

Mesotherapy, Biomesotherapy®, and Scars

Mesotherapeutic treatment of all surgical scars (as well as those of other origin, as proposed by modern Neural Therapy and, even earlier, by Traditional Chinese Medicine) is carried out in association with the topical application of **Hyperoil®** in humans and **Hypermix®** in animals.

Procaine at low concentrations (1% or 2%) is the main medication used in Neural Therapy for the allopathic treatment of scars, either alone or in a cocktail with other medications indicated for the syndrome.

Mesotherapy using Homeopathic Remedies—i.e., Biomesotherapy®—uses diluted and dynamized Procaine (Procainum), along with other homeopathic remedies specific to the syndrome. These are injected into the scar and into various complementary acupuncture points identified through Biomesotherapeutic diagnosis.

This method is clearly of maximum refinement compared to the allopathic one, and as a result produces outcomes of greater frequency and quality.

In all cases, mesotherapeutic treatment of all surgical scars is strictly recommended, as well as scars of any other origin, to eliminate the possibility of the development of interference fields (Neural Therapy) and to promote faster and higher-quality scar recovery.

The treatment of abnormal scars (keloids), which in Biomesotherapy® are treated etiologically (by correcting the metabolic basis of altered scarring), or especially large scars (such as burn scars), is also extremely useful, as it accelerates the healing process and guides it along physiological parameters.

Complete re-epithelialization of the scar is common, especially with the use of Biomesotherapy®—a particularly important outcome in cosmetic surgery (e.g., mastoplasty scars).

The topical application of Hyperoil® in humans and Hypermix® in animals, in their various pharmaceutical forms, is a fundamental complement in the treatment (dressing) of all traumatic (surgical) and other types of skin lesions.

A necessary mention—and heartfelt recommendation—should be made of the urgent need to replace the “obsolete” intramuscular injection with the mesotherapeutic (multi-injection) method for administering any drug parenterally.

Significant reduction in the amount of drug or cocktail needed, faster response, lower risk of denaturation in the injection site (as the mesoderm is non-interfering, unlike muscle tissue), more uniform distribution, gradual absorption (thus prolonging the pharmacological effect despite the drastic dose reduction).

Not to be underestimated are the reflex nervous and neurohormonal responses induced by multi-injection.

It is also noteworthy that there is no incidence of local adverse effects when using sterile, disposable injection devices specifically designed for Mesotherapeutic implantation.

This is a necessary and no longer postponable measure that should immediately replace an outdated method, one that lacks logical justification today and should no longer be practiced.

Dr. Paolo Mosconi
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Biomesotherapy® Bibliography

Biomesoterapia Manuale teorico pratico

Accademia italiana di Biomesoterapia®

Dottor Pier Carlo Ricciotti – Dottor Paolo Mosconi

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