

OZONE TREATMENT PROTOCOL FOR RECURRENT URINARY INFECTIONS

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Nota Bene: The protocols are working guidelines that AEPROMO puts at the disposition of all its members, expecting that they will be references in the daily medical work whenever ozone therapy is used on patients.

It shall correspond to the health professional (physician, dentist, veterinarian, podiatrist in the areas for which their profession and current legislation allows it) to whom compete, with their studies, knowledge and experience to assume professionally how to apply ozone therapy to their patients. Although these protocols are referents and guidelines for its members AEPROMO invites them to base their daily practice on these protocols.

The protocols are based on the Madrid Declaration Ozone Therapy, ISCO3, 2nd. ed., 2015, 50 pages.
<http://aepromo.org/en/madrid-declaration-on-ozone-therapy-2nd-edition/>

The content of the protocols and the items that they cover are subject of improvement based on the medical experience and scientific investigation. AEPROMO calls all its members to help to improve the protocols with their contributions, suggestions, experience and knowledge.

Comply with all measures of asepsis and antisepsis.

Insert a thin silicone pre-lubricated catheter into the bladder. Let the urine flow, evacuate the bladder.

Insufflate with ozone at concentrations between 10-15 $\mu\text{g}/\text{NmL}$ 100 mL volume.

It is possible to combine the treatment with the administration of ozonated water, which is better.

Introduce 100 mL of ozonated bidistilled water at 5 $\mu\text{g}/\text{NmL}$. Remove 50 mL and leave 50 mL inside the bladder.

In case of urethra stenosis, introduce the tip of the 20 cc syringe into the urethra.

Proceed to insufflate the ozone at 8 $\mu\text{g}/\text{NmL}$ 20 mL volume, once or twice a week.