Medi-Solfen
Powered by Solfen-Tech

Continuous topical wound anaesthesia: relief from one minute, lasting up to 24 hours.

Medi-Solfen® combines anaesthesia and antisepsis in a single application directly onto open wounds, with adrenaline to limit bleeding.
The human-use version of Steri-Solfen®/Tri-Solfen® (220 million+ animal treatments).
Part 1 of the first human laceration study is complete.

1 · THE MEDICAL PROBLEM

A significant Therapeutic Gap: inadequate pain relief for open wounds in the field, and during and after cleaning and repair.

- **The wait.** Inadequate options for pain relief in the field where wounds occur, or in transit to care. Often impractical.
- **The needle.** Injection hurts; needle fear affects ~30% of young adults and most children. It also restricts use to small wounds.
- **Patchy cover** during cleaning, debridement, closure and recovery.
- **The cliff.** Injected local anaesthetics are short acting (<1hr). When they wear off, slower systemic agents or opioids are often used.
- **Scale:** ~6.5M US emergency department laceration visits a year (NHAMCS, 2012–15).

2 · WHAT'S DIFFERENT

A wound anaesthetic with antisepsis that stays on the wound at the pain site for prolonged analgesia.

- **Four actives, one product (same as Tri-Solfen®, approved for veterinary use):** lignocaine (fast onset), bupivacaine (long-acting), adrenaline (limits bleeding, holds the actives in place) and cetrimide (antiseptic).
- **Covers the whole wound surface,** not a line of infiltration beneath it, so it suits larger and irregular wounds acting directly on exposed nerve endings. Supported by the animal database; human data so far on small-to-moderate lacerations.
- **Relief from ~1 minute,** through 24 hours (Part 1, open-label).
- **Delivered without a needle** so it can be used at the point of injury, including in the field.

3 · WHY INVEST

De-risked and defensible, with a clear next value step.

- **De-risked chemistry and manufacturing:** approved actives, a proven formulation, and sterile production batches already made for the EU registration of Steri-Solfen®.
- **A defensible moat:** stabilised-adrenaline patents (40+ patents; newer families protected to 2042), a 36-month shelf life, and an animal database no competitor has.
- **A defined next step:** the Phase 2a, Part 2 study design is ready in Ukraine, with experienced collaborators in place.
- **Focused entry, large market:** emergency wounds first, then broader acute and chronic wounds as evidence and funding allow. ~AUD 32bn wound-care market (Grand View Research).


Next day after treatment: laceration, right shin, sutured & healing, no rescue analgesia


The everyday case: a child's bike fall


Next: forward and military care, fast and easy pain control for large wounds without an injection



FIRST-IN-HUMAN EVIDENCE · PHASE 1B/2A, PART 1 COMPLETE Kyiv · open-label, no placebo arm · 24 adults · 4 cohorts · lacerations only

88–100%	~1 min	23 / 24	p ≤ 0.012	0
pain reduction (VAS), by cohort	onset; relief through 24 h	needed no rescue analgesia for suture repair	pain reduction vs baseline, all four cohorts	drug-related adverse events (2 unrelated, mild)

Findings are consistent with the extensive pre-clinical animal database. Antimicrobial effect (exploratory): no microbial growth in any wound after treatment, versus growth at baseline in up to 4 of 6 patients per cohort. Principal investigator Prof Yurii Zakharash, ARENSIA Exploratory Medicine. Clinical Study Report v1.0, May 2026.

ROUTE TO FIRST USE

Data in lacerations. First use on Ukraine's frontline. Then wider wound care.

1 · Data: adult lacerations. Part 1 (Ukraine) ICH-GCP complete; Part 2 planned as non-inferiority versus standard of care.

2 · First use: fast-track registration in Ukraine, backed by a frontline military hospital's signed request to the Minister of Health.

3 · Expand: from frontline and military trauma care into civilian emergency care and global registrations, then broader acute and chronic wounds, as evidence and funding allow.

FUNDING SOUGHT

A$6M

A$6M funds Phase 2a, Part 2. It is the value-inflection step ahead of Phase III and a strategic partnership or investment. **Readout expected: 2028**

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