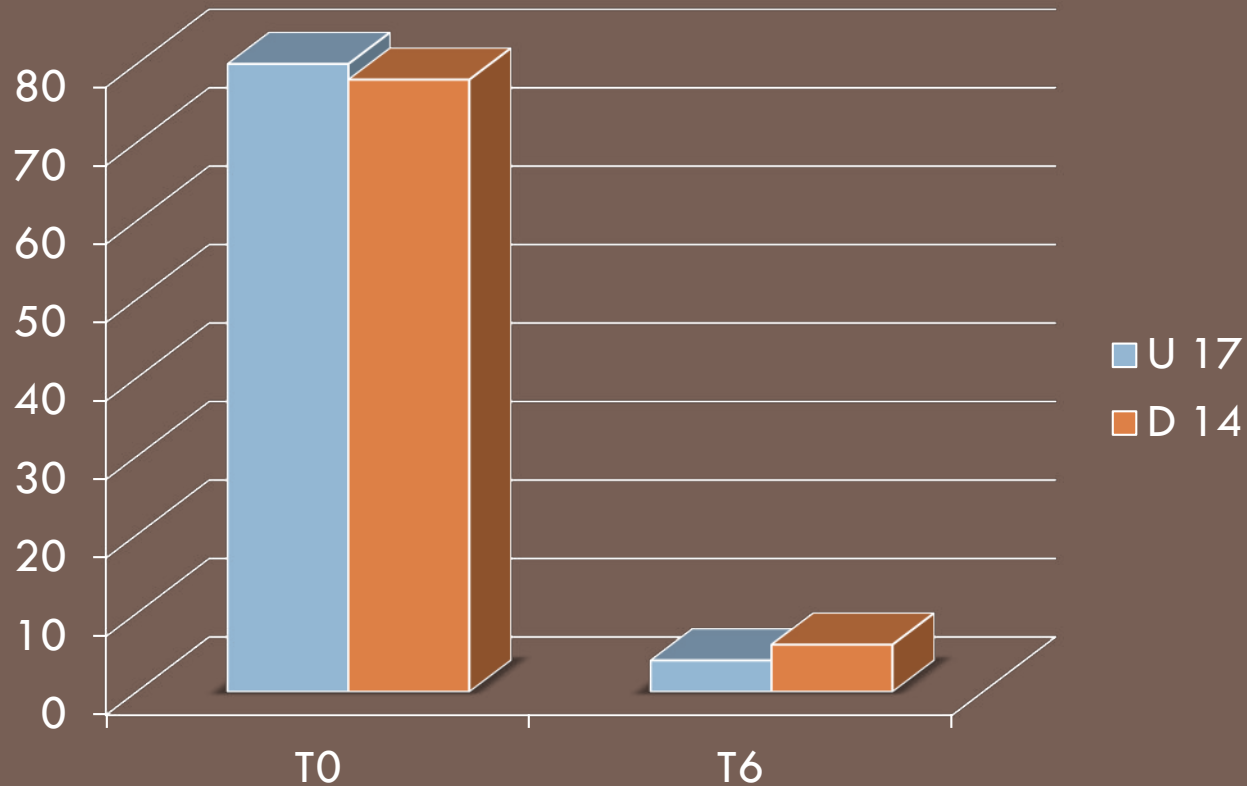


MOB flex LEFT/RIGHT: elbow osteoarthritis

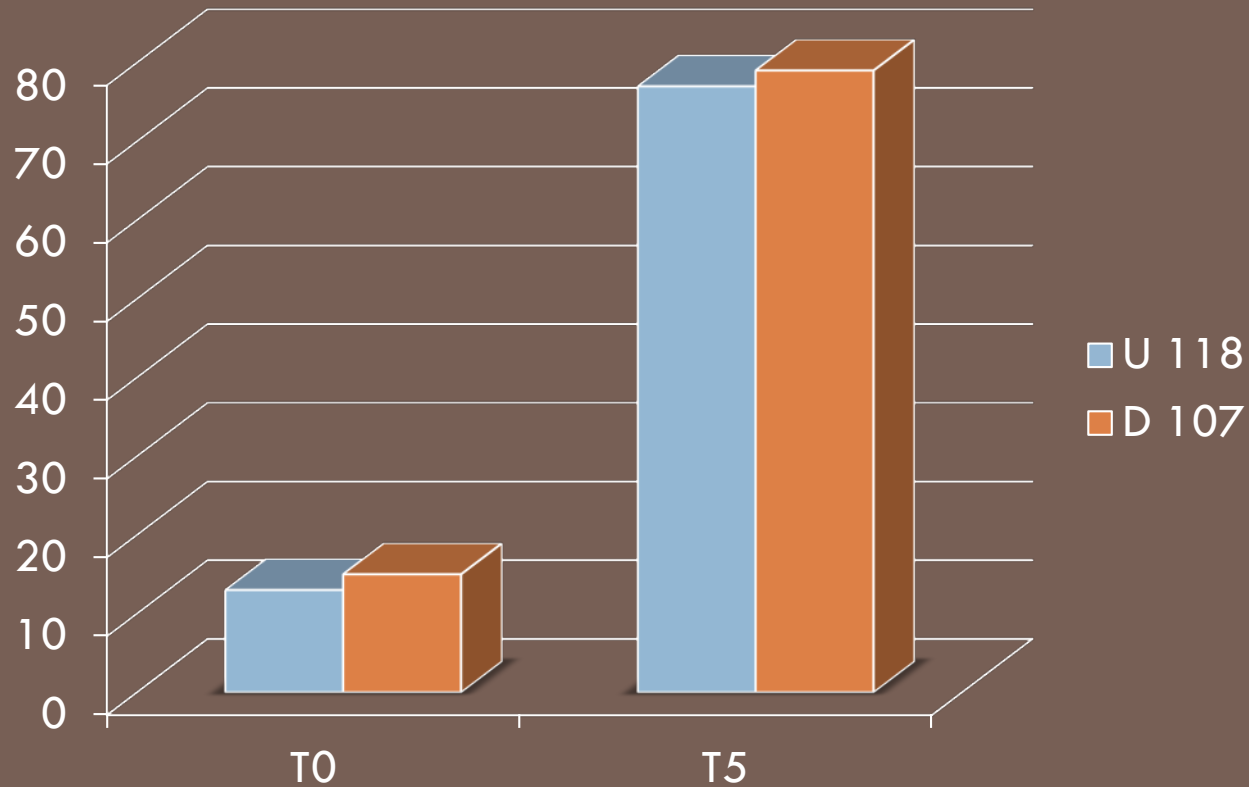


CALCIFICATIONS rid.%: elbow osteoarthritis

(presentinel campione 13,7% con CALCIFICATIONS trattati anche con EDTA)



Instrumental Improvement Investigation %: elbow osteoarthritis



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020



results: elbow osteoarthritis

- VAS rid. 70,5%
- MOB flex mig. 71%
- MOB est mig. 73%
- MOB rot LEFT/RIGHT mig.
69,5%
- MOB flex LEFT/RIGHT mig. 56,5%
- Calcif. (if any) rid. 74%
- Ind. instrumental mig. 64%

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020



conclusions: **elbow osteoarthritis**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period

CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: **arthrosis MANO**

- Total cases 195
- Age from 49 a 75 years
- 96 men – 99 women
- Pathology diagnosis made by a specialist doctor
- Patients previously treated with other techniques with little success
- Exacerbation of the disease in the previous 6 months
- Use of unique Therapeutic Protocol through CRYOPASS THERAPY



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Therapeutic Protocol: arthrosis MANO

- **Methylprednisolone hemisuccinate** 40mg
- **Glucosamine sulfate** 600mg

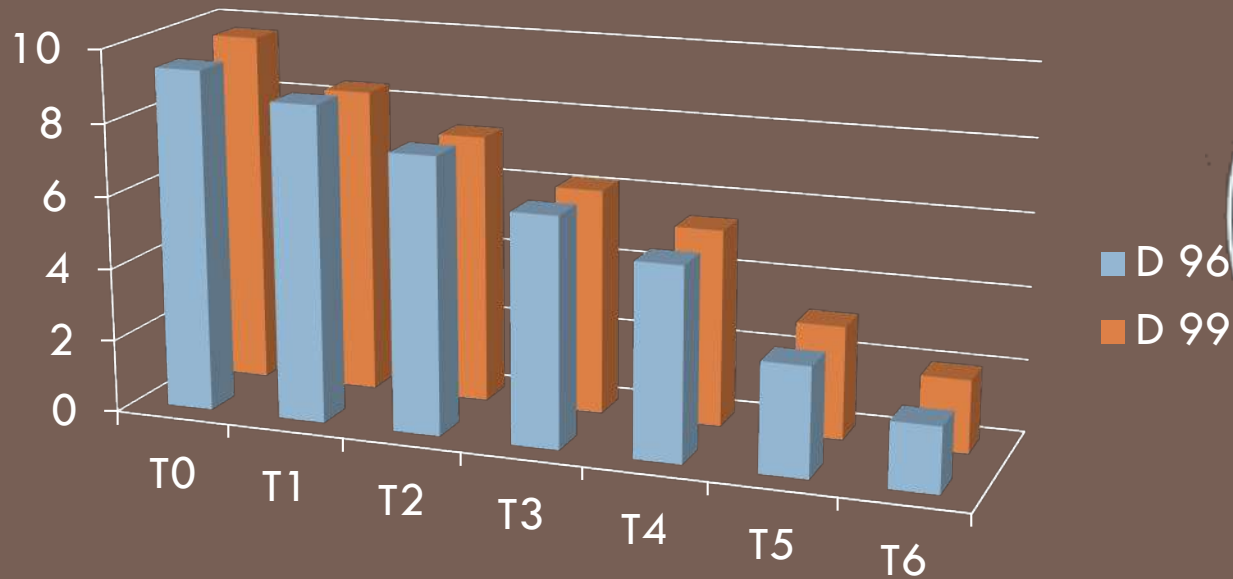
- **Diclofenac** 75mg
- **Chondroitin sulfate** 600mg

- **1 therapy every 5 days for 4 weeks**

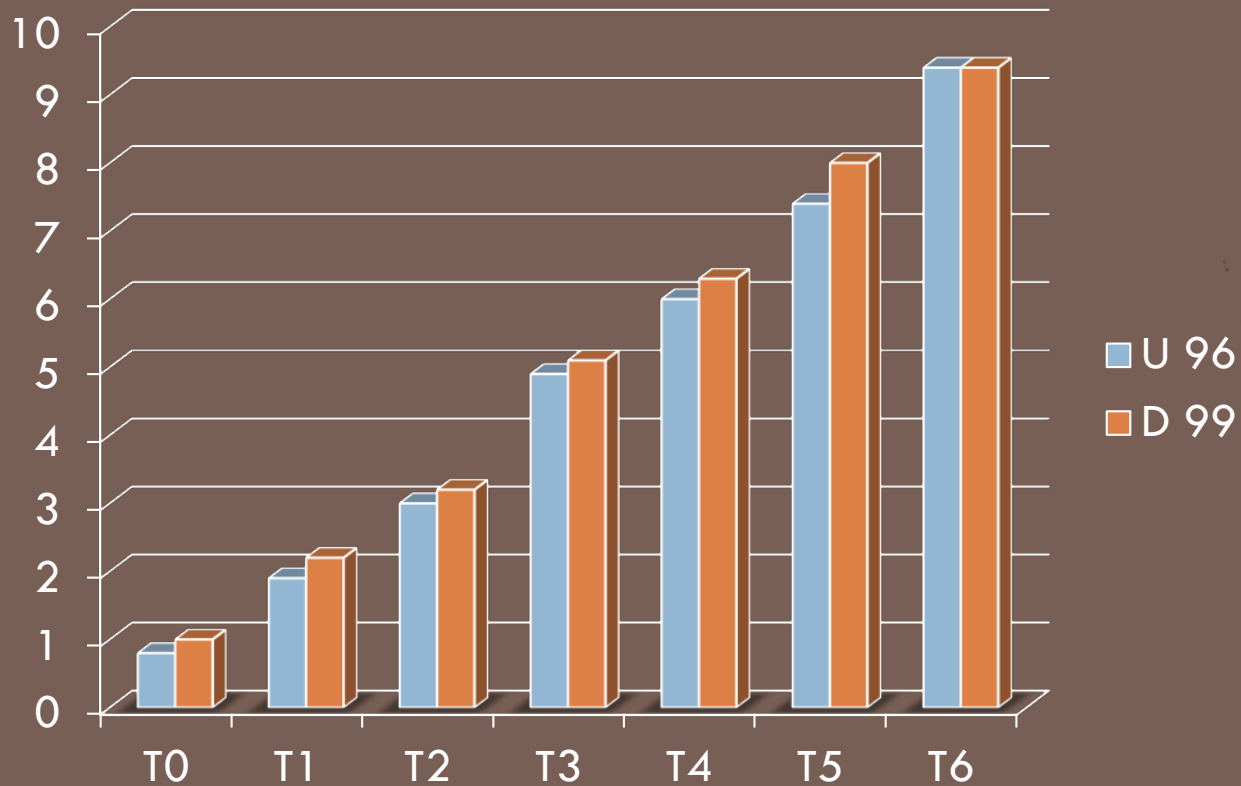
- **(if there are CALCIFICATIONS)**
- **+ EDTA** 600mg



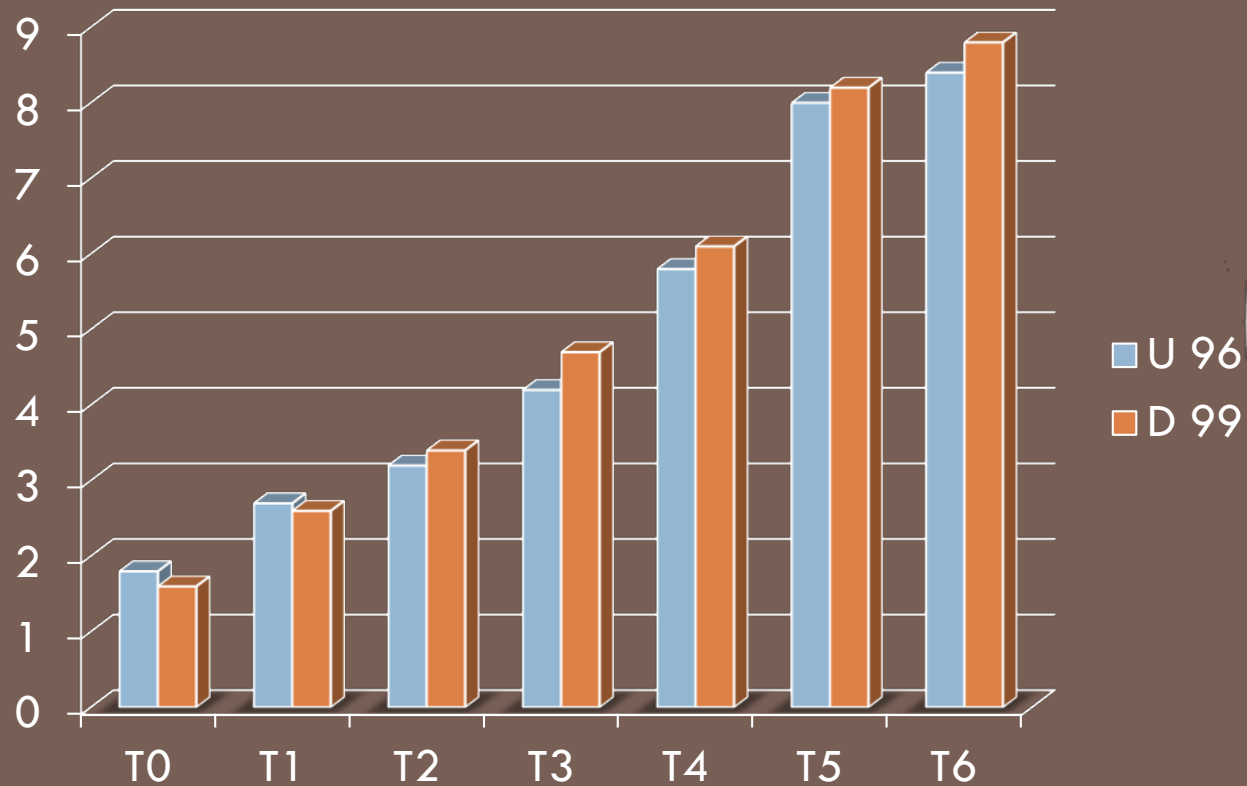
VAS: arthrosis MANO



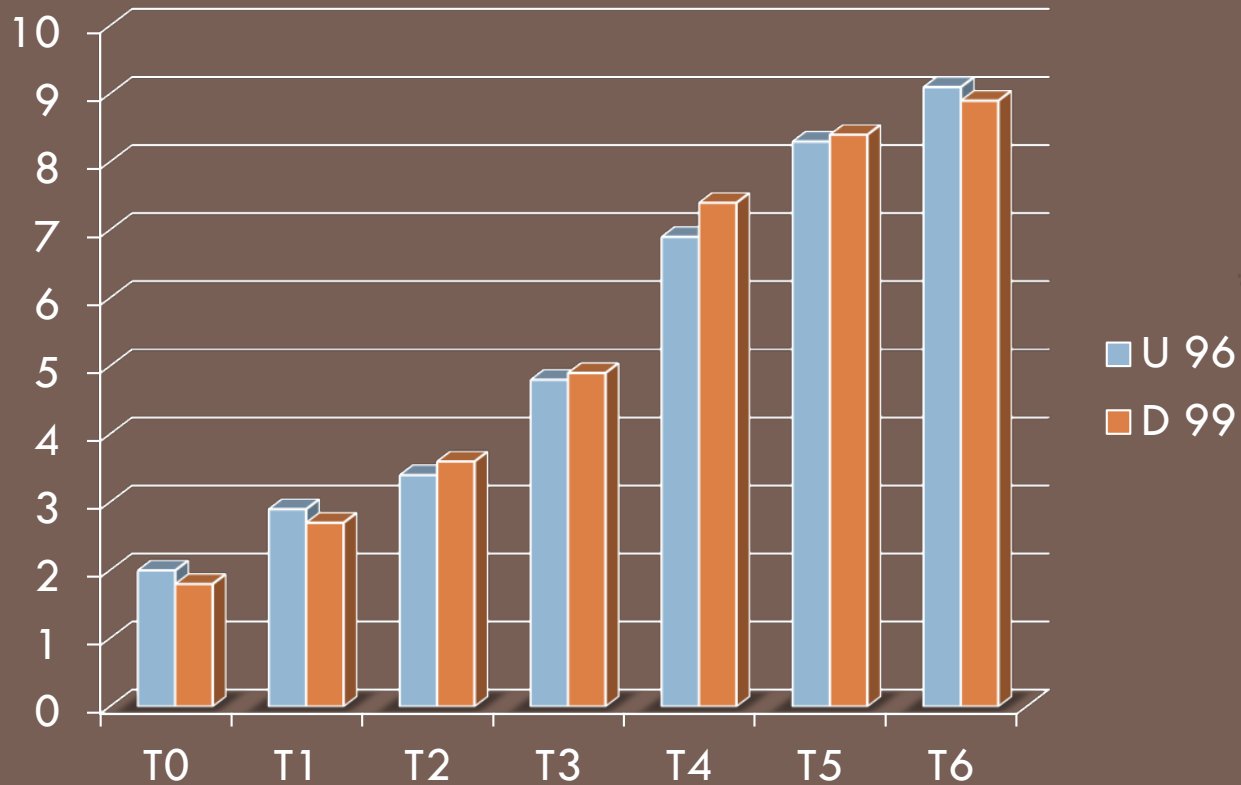
MOB flex: arthrosis MANO



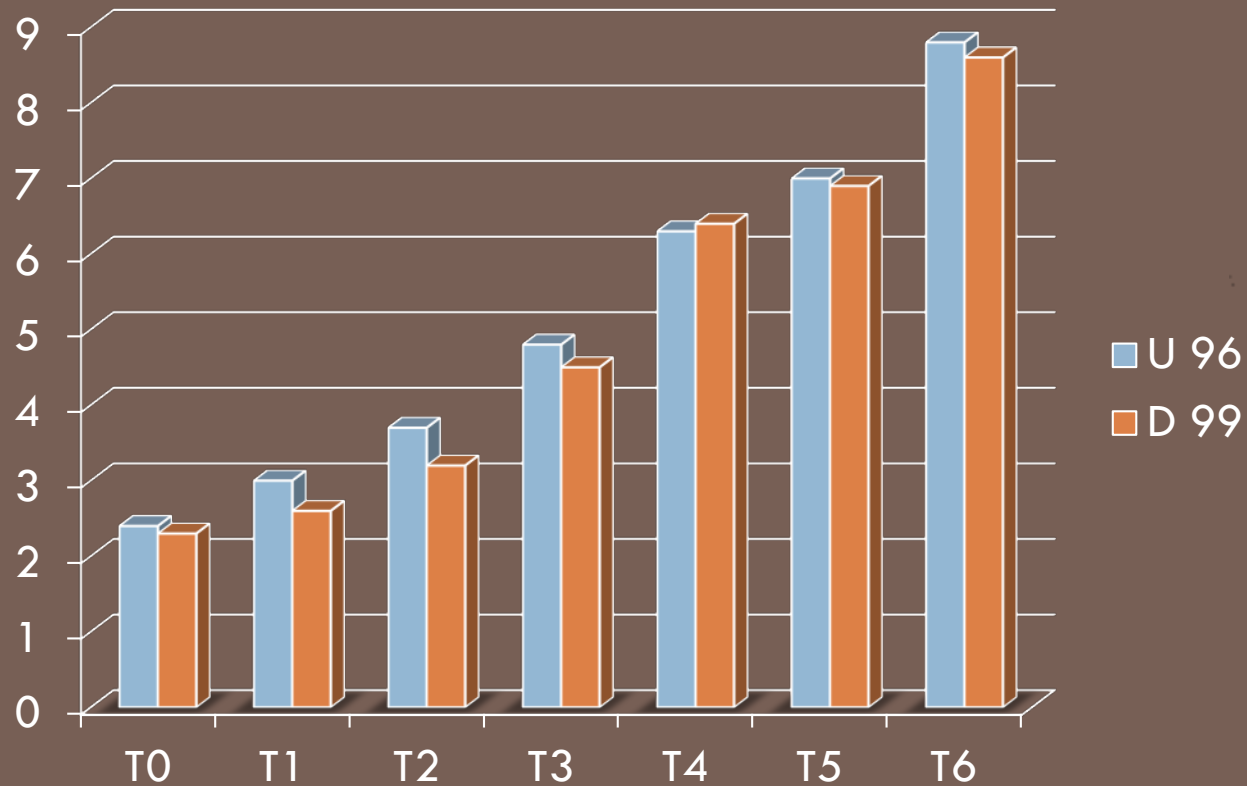
MOB extension: arthrosis MANO



MOB rotation LEFT/RIGHT: MANO

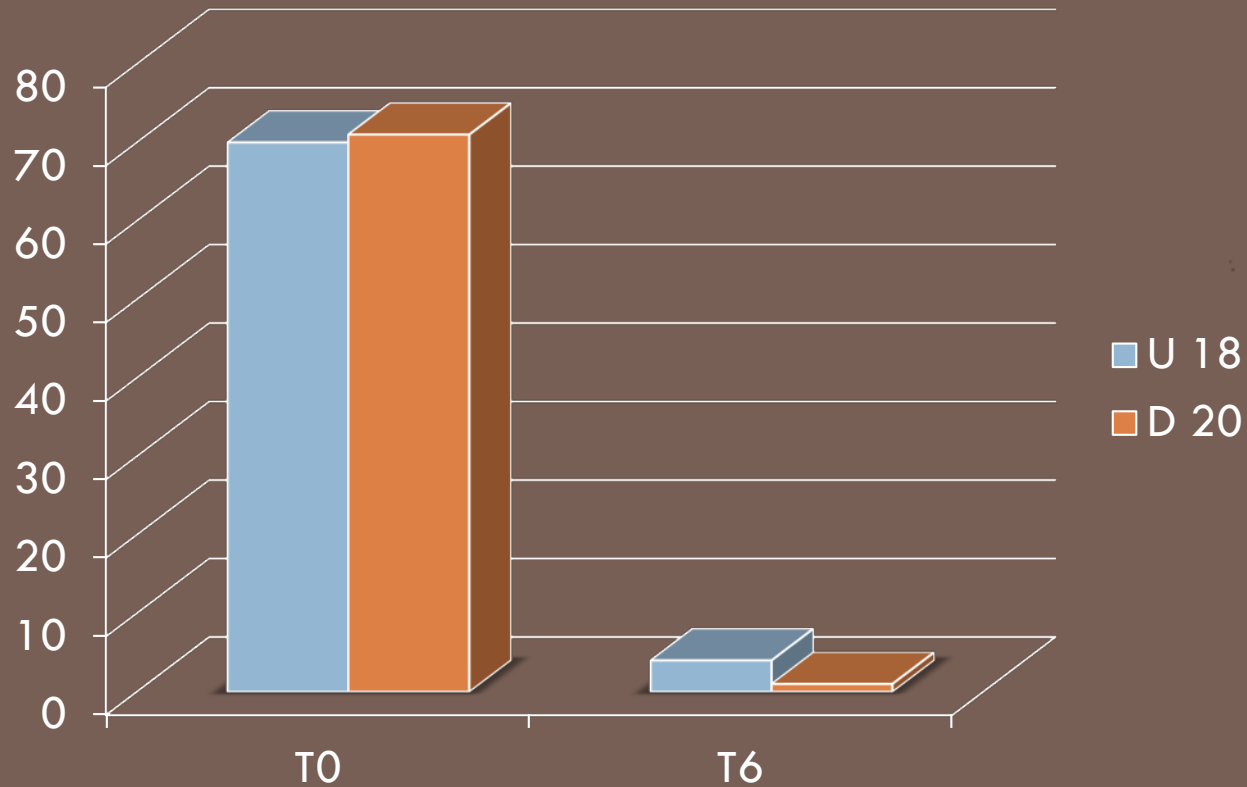


MOB flex LEFT/RIGHT: arthrosis MANO

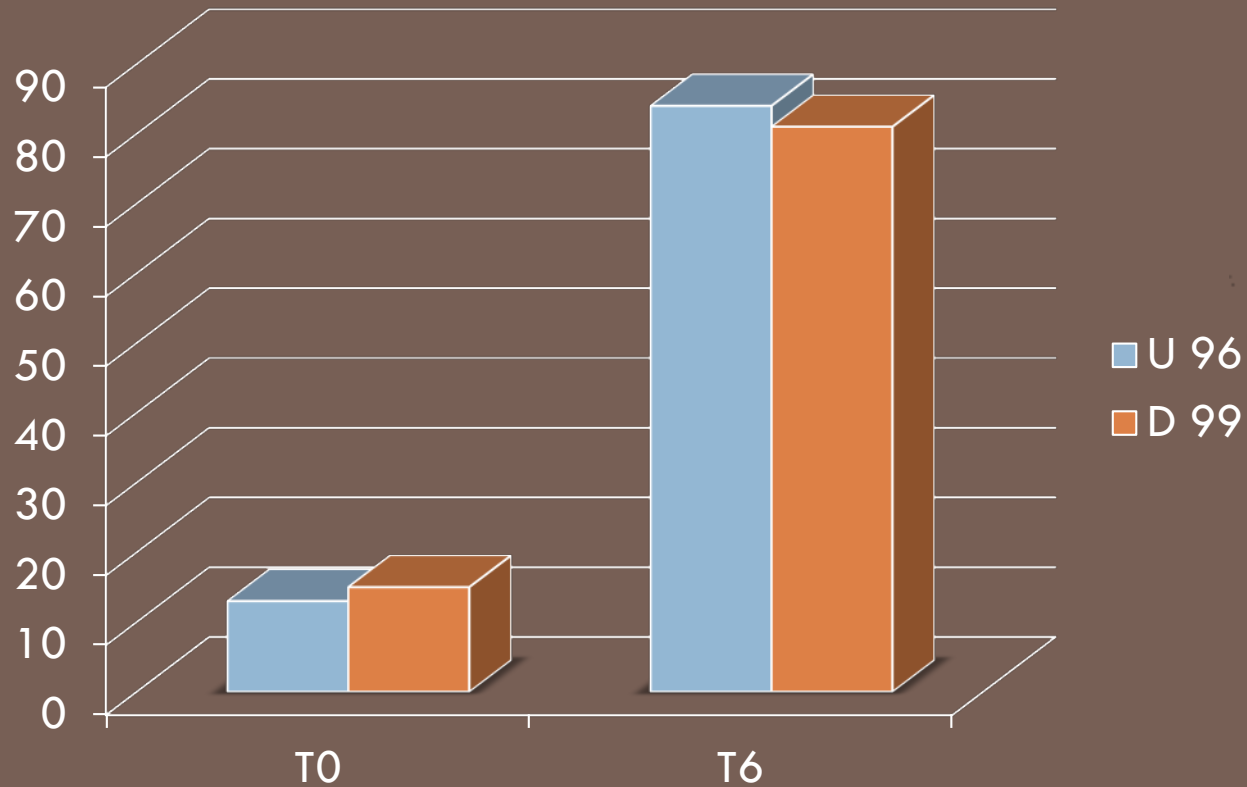


CALCIFICATIONS rid.%: arthrosis MANO

(present in campione 19,8 con CALCIFICATIONS also dealt with EDTA)



Instrumental Improvement Investigation %: arthrosis MANO



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

results: arthrosis MANO

- VAS rid. 76,5%
- MOB flex mig. 85%
- MOB est mig. 69%
- MOB rot LEFT/RIGHT mig.
71%
- MOB flex LEFT/RIGHT mig. 63,5%
- Calcif. (if any) rid. 68%
- Ind. instrumental mig. 68,5%



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

conclusions: **arthrosis MANO**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: COLUMN ARTHROSIS

- *Total cases 247*
- *Age from 45 a 81 years*
- *129 men – 118 women*
- *Pathology diagnosis made by a specialist doctor*
- *Patients previously treated with other techniques with little success*
- *Exacerbation of the disease in the previous 6 months*
- *Use of unique Therapeutic Protocol through CRYOPASS THERAPY*



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Therapeutic Protocol: **arthrosis COLONNA**

- **Methylprednisolone hemisuccinate 40mg**
- **Glucosamine sulfate 600mg**

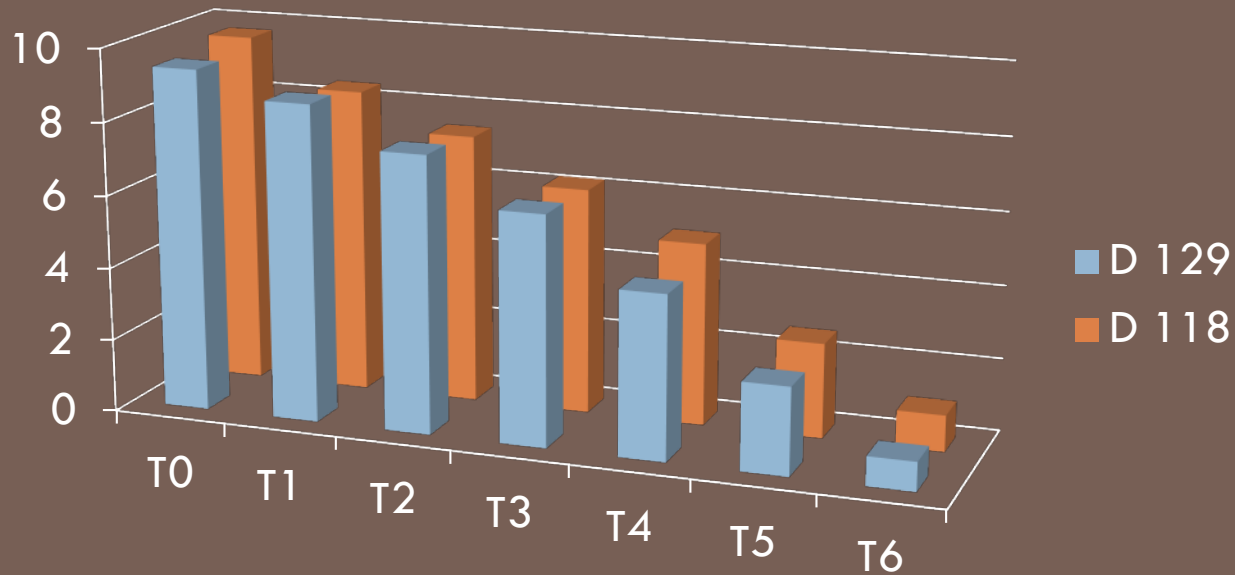
- **Diclofenac 75mg**
- **Chondroitin sulfate 600mg**

- **1 therapy every 5 days for 4 weeks**

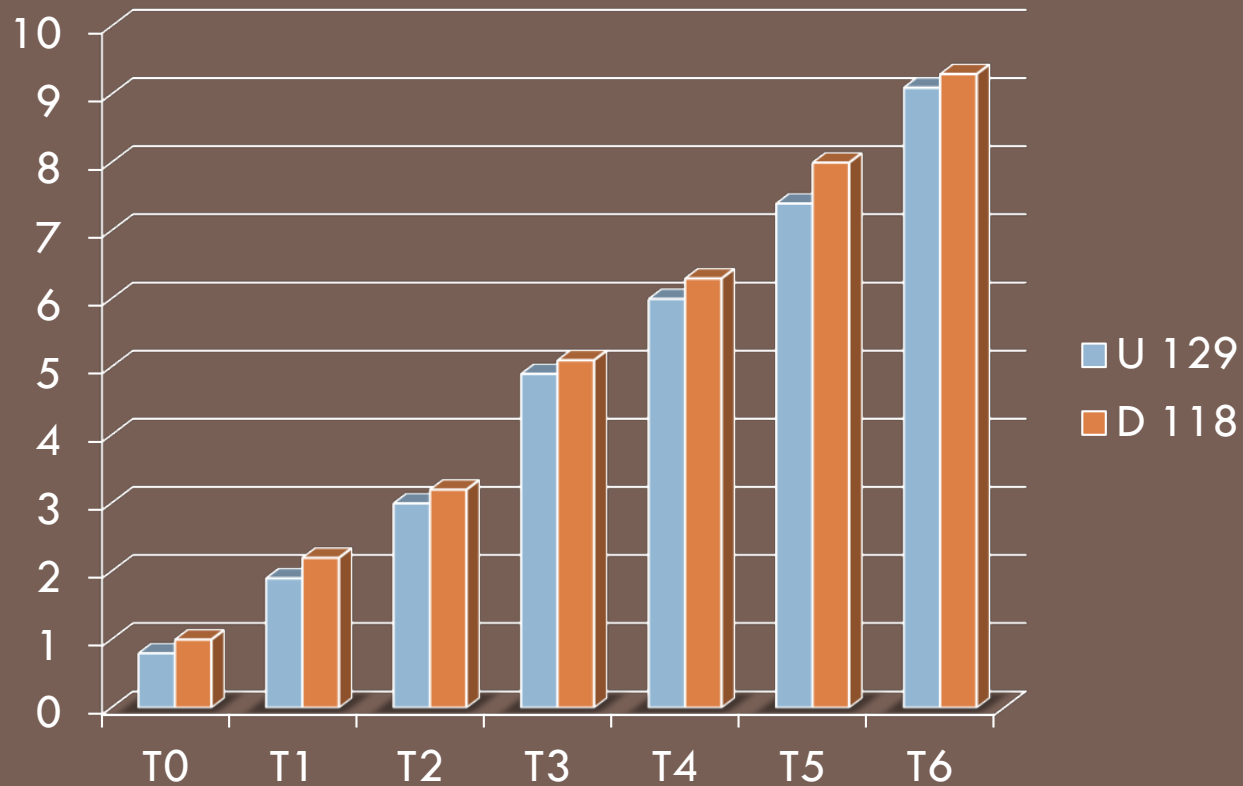
- **(if there are CALCIFICATIONS)**
- **+ EDTA 600mg**



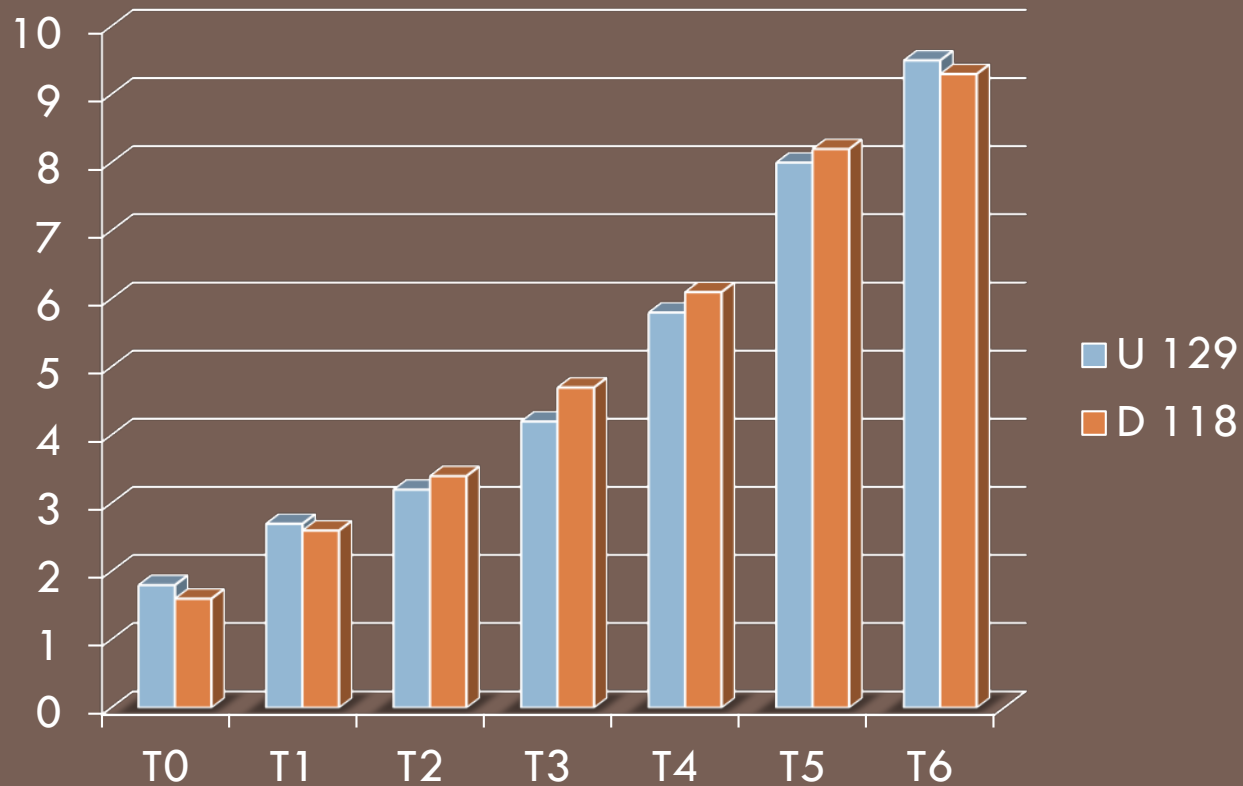
VAS: arthrosis COLONNA



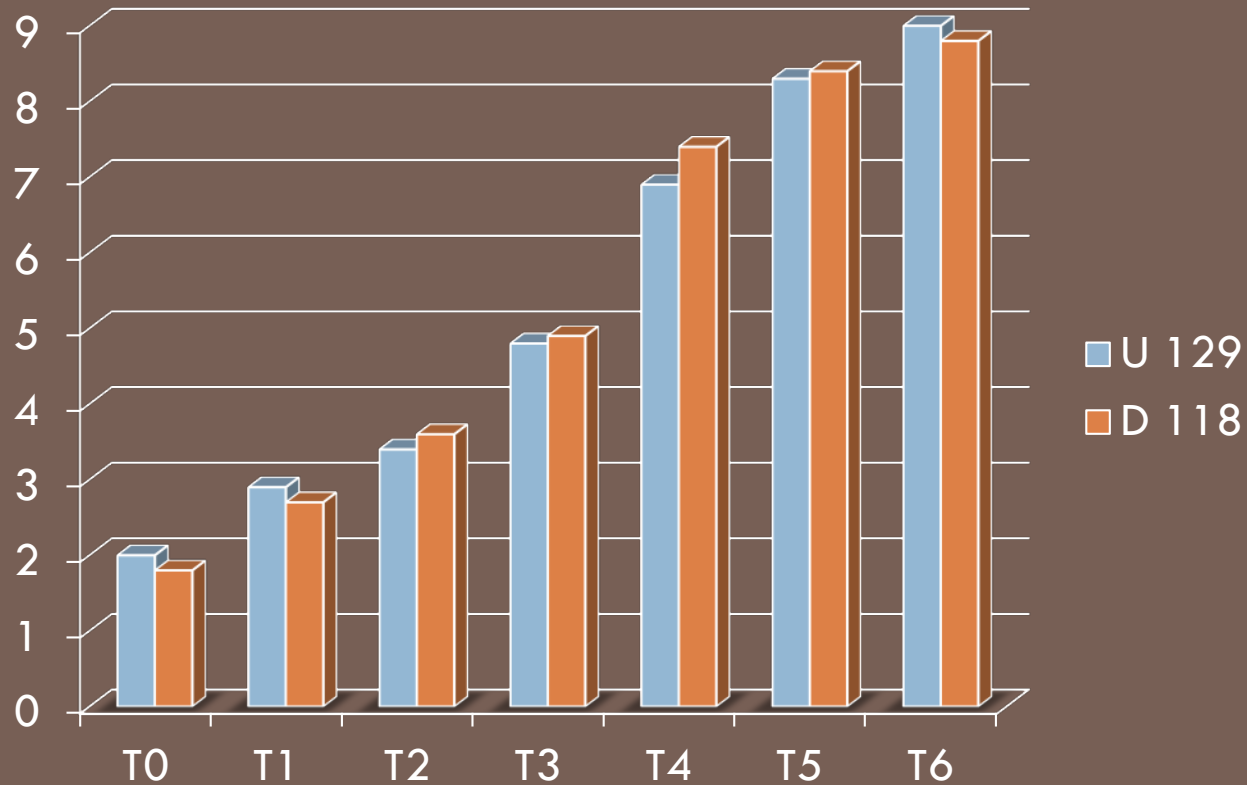
MOB flex: arthrosis COLONNA



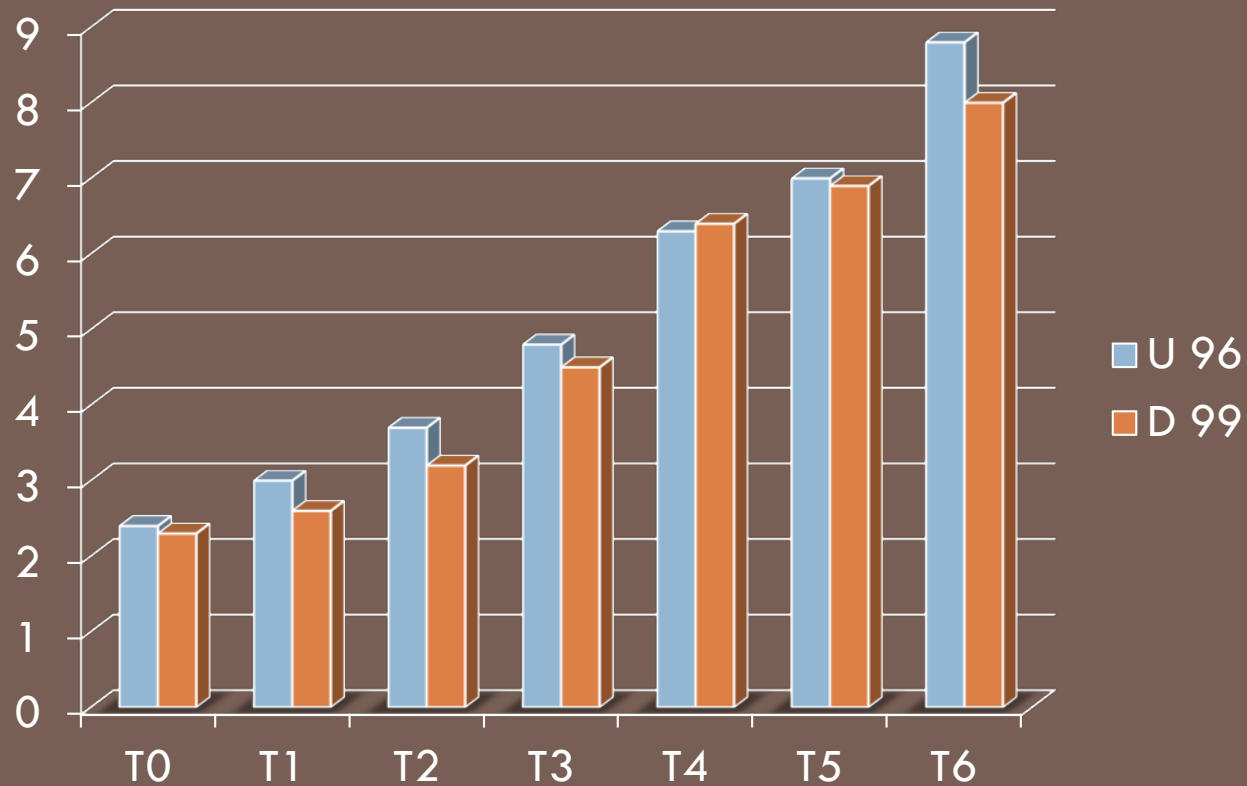
MOB extension: arthrosis COLONNA



MOB rotation LEFT/RIGHT: COLONNA

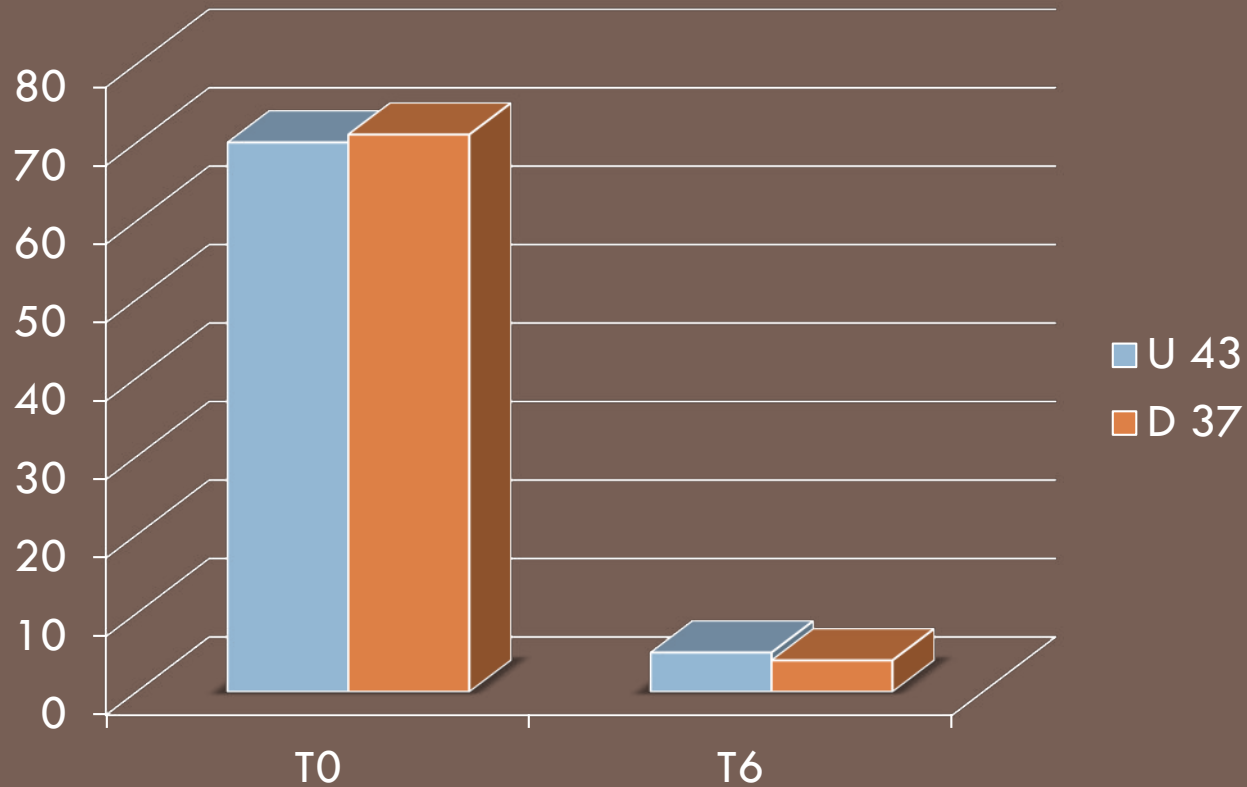


MOB flex LEFT/RIGHT: arthrosis COLONNA

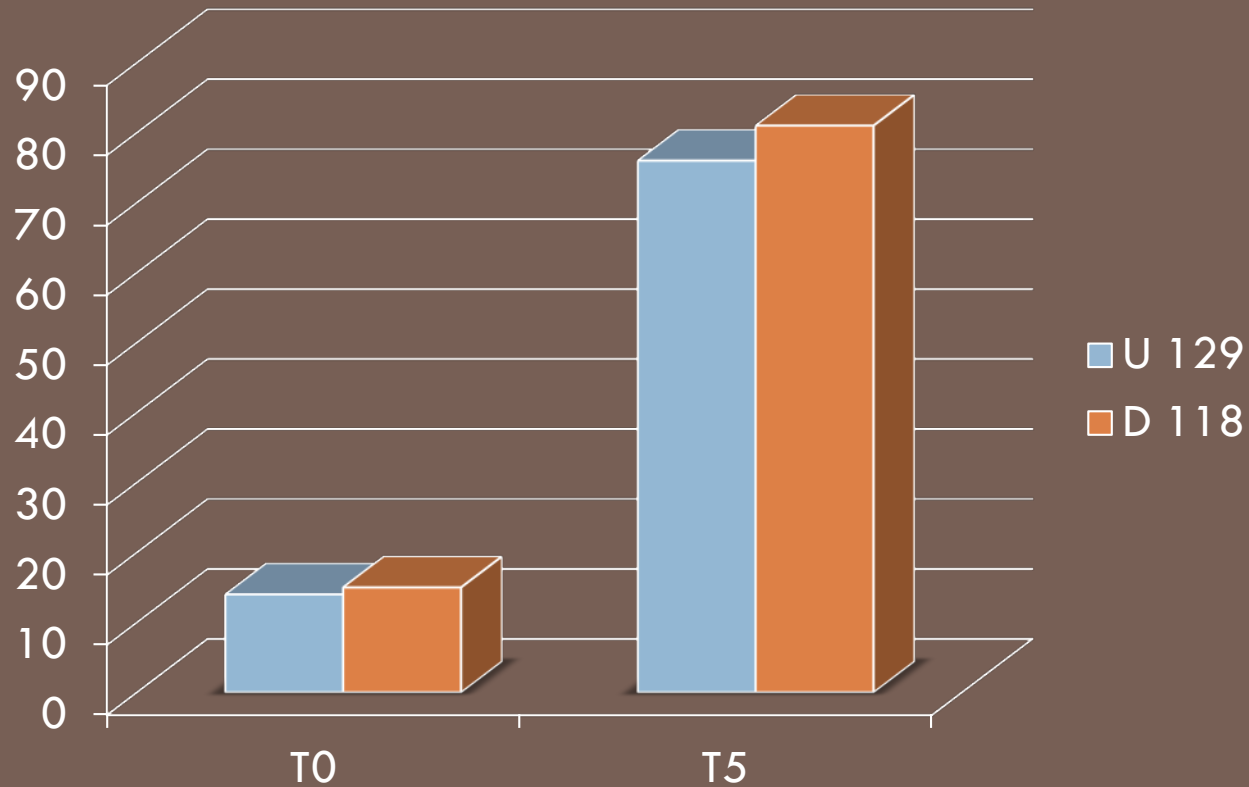


CALCIFICATIONS rid.%: arthrosis COLONNA

(present in campione 32,4% con CALCIFICATIONS also dealt with EDTA)



Instrumental Improvement Investigation %: arthrosis COLONNA



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

results: arthrosis COLONNA

- VAS rid. 86,5%
- MOB flex mig. 83%
- MOB est mig. 77%
- MOB rot LEFT/RIGHT mig.
88,1%
- MOB flex LEFT/RIGHT mig. 60,5%
- Calcif. (if any) rid. 66%
- Ind. instrumental mig. 64%



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

conclusions: **arthrosis COLONNA**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: **arthrosis COXO-FEMORAL**

- Total cases 170
- Age from 55 a 78 years
- 82 men – 88 women
- Pathology diagnosis made by a specialist doctor
- Patients previously treated with other techniques with little success
- Exacerbation of the disease in the previous 6 months
- Use of unique Therapeutic Protocol through CRYOPASS THERAPY



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Therapeutic Protocol: **arthrosis COXO-FEMORAL**

- **Methylprednisolone hemisuccinate 40mg**
- **Glucosamine sulfate 600mg**

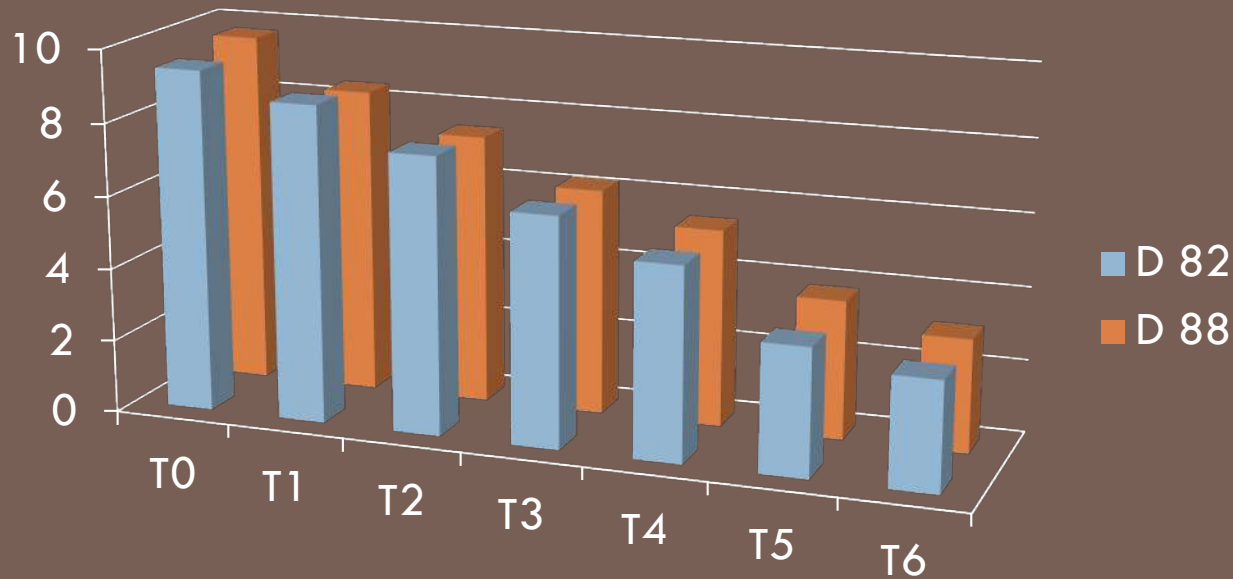
- **Diclofenac 75mg**
- **Chondroitin sulfate 600mg**

- **1 therapy every 5 days for 4 weeks**

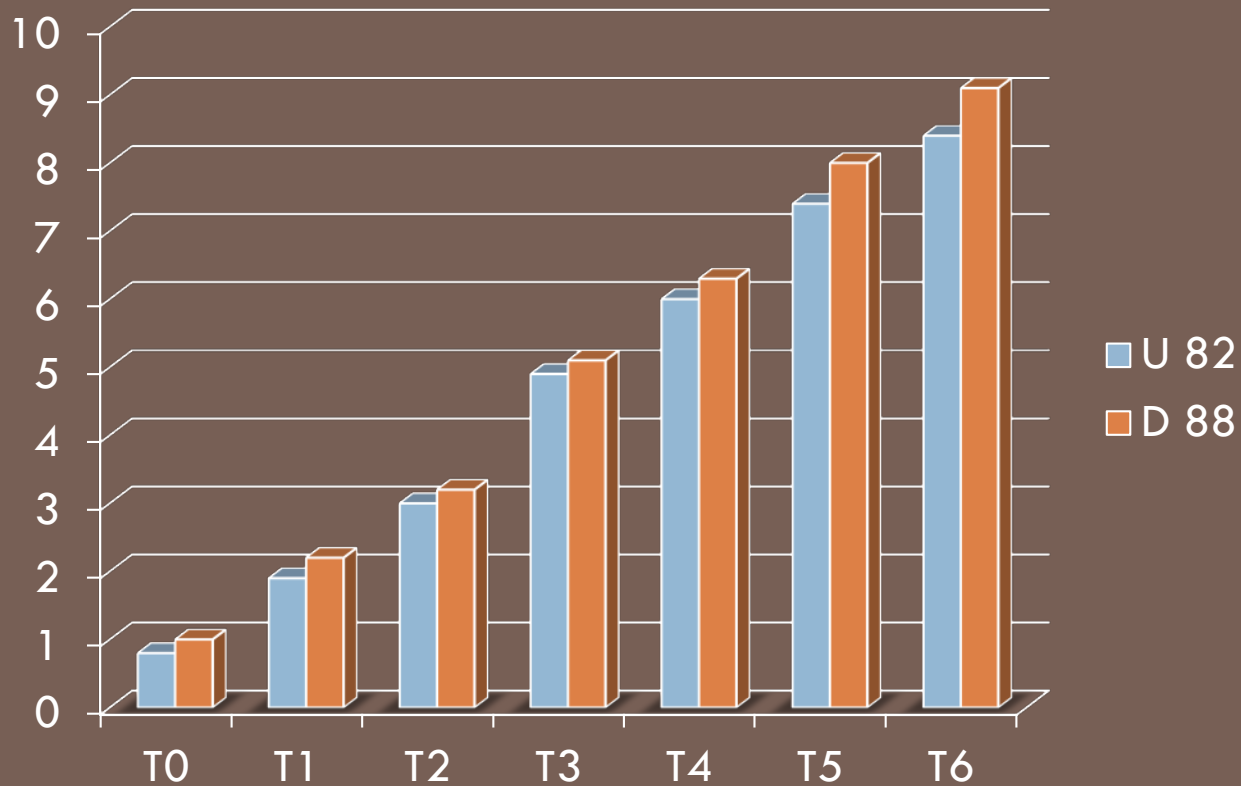
- **(if there are CALCIFICATIONS)**
- **+ EDTA 600mg**



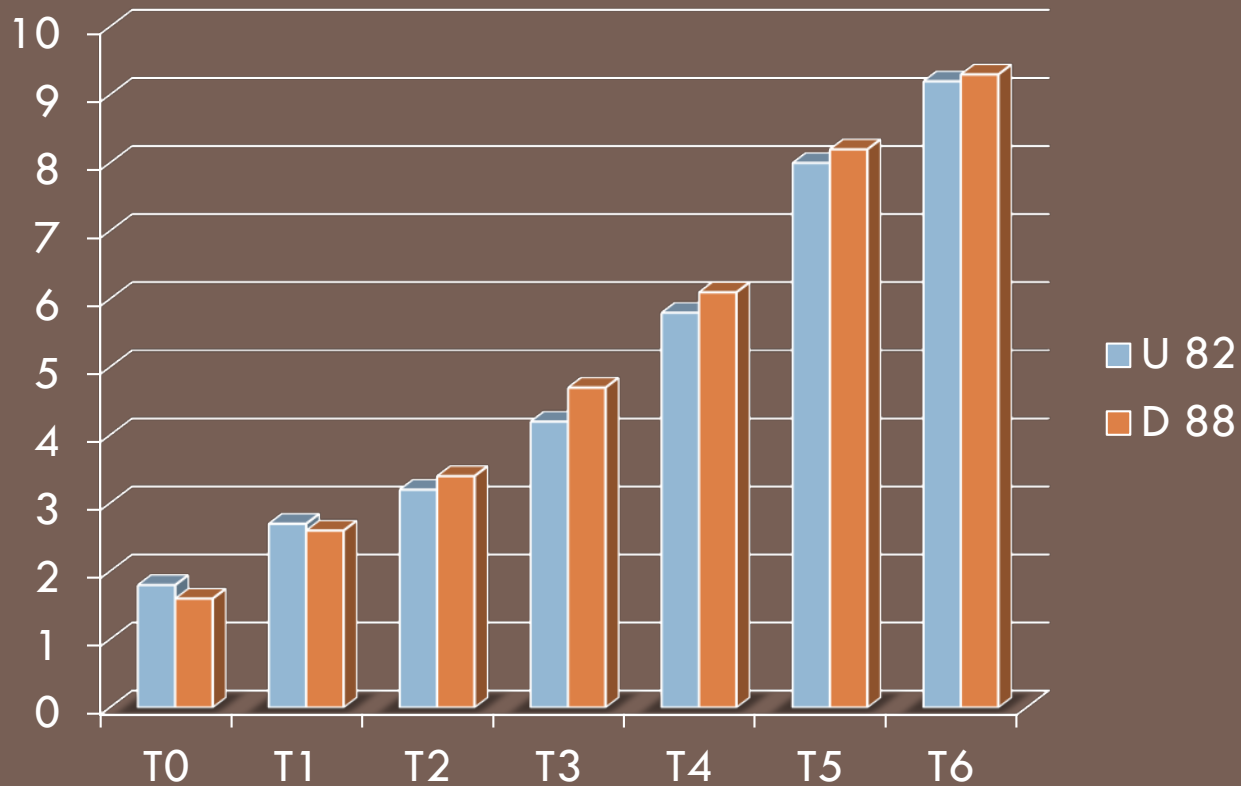
VAS: arthrosis COXO-FEMORAL



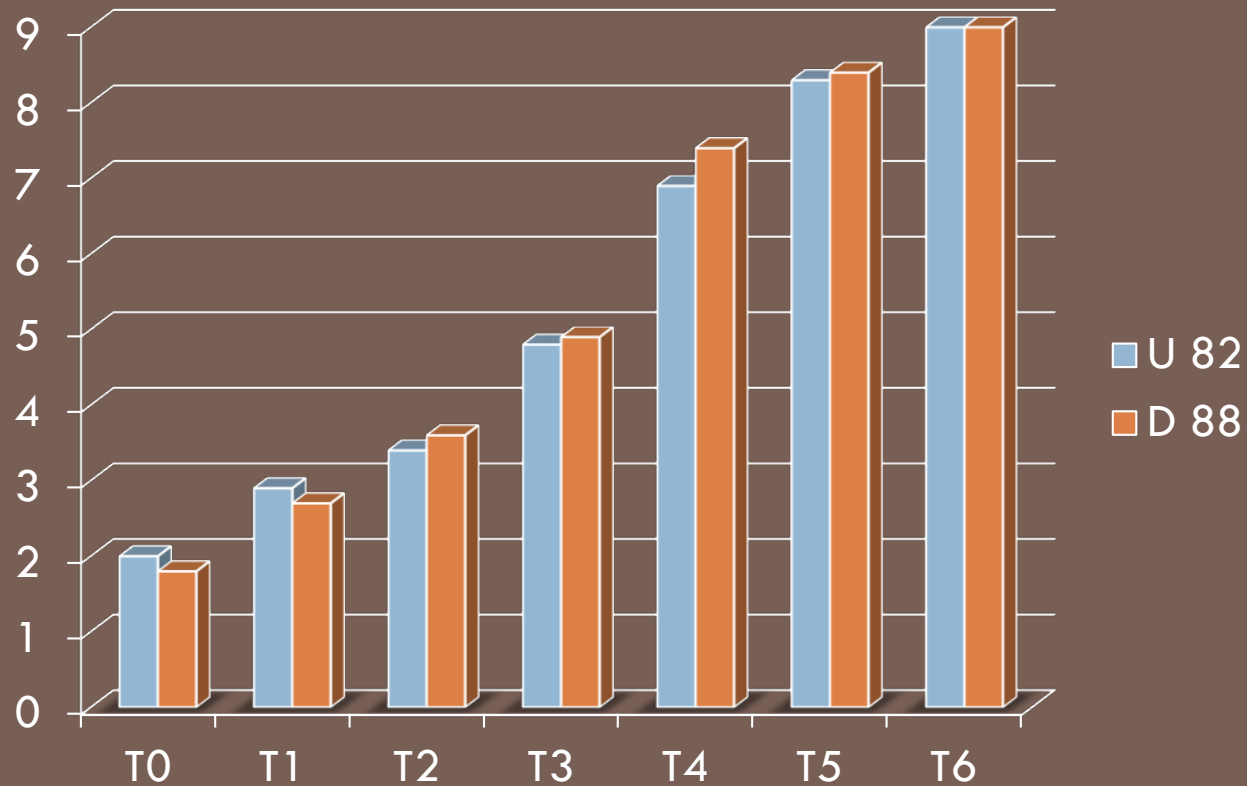
MOB flex: arthrosis COXO-FEMORAL



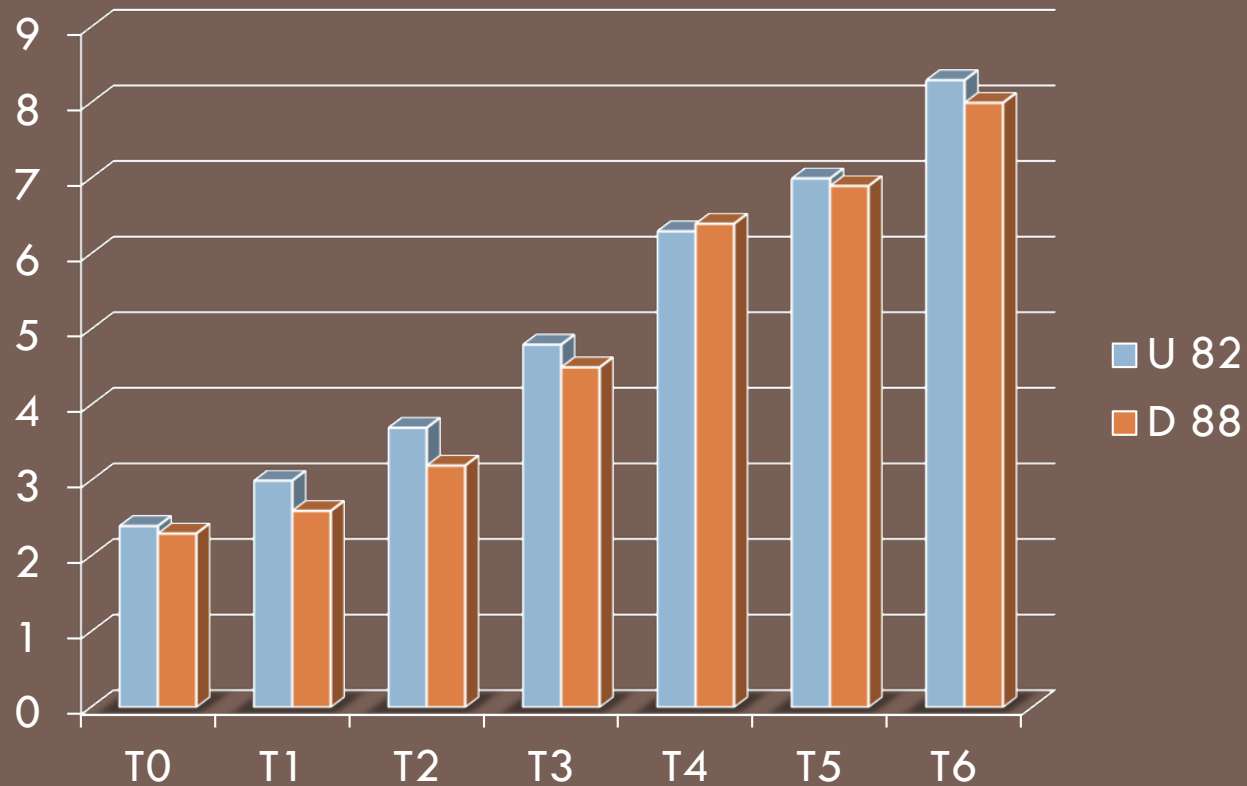
MOB extension: arthrosis COXO-FEMORAL



MOB rotation LEFT/RIGHT: arthrosis COXO-FEMORAL

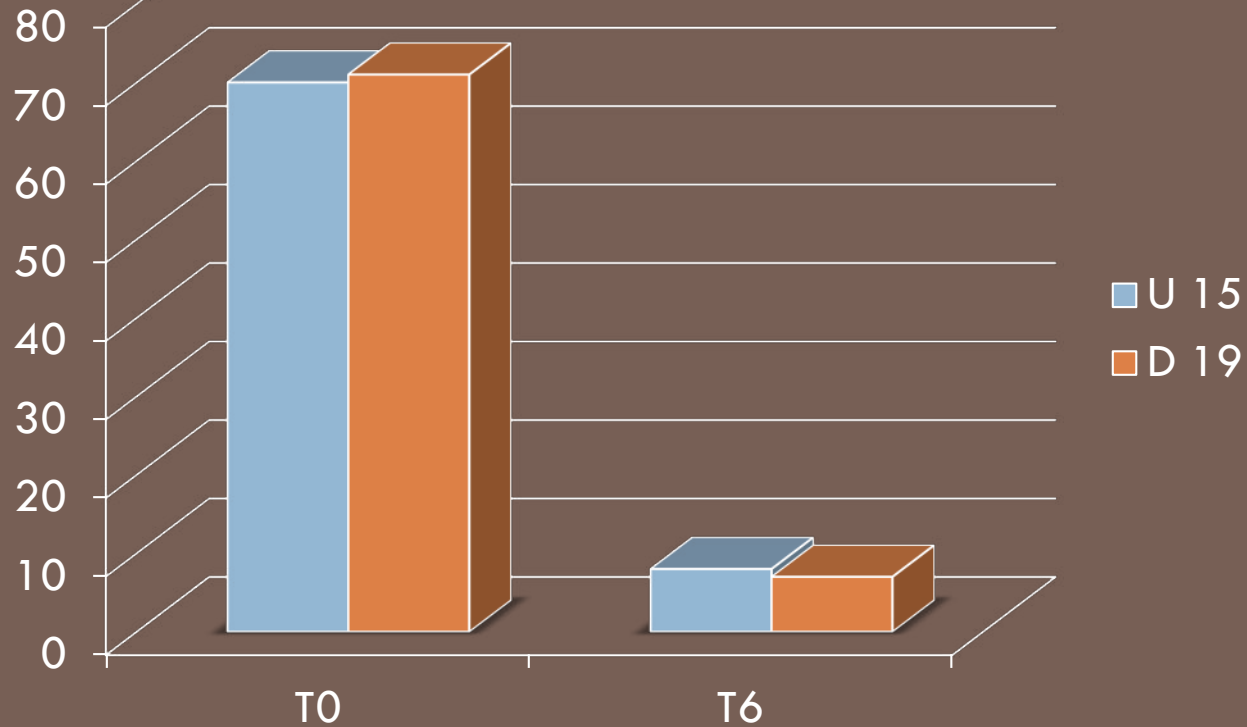


MOB flex LEFT/RIGHT: arthrosis COXO-FEMORAL

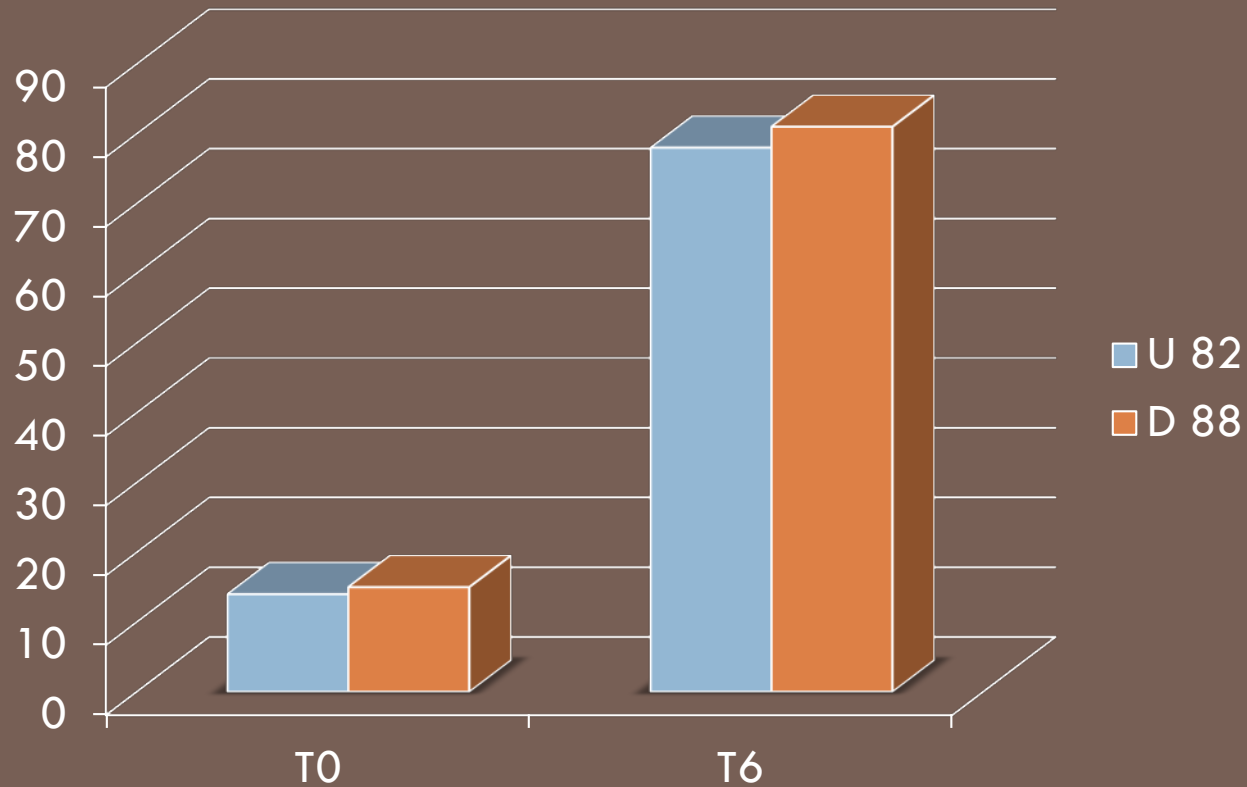


CALCIFICATIONS rid.%: arthrosis COXO-FEMORAL

(present in campione 20% con CALCIFICATIONS trattati anche con EDTA)



Instrumental Improvement Investigation %: arthrosis COXO-FEMORAL



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

results: arthrosis COXO-FEMORAL

- VAS rid. 65%
- MOB flex mig. 78,5%
- MOB est mig. 75,5%
- MOB rot LEFT/RIGHT mig.
71%
- MOB flex LEFT/RIGHT mig. 58%
- Calcif. (if any) rid. 63%
- Ind. instrumental mig. 65%



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

conclusions: **arthrosis COXO-FEMORAL**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: **arthrosis knee**

- Total cases 260
- Age from 46 a 79 years
- 142 men – 118 women
- Pathology diagnosis made by a specialist doctor
- Patients previously treated with other techniques with little success
- Exacerbation of the disease in the previous 6 months
- Use of unique Therapeutic Protocol through CRYOPASS THERAPY



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Therapeutic Protocol: *arthrosis knee*

- **Methylprednisolone hemisuccinate** 40mg
- **Glucosamine sulfate** 600mg

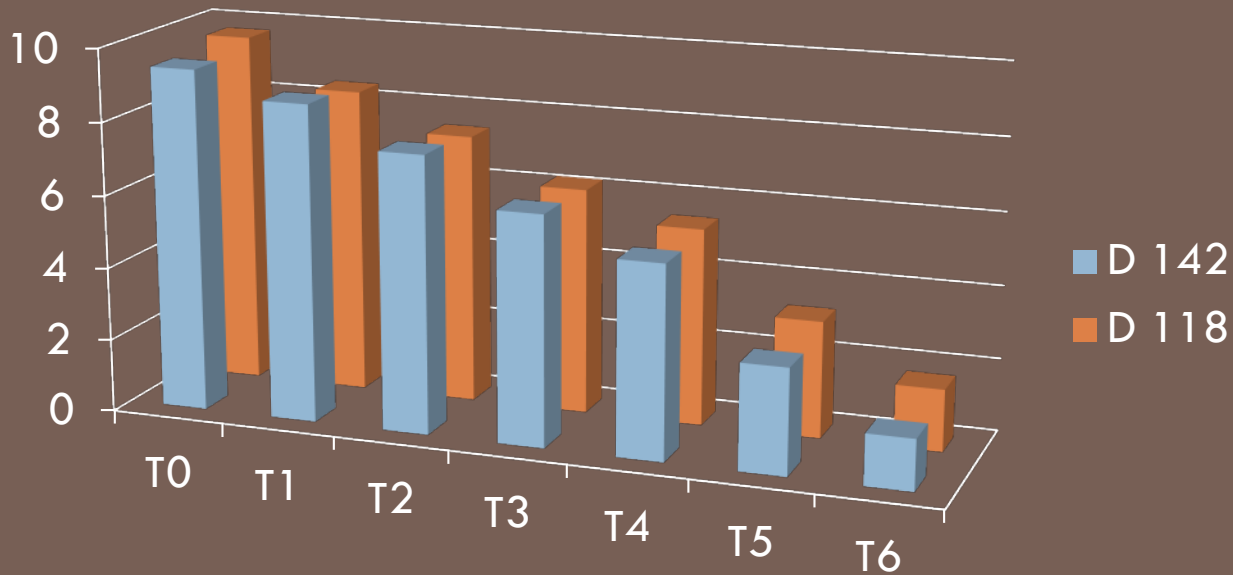
- **Diclofenac** 75mg
- **Chondroitin sulfate** 600mg

- **1 therapy every 5 days for 4 weeks**

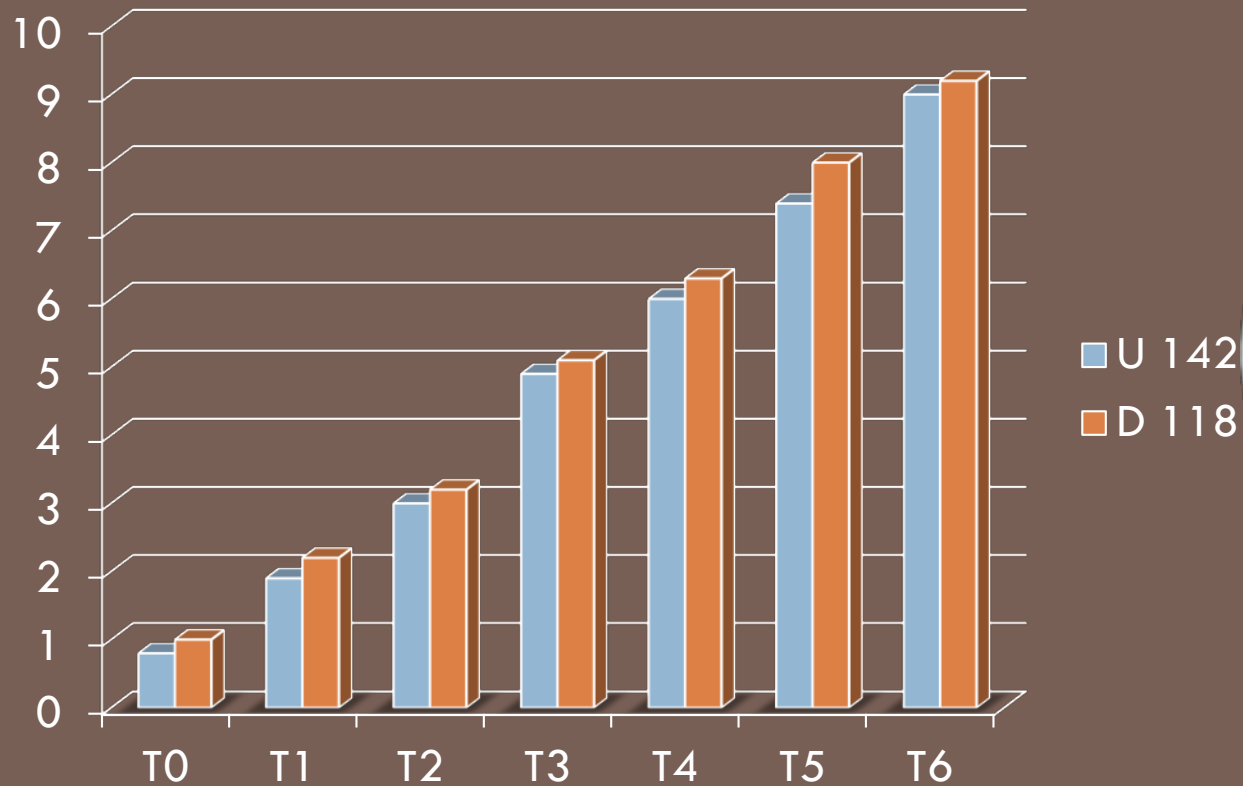
- **(if there are CALCIFICATIONS)**
- **+ EDTA** 600mg



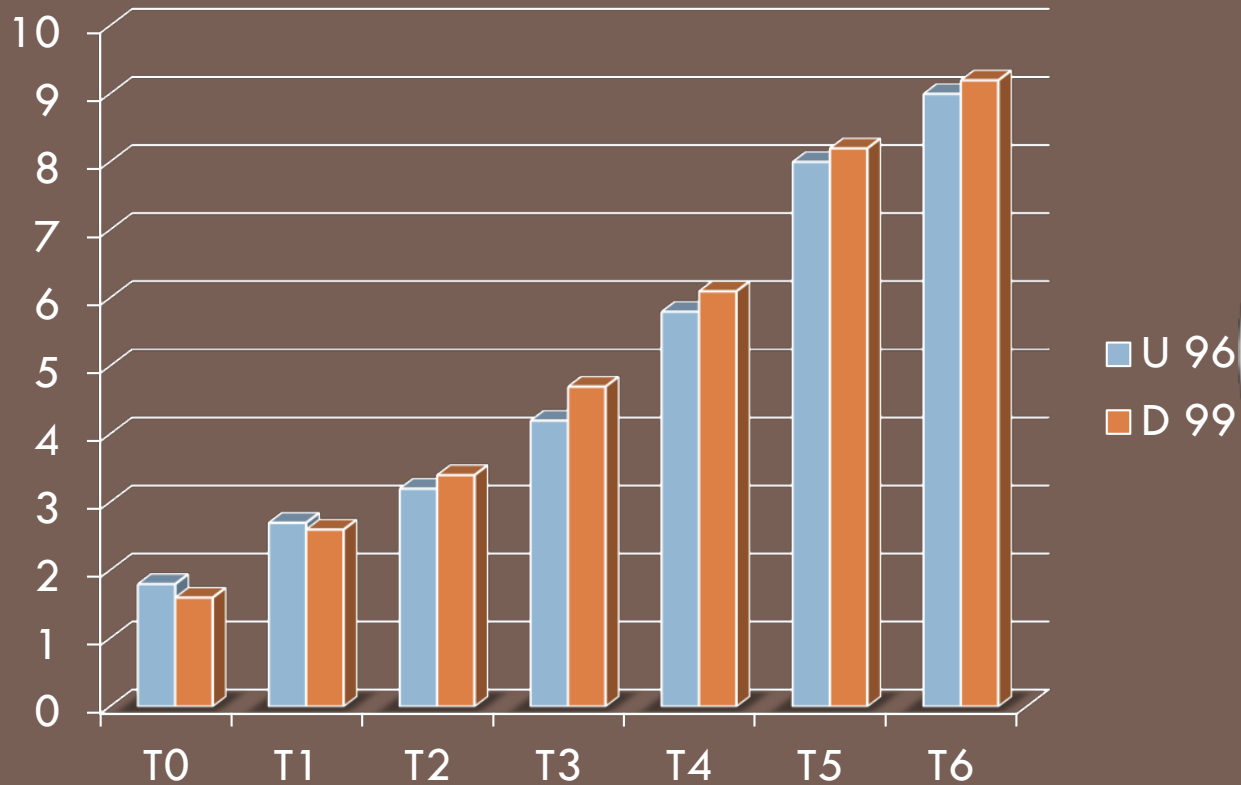
VAS: arthrosis knee



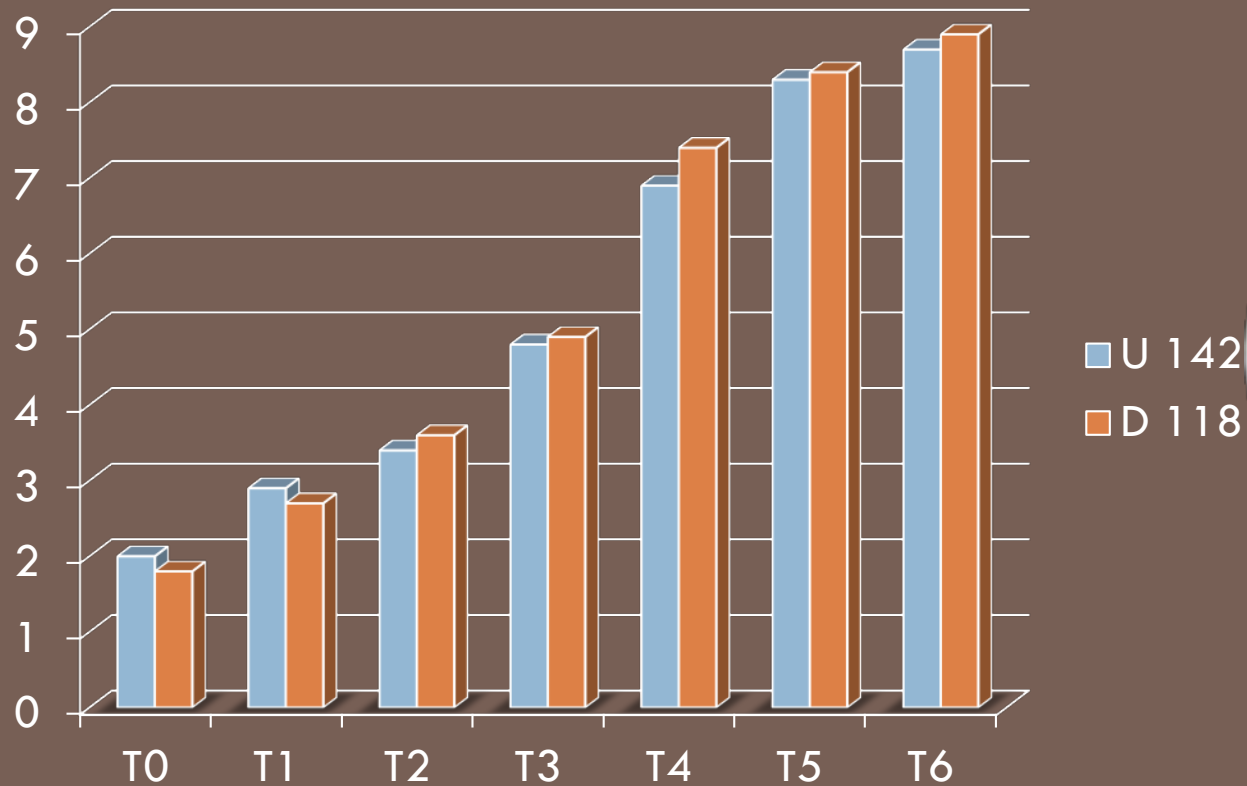
MOB flex: arthrosis knee



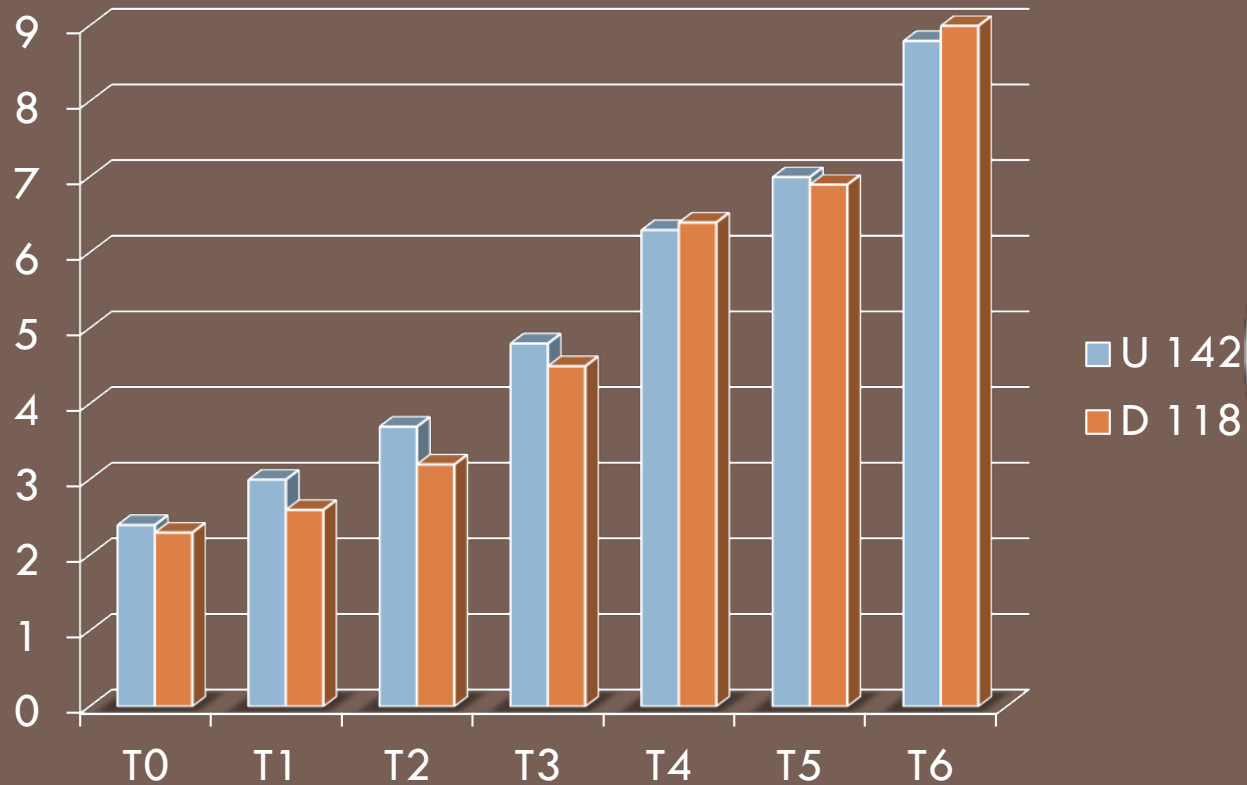
MOB extension: arthrosis knee



MOB rotation LEFT/RIGHT: knee

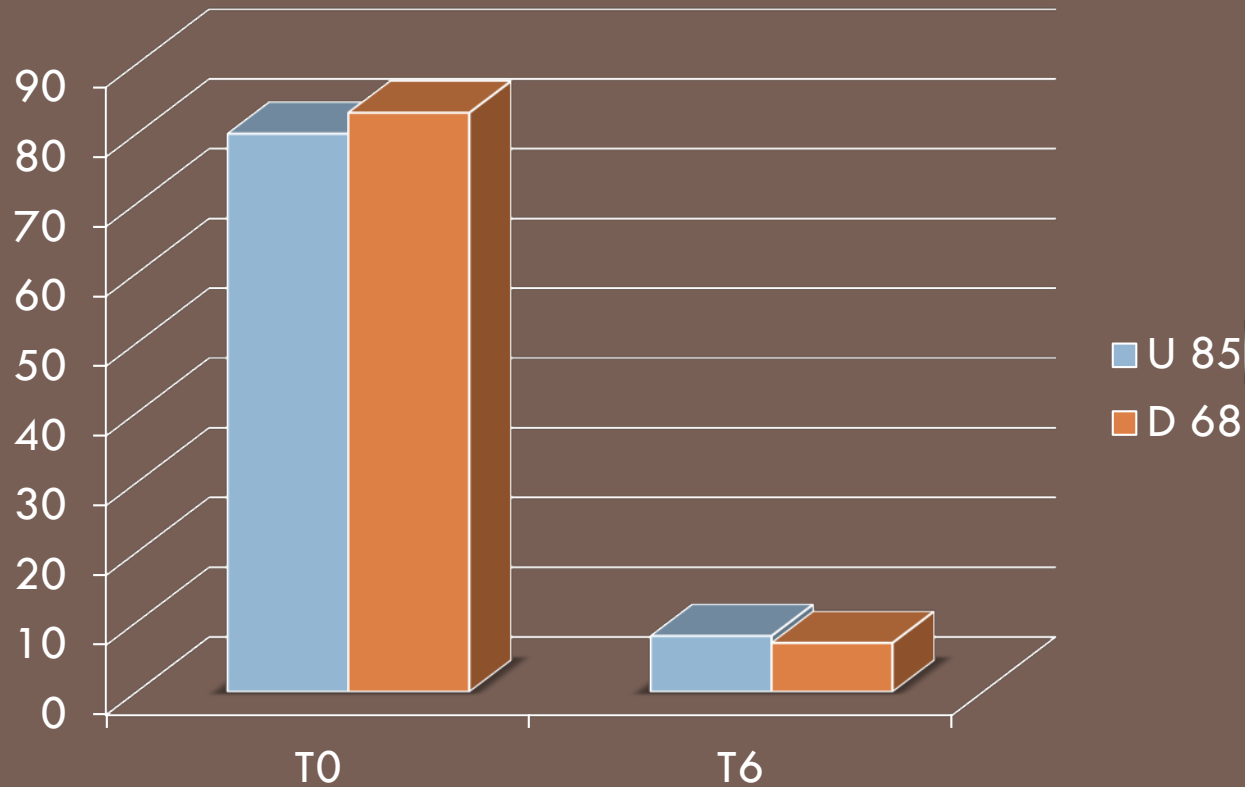


MOB flex LEFT/RIGHT: arthrosis knee

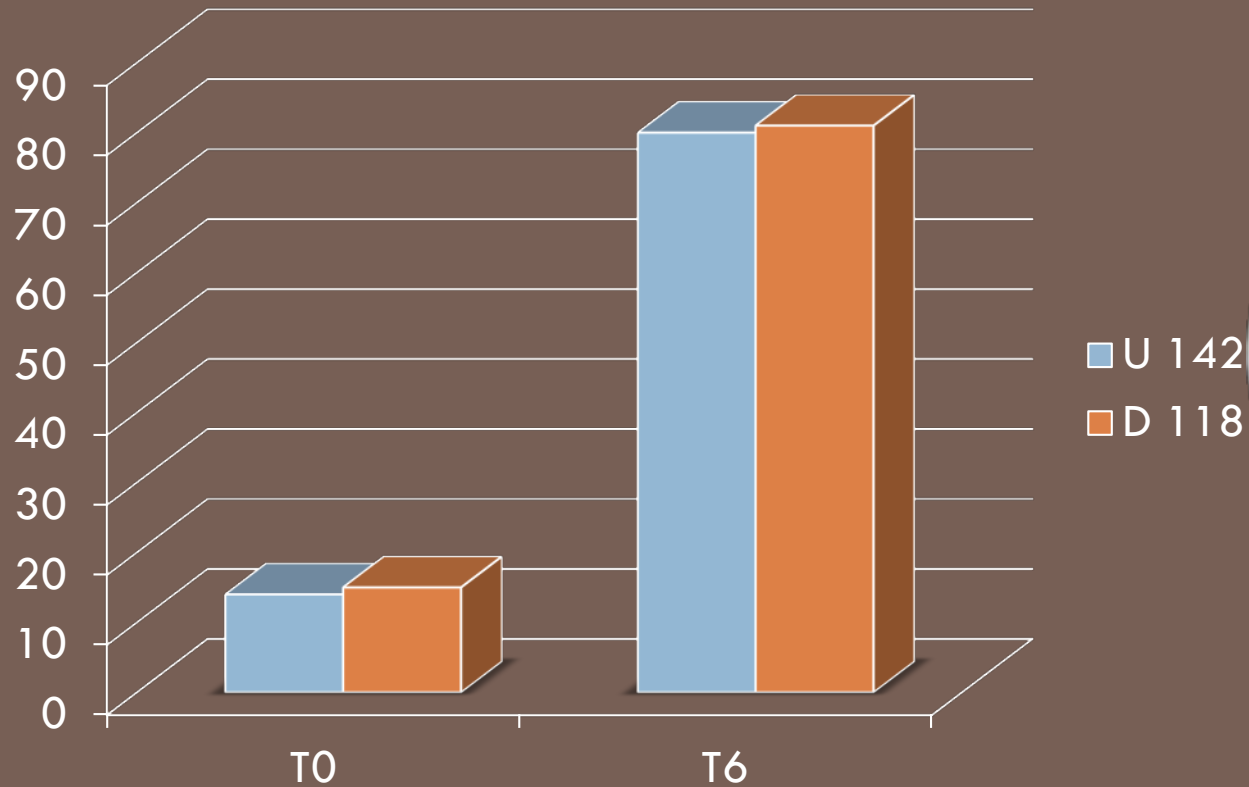


CALCIFICATIONS rid.%: arthrosis knee

(present in campion 58,85% con CALCIFICATIONS also dealt with EDTA)



Instrumental Improvement Investigation %: arthrosis knee



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

results: arthrosis knee

- VAS rid. 80%
- MOB flex mig. 82%
- MOB est mig. 74%
- MOB rot LEFT/RIGHT mig.
69%
- MOB flex LEFT/RIGHT mig. 65,5%
- Calcif. (if any) rid. 74%
- Ind. instrumental mig. 66%



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

conclusions: **arthrosis knee**

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

Inclusion criteria: **arthrosis Ankle**

- Total cases 160
- Age from 51 a 77 years
- 76 men – 84 women
- Pathology diagnosis made by a specialist doctor
- Patients previously treated with other techniques with little success
- Exacerbation of the disease in the previous 6 months
- Use of unique Therapeutic Protocol through CRYOPASS THERAPY



CRYOPASS THERAPY

-Orthopedic therapies-

Rehabilitation and Pain Therapy

Multicentric Experience

From 2015 to 2020

Therapeutic Protocol: arthrosis Ankle

- **Methylprednisolone hemisuccinate** 40mg
- **Glucosamine sulfate** 600mg

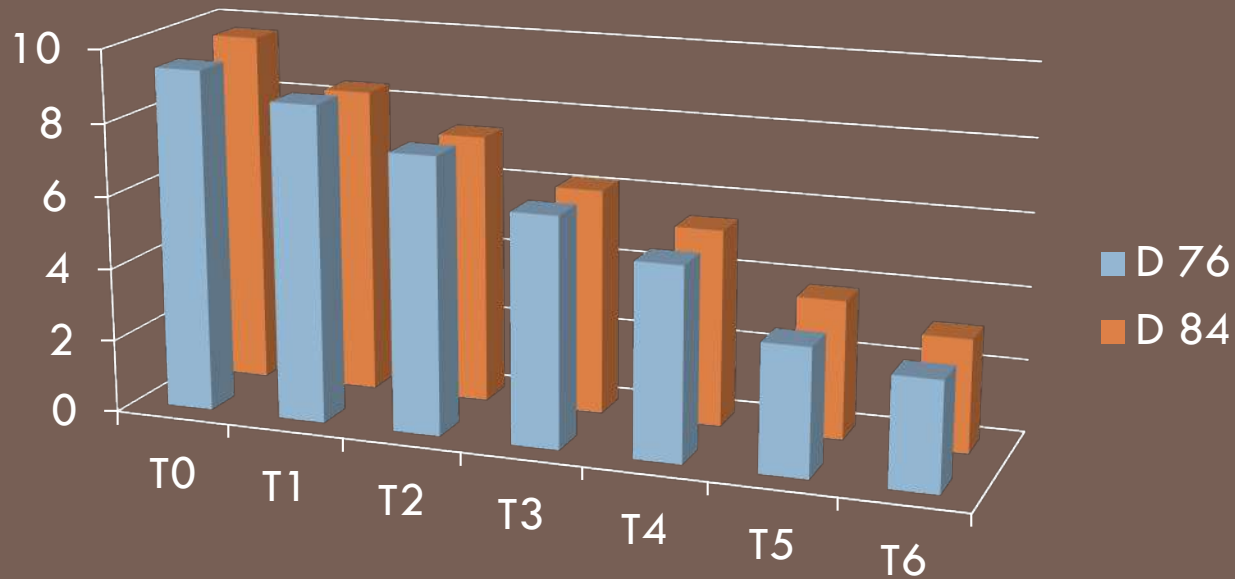
- **Diclofenac** 75mg
- **Chondroitin sulfate** 600mg

- **1 therapy every 5 days for 4 weeks**

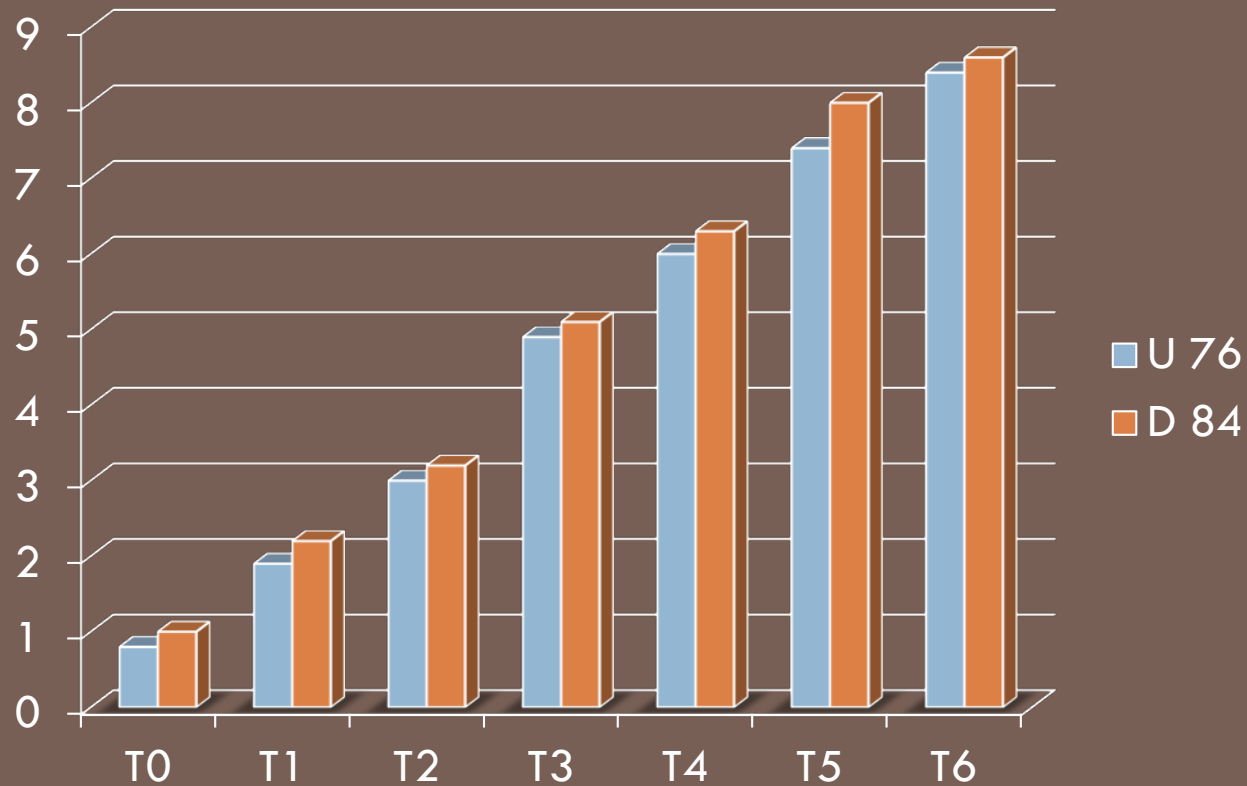
- **(if there are CALCIFICATIONS)**
- **+ EDTA** 600mg



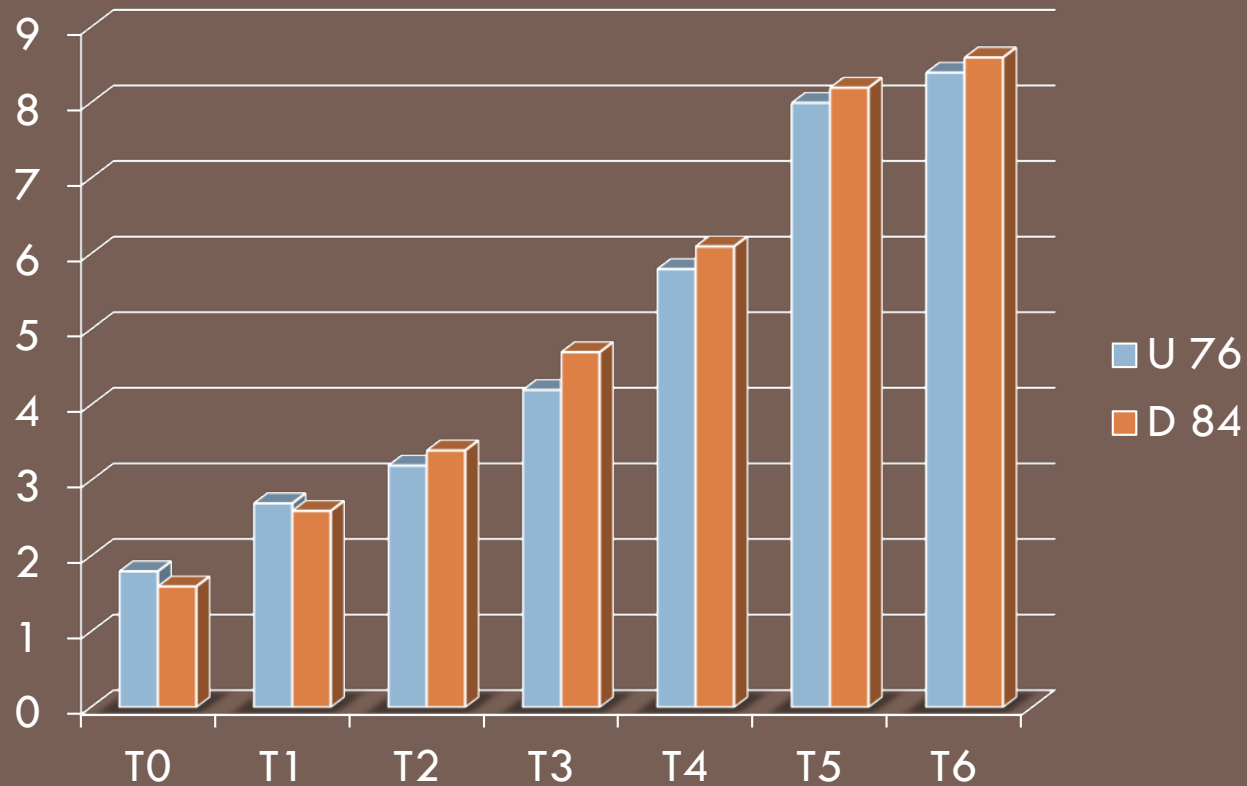
VAS: arthrosis Ankle



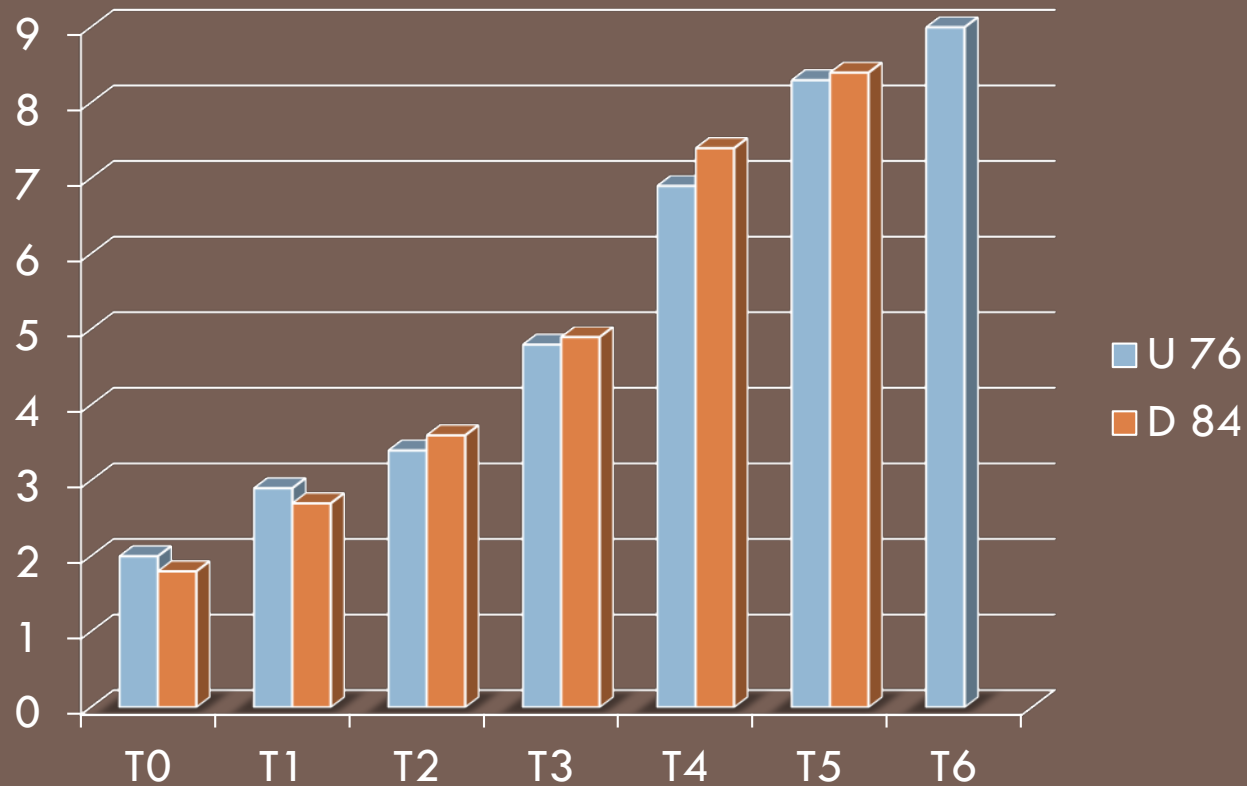
MOB flex: arthrosis Ankle



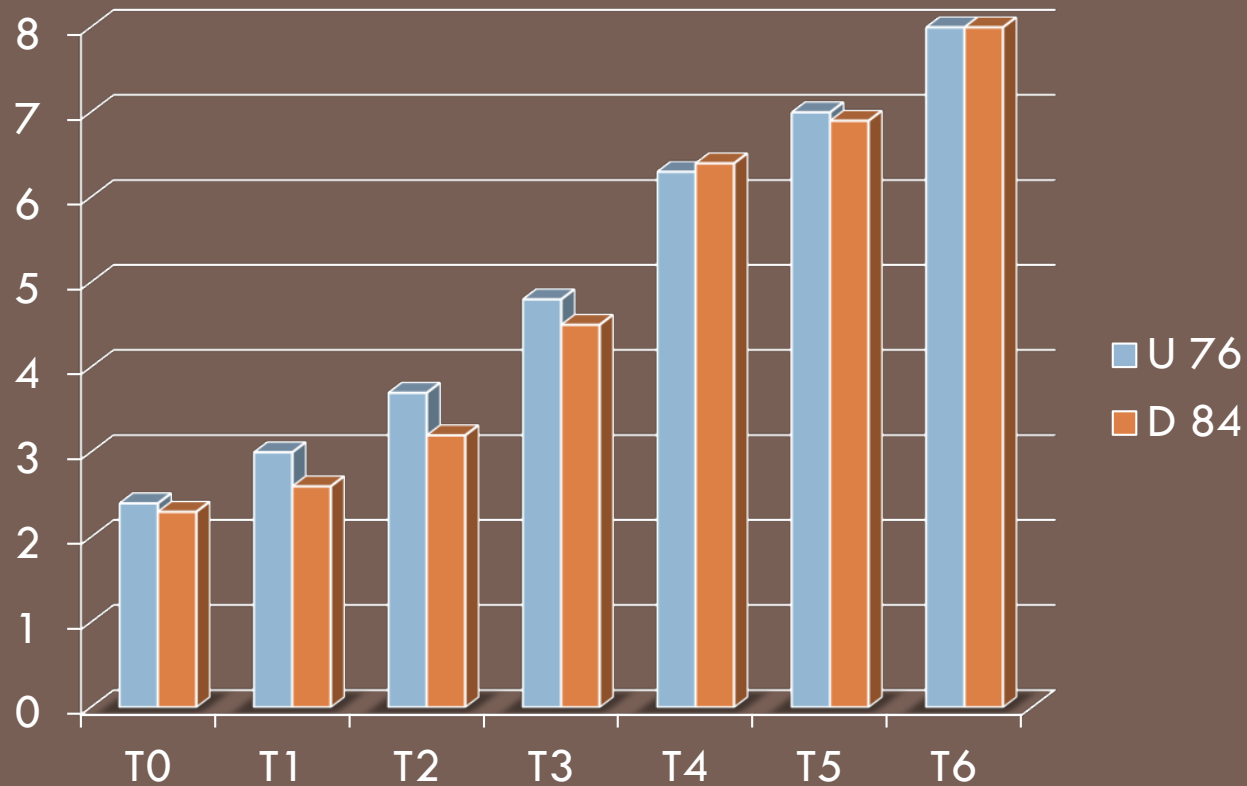
MOB extension: arthrosis Ankle



MOB rotation LEFT/RIGHT: Ankle

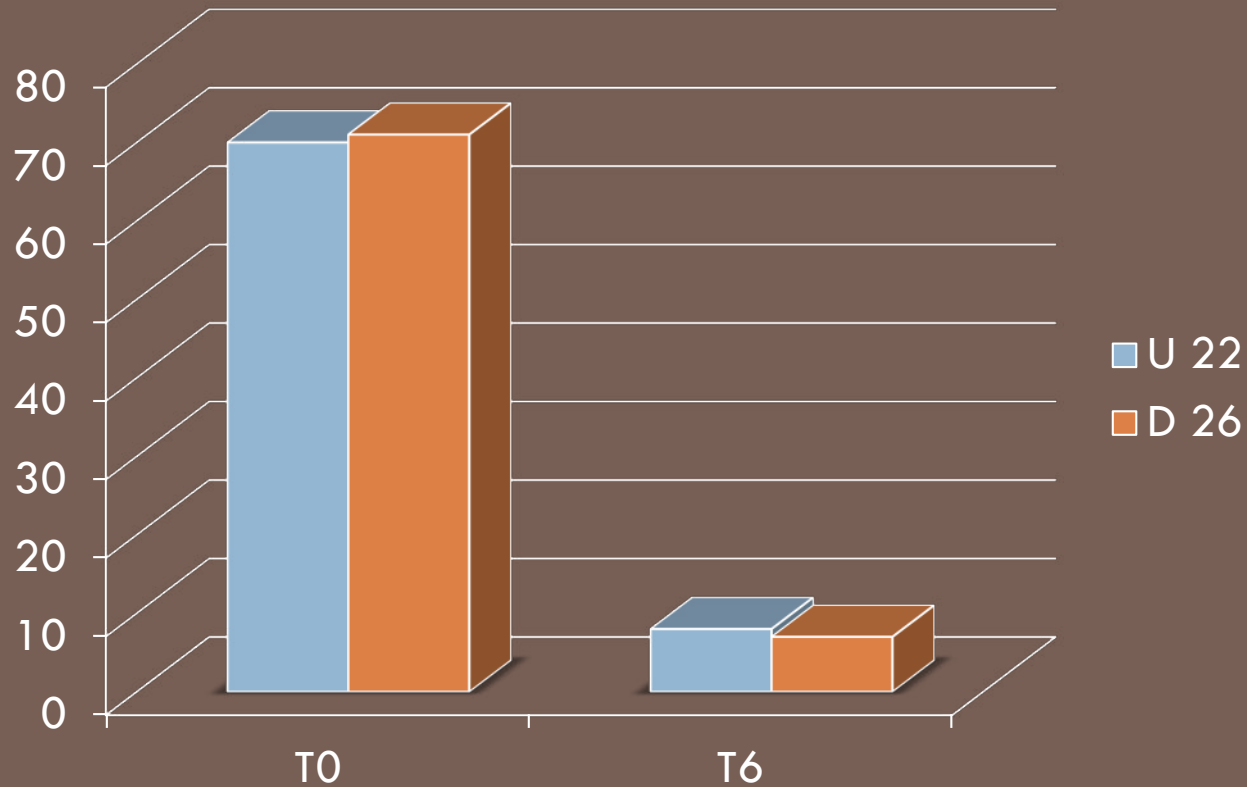


MOB flex LEFT/RIGHT: arthrosis Ankle

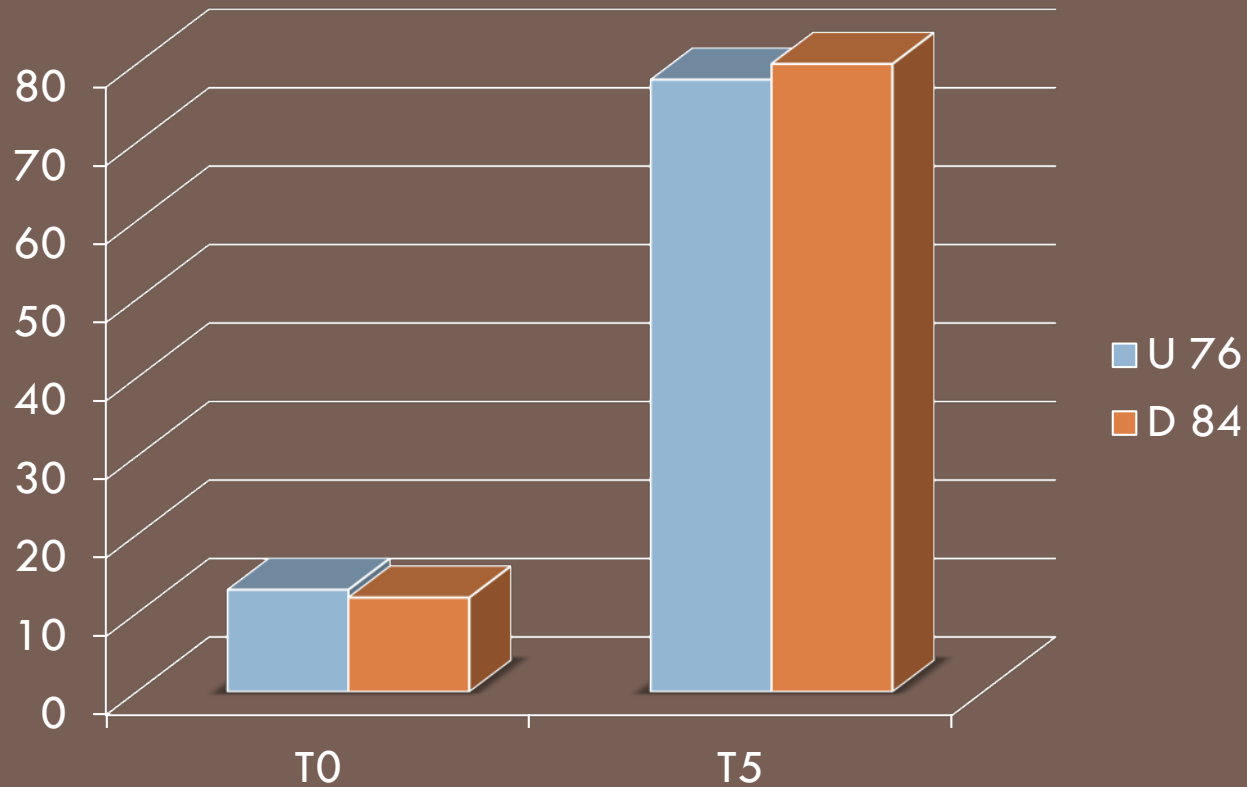


CALCIFICATIONS rid.%: arthrosis Ankle

(present in campione 30% con CALCIFICATIONS trattati anche con EDTA)



Instrumental Improvement Investigation %: arthrosis Ankle



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy Multicentric Experience From 2015 to 2020

results: arthrosis Ankle

- VAS rid. 65%
- MOB flex mig. 76%
- MOB est mig. 68%
- MOB rot LEFT/RIGHT mig.
71%
- MOB flex LEFT/RIGHT mig. 56,5%
- Calcif. (if any) rid. 63%
- Ind. instrumental mig. 66,5%



CRYOPASS THERAPY

-Orthopedic therapies- Rehabilitation and Pain Therapy

Multicentric Experience From 2015 to 2020

conclusions: arthrosis Ankle

- Painless therapy
- Absence of side effects
- Excellent patient compliance
- Quick restoration of functional activity
- Immediate recovery of social activities
- Elimination of additional supportive therapies
- Effectiveness maintained for a prolonged period

