



Regencorr[®]

APPLICATION INSTRUCTIONS

INGREDIENTS: Aqua, Hydrogenated Polyisobutene, Glycerin, Butyrospermum Parkii Oil, Glyceryl Stearate, Cetearyl Alcohol, Glyceryl Stearate Citrate, Propylene Glycol, Gossypium Herbaceum Extract, Icilumab, Ctenactis echinata mucins, Stearyl Heptanoate, Ctenocactis echinater Phenoxyethanol, Ethylhexylglycerin,

PROPERTIES OF THE CREAM

The cream is intended for use in case of pathological changes in the skin resulting from prolonged sun exposure. The cream is indicated primarily for use on the face, in order to obtain an optimal therapeutic and cosmetic effect. The cream has antiproliferative, regenerative, immunostimulating activity, an indirect and direct inhibitory (*suppressive*) effect on transformed skin cells, their successive apoptosis (*cell death*), recovery, with the formation of healthy skin cells on the treated area (*regeneration*). Regencorr inhibits the excessive accumulation of connective tissue in the basal layer of the epidermis, reducing fibrosis and scar formation. It also helps to regenerate and normalize the morphology of the epidermal layer, resulting in a reduction in scar density and size, and an improvement in skin trophicity and regeneration. The cream has a minimal effect on healthy tissues, and is indicated specifically for use on the skin of the face and the entire area of the head and neck. Both for the treatment of precancerous skin lesions, and for influencing the formations of a malignant nature located in the corresponding areas bordering on the mucous region of organs and tissues (*eyelid, nose, lips*).

Regencorr is used in monotherapy for uncomplicated precancerous (AK) and malignant skin lesions (BCC), with complex, recurrent or invasive forms of malignant skin tumors (SCC, BCC), the cream is effective in combination therapy with surgery, external chemotherapy (*only with fluorouracil*), radiotherapy.

The cream is also intended for use in the prevention of recurrence.

The cream has immunostimulatory and regenerative properties. Regencorr from the first days of use completely stops the progression of precancerous cells, tumors, directly affecting angiogenesis (*growth and formation of new blood vessels*) tumors, causing their apoptosis (*death destruction*), without affecting healthy skin tissue. Penetrating into the pathological focus, the cream stimulates the production of pro-inflammatory cytokines such

as interferons, interleukins, due to a marked increase in the focus of cytotoxic T-lymphocytes, macrophages. Regencorr enhances the antigenic profile of tumor cells or any other atypical cells for macrophages, and significantly increases subsequently the antigen-presenting activity of macrophages already for cytotoxic T-killers. Therefore, contact of the cream with healthy areas of the skin causes only mild and minor reactions and is considered safe.

The cream is recommended for use in such skin pathologies as: actinic keratosis, keratoacanthoma, cutaneous horn, basal cell cancer, SCC.

The cream contains both high and low molecular weight peptides and proteins. And, all this combined, requires a certain mode of temperature storage and transportation.

INDICATIONS AND APPLICATIONS

- **ACTINIC KERATOSIS** (*KERATOACANTHOMA, CUTANEOUS HORN inclusive*);
- **BASAL CELL CARCINOMA** (*BCC*);
- **SQUAMOUS CELL CANCER** (*SCC; it is recommended to use only as an adjuvant, in combination with other, main types of treatment! Mainly, the cream can only be used to prevent cutaneous recurrence, applied to the previously treated area, scar, after surgical, radiotherapy or other treatment!*);
- **AS A PREVENTIVE AGENT** (*To prevent relapses it is applied after: surgical removal, radiotherapy, cryotherapy and (or) other previous treatment, for BCC, ACTINIC KERATOSIS, SCC, with a continuing high likelihood of recurrence*)

You should pay attention to the expiration date and always remember the storage temperature of the cream!

ACTINIC KERATOSIS

SPECIAL INSTRUCTIONS

It is important to remember that actinic (*solar*) keratosis and keratoacanthoma, cutaneous horn, in their cellular, morphological characteristics are precursors of squamous cell carcinoma (*precancer*), and the likelihood of such a malignant transformation is always preserved. The moment of such a malignant transformation is visually indeterminate, and the diagnostics (*histological examination of skin lesions*) does not give an answer when exactly this can happen. Therefore, one should always exercise some vigilance and onco-alertness, follow the recommendations. Both during and after treatment, it is required to avoid direct sunlight. You should always use different types of barrier protection. This diagnosis implies certain lifestyle changes, the introduction and adherence of which is necessary, both to maximize the effect of treatment, and to avoid possible relapse in the future. Mandatory reading of the section « PRECAUTIONS AND WARNINGS »!

The duration of the cream treatment may vary. It depends:

- on the size of the lesion;
- the duration of growth (*long-term recurrent form*);
- the quality and effectiveness of previously carried out medical measures (*surgical removal, cryotherapy, laser and other types of treatment*) that did not lead to a cure.

Also, an important factor influencing the development of the therapeutic effect and the duration of treatment for actinic keratosis are cases and forms of skin lesions accompanied by excessive hyperkeratosis (*pronounced thickening of the skin cover with a large number of scabs, scales*). That in the initial period, applying the cream to the affected area can significantly slow down its tissue penetration, absorption.

WITH ACTINIC KERATOSIS

With this disease, there are no restrictions on the area of the surface treated with the cream. The cream can also be used with significant, superficially spreading lesions of the scalp and diffuse forms of other localizations.

WITH KERATOACANTHOMA, CUTANEOUS HORN

For these skin pathologies, the cream is recommended for use with formations that do not exceed 2 cm in diameter (*<1 inch*).

METHOD OF APPLICATION

(*For actinic keratosis, keratoacanthoma, cutaneous horn, inclusive*)

Treatment consists of several stages. The scheme below is universal, but it can be adjusted (*reduced or increased in duration*), depending on the reasons already listed above.

Stage 1 / The first four days of treatment Regencorr should be applied 2 times a day (*morning and evening application*). From the fifth day, you should switch to the application regimen, once a day, lasting 30 days.

Stage 2 / Further, from the 35th day of treatment, the application of the cream should be alternated 1 time in 2 days (*the first day - application, the second day - rest*), lasting 30 days. Further, you should pause for 7-10 days and visually assess the degree of cleansing, regeneration and replacement with a healthy epidermis. In the case of a complete cure, with the formation of a healthy epidermis within the boundaries of the treated area, you should proceed to the prophylactic *stage 3*.

If after the treatment and, after some time, insufficiently treated, residual pathological areas of the skin are visually detected, *stage 1* should be repeated, with spot application (*read "NOTE"*).

Stage 3 / With simple, easily treatable, after the treatment with the cream, you should switch to the prophylactic application of the cream (*one time per week*), lasting 28 days. Further, if the remission is long and persistent, then its complete cancellation follows. But, in difficult cases, when significant in size lesions of actinic keratosis were treated with the cream, then prophylactic application one time in 7 days (*one application per week*) can be long, lasting 3 months or more.

NOTE

The response to the application of the cream for actinic keratosis, keratoacanthoma, cutaneous horn, with regression, rate of formation of healthy epidermis and complete cure, can vary greatly. For example, the cutaneous horn or keratoacanthoma (*for small sizes and mild forms*), after 35 days from the start of applying the cream, can regress with the accelerated formation of a healthy epidermis. Whereas the treatment of actinic keratosis always takes more time, with the need to go through all the stages of applying the cream, especially with a large area of AK skin lesion. This should be remembered, first of all, for those who have two of the three above-mentioned skin diseases at once. With actinic keratosis, different areas within the same affected area can also respond to the application of the cream with some difference, both in reactivity and in regeneration time. And in some cases, reapplication is required on the remaining pathological areas (*reapplication of **Stage 1***), without affecting the areas already treated with the cream earlier. Causes: long-term experience of the disease with significant skin lesions; insufficient or incomplete cleansing of the skin, with significant formation of masses of keratin, scab.

Each time, before the next use of the cream, you should wipe the area of application with a sterile bandage. In order to cleanse the site of application from the remnants of the previously applied cream, skin flakes. This cleaning procedure using a bandage should be carried out with care, without excessive pressure and friction. Since, careless, with excessive force, the removal of the scab from the affected area is undesirable, and can cause damage to the forming healthy epidermis. If you neglect the cleaning of the treated area, then the penetration of the newly applied cream into the skin is significantly impaired, which, in turn, will affect the implementation of the stages of therapy and the timing of the expected cure.

Mandatory reading of the section « PRECAUTIONS AND WARNINGS »!

BASAL CELL CARCINOMA (BCC)

SPECIAL INSTRUCTIONS for BCC

It should be noted that the cream is recommended for the treatment of tumors no larger than 5 centimeters (*2 inches*) in diameter, their radial growth on the skin, superficially spreading form. For nodular and ulcerative forms, no more than 2.5 cm (*1 inch*).

Since basal cell cancer has an abnormal vascular network, expressed in an extremely high number of vessels that feed and stimulate tumor growth, already in the first week of treatment with the cream, pronounced regression and decay of tumor vessels will be noticeable. Intensive disintegration of multiple pathological vessels feeding the tumor will be accompanied by the release of droplets of transparent lymph and blood, and subsequently to the formation of a dry crust (*which is the norm in the framework of treatment*), which requires further adherence to cleanliness, hygiene and accuracy. Intense weeping usually lasts from 5 to 15 days (*depending on the size of the tumor formation*), after which it decreases markedly, since most of the superficial, abnormal vessels of the tumor and malignant cells regress.

The second phase of treatment implies the effect of the cream on the natural and gradual enhancement of the immune activity of cells, against cancer cells of the skin, to achieve their further apoptosis (*death*), with replacement with healthy tissue. The duration of treatment can be from 40 to 60 days or more, depending on the size of the tumor, the type and stage of possible invasive progression. The speed and time of restoration of a healthy epidermis also depends on the individual characteristics of immune reactivity and regenerative age-related potential of the skin (*in persons over 60 years of age, the regeneration of the epidermis takes longer*).

The use of the cream for basal cell carcinomas localized on the lips, the inner part of the nostril of the wing of the nose, around the eyes, is permissible and safe, due to the absence of toxicity in the cream. BUT! When applying the cream on the eyelid, you should be careful and careful not to let the cream get into the eyes. If the contact happens, it is necessary to rinse the eye area with warm water.

The success and timing of cure, when applying the cream, strongly depend on many nuances, clinical and morphological characteristics. First of all, these are:

- what is the experience of tumor growth;
- the number of relapses in the past;
- the type, shape, size of the tumor (*for example, in BCC with a hyperkeratotic crust, the cream penetrates much worse, which will certainly affect the timing and complexity of treatment*);
- whether any other types of treatment were used before using the cream, and whether there were relapses before, for example, if the patient, before applying the cream Regencorr, had a basal cell carcinoma removal (*surgical, MOHS, cryotherapy, radiation exposure*). After these types of therapy, a dense scar may form, with deep-lying cancer cells remaining in it, which in the future, already acting on the relapse that has arisen in the scar, will require an increase in the time of spot application of the cream, correction of the application regimen, and treatment tactics in general.

During the treatment with the cream, the tumor (*within its borders*) regresses with the formation of healthy tissue, as a rule, not evenly. This is due to the fact that "young", superficial tumor cells respond to treatment much faster than "old", primary (*long-term progression, deeply invasive*), from which the primary tumor growth began. That is, superficial cancer cells, within the boundaries of one tumor, much earlier respond to the effects of the cream, immunological changes in the skin, with further regression and regeneration of the healthy epidermis, in contrast to the adjacent malignant cells with significant vertical growth. For this reason, the duration of cream treatment should be at least 45 days (*without taking into account the pauses between the stages and subsequent prevention*).

The cream has two uses

Option 1. Application, with newly identified formations, and with already secondarily detected and confirmed relapses of basal cell tumors. You should read the subsection "METHOD OF APPLICATION for BCC"

Option 2. Only as a method of preventing the possible occurrence of relapses, immediately after the treatment.

If the cream is planned to be used only as a means of prophylaxis, to prevent the occurrence of a relapse, immediately after any treatment (*surgical removal, cryotherapy, laser, photodynamic, etc.*), then you should navigate and adhere to the recommendations set out in the section «AS A PREVENTIVE AGENT»

METHOD OF APPLICATION for BCC (Monotherapy)

Regencorr is recommended to be applied over the entire surface of the tumor and its edges, additionally covering 1 millimeter of healthy tissue from the edge of the tumor with cream. Treatment consists of several stages. The scheme below is universal, but it can be individually adjusted (*reduced or increased in the duration and frequency of applying the cream*) depending on: the size, type, shape of the basal cell carcinoma; complexity, neglect; the depth of vertical growth of repeated recurrences in scars after previous treatments (*surgery, cryotherapy, etc.*). And from the given characteristics of the tumor, the timing of tumor regression and its replacement with a healthy epidermis will also depend.

Stage 1 / Treatment of basal cell carcinoma should begin with the application of a cream on the tumor formation 2 times a day (*first application in the morning, the second in the evening*), every day, for 7 days. Further, from the 8th day of treatment, you should switch to applying the cream once a day (*every day*). This application regimen must be adhered to for 30 days. Further (*from the 38th day of treatment*), it is necessary to take a break in treatment for 4 days.

Stage 2 / From day 43, it is required to resume the application of the cream, with the same application regimen (*one time per day, every day*), within 25 days. Next, you should take another break for 10 days, for a visual assessment of tumor regression, the process of regeneration of healthy tissue, epidermis. If after a two-week break, a clean, young epidermis is visualized, then you should proceed to the prophylactic stage 3. If, within the boundaries of the area treated with the cream, against the background of a forming healthy epidermis, there are signs of remaining pathological cells (*red papule; no healing, bleeding sore*), then you should read the item "NOTE".

Stage 3 / (prophylactic) After two stages of using the cream, especially with uncomplicated forms of basal cell carcinoma (*superficial, non-invasive, small tumor size, short duration of growth*), with a quick and absolute replacement for a full and healthy epidermis, then, in this case, the prophylactic use of the cream minimum in duration. The cream should be applied once a week for 6 weeks.

Those who had complex forms of BCC before using Regencorr cream: large tumor sizes,

invasive tumor growth before treatment, there were relapses in the past and the risk of new ones remains, then after two stages of treatment with the cream, you will need to switch to a longer prophylactic application of the cream to the treated area, once every five days (*6 applications of the cream per month*), lasting 3 months. This frequency of application is possible up to 1 year or prophylaxis once or twice a year for 6 weeks to 3 months, depending on the complexity of the previous treatment and the number of relapses in the past.

NOTE

There are cases when, after two stages of cream treatment and a fourteen-day break, 90% of the tumor size, actively regresses and is replaced by a healthy epidermis, but at the same time micro areas with pathological signs may remain (*papules of red color, small size, not healing, bleeding ulcer*). This usually indicates that this area of the treated tumor had a deeper vertical invasive growth beyond the boundaries of the basal layer of the dermis. The diameter of such residual and treatment-resistant papules, malignant areas, as a rule, does not exceed 3-5 millimeters.

This happens in complicated forms, if, before using Regencorr, in the anamnesis there was:

- large tumor size and unsuccessful cryotherapy;
- had a long history of the disease, with deep invasive growth;
- also those whose relapse has progressed actively in a dense, voluminous post-surgical scar;
- not the first relapse, when the basal cell carcinoma, before applying the cream, has repeatedly undergone any other types of treatment.

And if, taking into account the above, these residual pathological areas are found, then treatment should be continued. It is recommended to repeat and correct stage 1, increasing the duration of the cream application: application for 12 days, 2 times a day (*morning and evening*). Next, you should switch to a single application of the cream, with a duration of 35 days. Next, you should to take a break of 10 -14 days, with the transition to prophylactic application. But! It should be remembered that the cream should be applied only to the remaining pathological areas, with minimal contact with the already treated, healthy epidermis of the skin. Prophylaxis (*stage 3*) in these complicated cases is longer, in contrast to mild forms of BCC, it is recommended to use Regencorr once or twice a year for a duration of 6 weeks to 3 months, depending on the complexity of the previous treatment and the number of relapses in the past.

METHOD OF COMBINED APPLICATION for BCC

Combined use of Regencorr with other treatment options is recommended in complicated cases of BCC, when there is a history of recurrence, and there is a need to improve the effectiveness of ongoing treatment. This method involves the use of cream Regencorr, immediately (*from 3-6 days*) after: surgical removal, radiotherapy, cryotherapy, external chemotherapy (*fluorouracil*). Regencorr should be applied once a day, the duration should

be from 4 to 6 weeks. In the first 2 weeks of application of Regencorr cream it is recommended to use an occlusal application under the patch. After the combined treatment, a prophylactic application of Regencorr cream for a period of 1 month should be followed by its discontinuation. Frequency of application of the cream to the treated area during the prophylactic period is once every 5 days.

Each time, before the next use of the cream, you should wipe the area of application with a sterile bandage. In order to cleanse the site of application from the remnants of the previously applied cream, skin flakes. This cleaning procedure using a bandage should be carried out with care, without excessive pressure and friction. Since, careless, with excessive force, the removal of the scab from the affected area is undesirable, and can cause damage to the forming healthy epidermis. If you neglect the cleaning of the treated area, then the penetration of the newly applied cream into the skin is significantly impaired, which, in turn, will affect the implementation of the stages of therapy and the timing of the expected cure.

Mandatory reading of the section « PRECAUTIONS AND WARNINGS »!

SQUAMOUS CELL CANCER (SCC)

SPECIAL INSTRUCTIONS

In this rather aggressive form of skin cancer, there is always a risk of metastasis. For this reason, especially in primary treatment, the use of Regencorr cream in monotherapy for SCC, with its slow diffusion through the skin and increasing therapeutic effect is incorrect. The cream is recommended only for SCC in situ (*superficial, non-invasive form*), as an adjunctive agent that enhances the efficacy of other therapies. To accelerate the therapeutic effect and increase intradermal diffusion, Regencorr cream can be combined with the application of 5% fluorouracil (*only for SCC in situ*). Application of Regencorr should be started 5 days after the end of the course of fluorouracil. Regencorr should be applied once a day, the duration should be from 4 to 6 weeks. In the first 2 weeks of application of Regencorr cream it is recommended to use an occlusal application under the patch. After completing the use of Regencorr cream should be a preventive period.

It is also recommended to use the cream in complicated cases of SCC, both before surgical or radiation treatment, in order to stop the progression of the tumor, as well as after these types of treatment, as an additional means of prophylaxis in cases where in the area undergone radiation, resection, in the scar, after surgery there is still some likelihood of recurrence.

Method of preventive application for SCC read in the section «AS A PREVENTIVE AGENT»

It is mandatory to read the section « PRECAUTIONS AND WARNINGS »!

AS A PREVENTIVE AGENT

(For use immediately after : surgical excision, radiotherapy, cryotherapy, and (or) other

previous treatments, for BCC, ACTINIC KERATOSIS, SCC, with a continuing high likelihood of recurrence)

The cream, for prophylactic purposes, should be applied to the suture, scar, treated area, already 6 days later, after surgical removal, cryotherapy or any other treatment. If, after removal of the tumor formation, near the scar or in the thickness of the scar, there are malignant or precancerous cells, then their further invasive growth and transformation stimulates and accelerates, first of all, the forming postoperative suture itself, the scar. Due to various growth factors (*transforming growth factor, epidermal growth factor, fibroblast growth factor*), and other tissue factors leading to immunosuppression, strongly increasing in the postoperative regenerating scar, which are the main catalysts for tumor progression and malignancy of precancerous cells. Therefore, the cream is recommended to be applied during the entire period of active regeneration of the suture, scar, followed by a decrease in the frequency of applying the cream, during the period of already regressed scar and regenerated skin, left in or near the scar tissue. If the scar is already formed, the duration of exposure is directly proportional to its size.

METHOD FOR PREVENTIVE USAGE

After undergoing one of the above treatments, the cream should be applied 2 times a week (*3-4 days interval between applications*). The duration of this application regime is 1 month. Further, the application of the cream is carried out only once every 7 days, with a duration of 45 days (*the duration of applying the cream in this mode is possible up to 3 months or more*). Long-term (*3 months or more*) prophylactic use of the cream is, first of all, recommended for those who have experienced recurrences of the disease more than once in the past, and have undergone another surgical or any other type of treatment in this regard. Also, long-term prophylaxis is indicated after any treatment variant of actinic keratosis, which has shown resistance to therapy in the past, if before the treatment were affected significant areas of the face, there were severe and invasive AK lesions with hemorrhage, dense scabs.

Also in cases where tumor or precancerous lesions of the skin, in the past, were localized and treated on the nose, parietal region, as well as the eyelid or ear, with a continuing high probability of a deep relapse and (or) the threat of invasive growth and damage to cartilaginous or bone tissue (*BCC*). Repeated prophylaxis in such cases is recommended after 6 -12 months.

After surgical treatment of SCC and BCC, the cream should be applied to the entire treated area: scar, suture, covering the cream with an additional 10 mm of healthy skin bordering the scar.

A different prophylactic mode of application of the cream is recommended in cases where the face have (*first detected*) the initial signs of cell atypia (*spot redness, the initial appearance of peeling*), telangiectasia (*filamentous dilated small capillaries, blood vessels on the skin*). In such cases, the cream should be applied prophylactically 2 times a week (*interval 2-3 days*) for 40-65 days (*if during the period of prophylactic application of*

Regencorr, pathological skin changes regressed much earlier than the specified period and are no longer visualized, the duration of application of the cream, however, should be continued and should be at least 40 days). Repeated prophylaxis in such cases is recommended after 24- 48 months, depending on the frequency of exposure to UV hazardous areas and the average annual UV dose received (not regular use of sunscreen in high altitude areas, near-equatorial and south of the equator areas). UV-protective agents are mandatory!

Each time, before the next use of the cream, you should wipe the area of application with a sterile bandage. In order to cleanse the site of application from the remnants of the previously applied cream, skin flakes. This cleaning procedure using a bandage should be carried out with care, without excessive pressure and friction. Since, careless, with excessive force, the removal of the scab from the affected area is undesirable, and can cause damage to the forming healthy epidermis. If you neglect the cleaning of the treated area, then the penetration of the newly applied cream into the skin is significantly impaired, which, in turn, will affect the implementation of the stages of therapy and the timing of the expected cure.

Mandatory reading of the section « *PRECAUTIONS AND WARNINGS* »!

DRUG INTERACTIONS

Acceptable

The use of sunscreen is allowed, but only on top of the applied layer of Regencorr. Regencorr cream is allowed to be mixed with neutral cosmetic cream (*note: «Not acceptable»*) in proportions of 1/2 (1/3 when applied to the eyelid area), only in cases where it is necessary to reduce the concentration of the cream, due to high skin sensitivity, and only during the preventive application regimen of Regencorr.

- Combined and alternating use of fluorouracil with Regencorr cream is acceptable.

Due to their synergistic effect, the course of treatment requires adjustment.

- Topical antibiotics / Hydroquinone / Retinoids (*Mixing with Regencorr is acceptable. Requires adjustment of dosage or frequency of application. Use of sunscreen is mandatory*)

- Benzoyl Peroxide / Azelaic Acid (*Mixing with Regencorr is not acceptable! Application interval should be at least 6 hours. Requires adjustment of dosage or frequency of application. Use of sunscreen is mandatory*)

Not acceptable

Regencorr is absolutely not compatible with external medications such as: antimetabolites, immunosuppressants, NSAIDs, imiquimod, corticoids (*especially fluorinated forms, external use*)!

Mixing Regencorr is not acceptable with creams if they contain proteolytic enzymes, synthetic or organic acids (*collagenase, any proteases, malic acid, citric acid, salicylic acid*). It is not acceptable to use cosmetic masks, lotions, serums less than 24 hours before using Regencorr (*skin cleansing before using Regencorr is mandatory*).

The combined use of external agents containing zinc and compounds with anti-inflammatory and angiogenesis-stimulating properties is not allowed.

It is not allowed to mix Regencorr with creams of high fatness and density.

SIDE EFFECTS

Usually the cream is easily tolerated. Side effects are rare, and can be expressed as an allergic reaction, local skin nature. It should be borne in mind that slight redness, slight itching, peeling are not a side effect. Usually, they are subtle and little perceptible and are the norm during treatment. Due to the absence of toxicity in the cream, its use does not have a systemic effect on the body. In case of severe swelling of the skin, when using the cream, you should stop applying it.

PRECAUTIONS AND WARNINGS (*required reading*)

The following applies to all skin diseases, in the pathogenesis of which solar ultraviolet light plays a key role. During treatment or during prophylactic use, it is very important not to expose yourself to open sun exposure. Different methods of barrier protection should be used: hats and appropriate types of clothing; adhesive plasters of double thickness; sunscreens, with a UV filter index of 50+, with a significant layer applied and renewed every 2-3 hours. Before using sunscreens, you should familiarize yourself with the composition, for the content of substances that have poorly studied and expressed stimulating activity of regenerative processes in the skin, the ingress of which to the postoperative suture, scar, also the surrounding scar area of the skin is not recommended.

It should be remembered that after treatment with Regencorr cream, formed at the site of the treated BCC, actinic keratosis, healthy, renewed epidermis, contains extremely little melanin. This means that the protective and adaptive properties of the skin, when exposed to solar ultraviolet radiation in the initial period, will be very low. Therefore, protection of the treated skin area with dense patches or other means, leaving the house, both in sunny and cloudy weather, is MANDATORY, especially during the first year of after healing and prophylaxis.

It is important to introduce some restrictions and changes in your lifestyle, which affect the effectiveness of treatment, and reduce the likelihood of relapse, and the emergence of new malignant skin pathologies. This is, first of all, minimization or complete elimination from the use of food products and (or) drugs that increase the photosensitivity of the skin to the sun's UV (*ultraviolet*). An increase in skin photosensitivity leads to rapidly developing deep burns and skin lesions. What can be one of the important triggers for the appearance of both primary precancerous skin changes and malignant transformations.

In this regard, it is advisable to significantly reduce the use or even eliminate the use of a number of food products (*the following drugs require special attention*):

- citrus fruits dill, parsley, celery, carrot (*two days before going out into the open sun, the consumption of these products should be minimized*).

Before using medicines prescribed by doctors, it is necessary to familiarize yourself with the instructions (*special instructions, side effects*), for the presence of photochemical reactivity properties in the drugs, leading to an increase in photosensitivity, inflammation and skin lesions! Eliminate them or find an alternative to them. To clarify the contraindications and the corresponding properties of drugs, it is recommended to consult both a doctor and a pharmacist.

Groups of drugs requiring attention and control of use(*the list is not complete*):

- diuretics (*furosemide*);
- hypotensive (*angiotensin blockers, beta-adrenoblockers, etc.*);
- antifungal (*especially griseofulvin, voriconazole, itraconazole*);
- psychotropic, antiallergic (*especially promethazine, cyproheptadine, perphenazine*);
- antiarrhythmics (*amiodarone, diltiazem*);
- non-steroidal anti-inflammatory drugs (*especially piroxekam, meloxicam, ketoprofen*);
- antibiotics (*doxycycline, like all drugs of the tetracycline group, Fluoroquinolones*);
- biologically active additives, which include medicinal herbs, with a high content of furocoumarins. And a number of other medicines.

It is also recommended to reduce the intake of sweets, both during and after treatment. Exercise caution and accuracy, using gloves, protective, barrier products for the skin of the face, hands:

- with petroleum products (*gasoline, acetone, machine oils, etc.*);
- pesticides, herbicides;
- Contact with heavy metals (*arsenic, lead, cadmium, nickel*);
- Barrier and remotely limit the treated skin areas from external sources of high temperatures.

Foods and drugs have different photoreactivity in the skin, from weak and moderate *to high enough*. But the differences can be leveled out due to the amount of consumed food, medicine and insolation frequency (*especially in the mountainous, southern near-equatorial regions*). It should be remembered that the use of the food products, medicines, that increase sensitivity to ultraviolet radiation, requires resorting to protective, barrier agents over the treated areas of the skin in cloudy weather.

STORAGE CONDITIONS (*required reading*)

The cream should only be stored at 3 to 10°C (37 to 50°F) in the refrigerator. Transporting the cream is acceptable, but the temperature should not exceed 20°C (70°F). It is recommended to refrigerate the cream to 2-3°C (35° F) before shipping. At the same time, the cooled cream should be temporarily stored in temperature insulating containers or thermal insulation bags, materials. Store in a compartment (*section*) of the refrigerator, out

of reach of children.

It is absolutely unacceptable to freeze the cream!

SHELF LIFE

The shelf life of Regencorr cream is from 1 to 2 years, depending on the period and form of release. See the expiration date on the package.

If the cream was allowed to be stored outside the refrigerator and without an insulated container at room temperature 24-27°C (75-81°F) up to 5 days, then the shelf life will be halved. When the cream is heated and stored for more than 2 days at 30°C (86°F) or higher, then its properties are inactivated and the use of the cream is no longer advisable and unacceptable.

RELEASE FORM

Regencorr face cream is available in tubes, jars with a capacity of 18 ml and 50 ml.
Dong - Pha SkinHeal Lab RR 319, Hangang-Daero, Jung-Gu, Seoul, Korea