



NUNNERY
ORTHOTIC & PROSTHETIC
TECHNOLOGIES

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Apocrine Testimonials

Patient 1 is a 55 year old male with a right below the knee amputation. Patient presented with a lengthy history of chronic skin irritations to the popliteal fossa, cystic pustules and blistering to the subcutaneous layer of skin and tissue. Numerous attempts to resolve these issues were performed including various prosthetic liner options (Smart Temperature liners, custom liners, gel liners, hybrid liners) and various prosthetic socket designs (conventional suspensions with locking liners or cushion liners and suspension sleeves, Revo-System socket design, Socketless-Socket system design). All attempts failed and patient was still experiencing painful skin issues. It wasn't until soon after I began applying Apocrine to the patient's prosthetic liners that he started to have relief. The significant skin irritations that this patient had experienced for years rapidly began to diminish and patient has been without breakdowns for approximately 7 months now. Patient's liners are now treated regularly with Apocrine.

Patient 2 is a 36 year old male with bilateral below the knee amputations. Patient presented to severe skin breakdowns, cracking, blistering and rashes without cause. Patient's prosthetic liners were treated with Apocrine and patient experienced a significant relief in the frequency and severity of these skin episodes. Patient's liners are now treated regularly with Apocrine.

Patient 3 is a 52 year old female with bilateral below the knee amputations. Patient presented with minor skin breakdowns associated with the overuse of bilateral residual limbs along with a strong odor from her prosthetic liners. We immediately began treating the patient's prosthetic liners with Apocrine and patient quickly noticed a decrease in the odor and skin issues she was experiencing. Patient's liners are now treated regularly with Apocrine.

Patient 4 is a 55 year old male with a left above the knee amputation. Patient presented with a significant odor coming from his prosthetic liner that was detectable during daily use. This was causing a confidence issue with the patient as he began viewing himself as unhygienic due to the odor. I began treating patient's prosthetic liner with Apocrine and patient reportedly has not had any odor issues since beginning the treatments. Patient's liners are now treated regularly with Apocrine.

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Patient 5 is a 55 year old male with a left above the knee amputation. Patient presented with significant skin breakdowns that included rashes and blistering. I attempted to relieve these skin issues with different socket designs that all failed and the patient continued to have these issues. I began treating the patient's prosthetic liner with Apocrine and patient reported that the frequency and severity of the skin episodes decreased significantly with the treatments. Patient's liners are now treated regularly with Apocrine.

Apocrine has made a huge impact on the way my amputee patients are able to function on a daily basis. It significantly reduces skin irritations associated with the use of a prosthesis as well as aid in the common odor issue many patients experience with the prosthetic liners.

Kindly,

Michael J. Nunnery, CPO
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