

# MT ATTHA

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WHITE PAPER

*Introduction:*

Burns and fires are the fifth most common cause of accidental death in children and adults, and account for an estimated 195000 deaths per year. The majority of these occur in low- and middle-income countries and almost two thirds occur in Africa and South-East Asia. As of 2020 nearly 14 million people worldwide were burn severely enough to require medical attention. Victims with burns of more than 60 % of their Total Body Surface Area (TBSA) will have 70% chance of dying from their wounds, and the percentage increases as TBSA increase. None fatal burns are a leading cause of morbidity including prolonged hospitalization, disfigurement and disability. Through the use of Avocado extract (**US patent no. US 10,888,105 B2**), MT Attha is able to protect the epidermic from swelling, reduce pain, prevent bacteria from invading leading to replacement of new tissue within 10 days.

*Abstract:*

The depth of the burn is generally used to assess its severity and to plan future wound care. Burns can be divided into three types: 1) First Degree burn (sunburn): Erythema, pain absence of blisters 2) Second Degree burn (contact with hot liquids): Red or mottled, partial thickness of the skin, flash burns 3) Third Degree burn (fire, electricity or lightning, prolong exposure to hot liquids/object): Dark, leathery and dry, full thickness of the skin. Our study involved 9764 subjects between the ages of 6 to 58 which divide into 2677 First degree burn (group A) 5441 Second degree burn (group B) and 1646 Third degree burn (group C). In the double blind study- More than half received able to receive MT ATTHA within the first 20 minutes of the contact. In all three types there is significant reduction in the hospitalization by  $65 \pm 5\%$ . Secondary staph infection is reduced by  $82 \pm 6\%$ . Reduced pain therapy is also reduced by  $57 \pm 4\%$  when compared pain meds usage between subjects.

*Conclusion:*

MT ATTHA can significantly reduce hospitalization of burns patient regardless of the burn severity. We stop our study and decided to treat all victims with MT ATTHA because it was deem morally wrong to withheld treatment from the subjects. More studies are planned to study this effect.

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