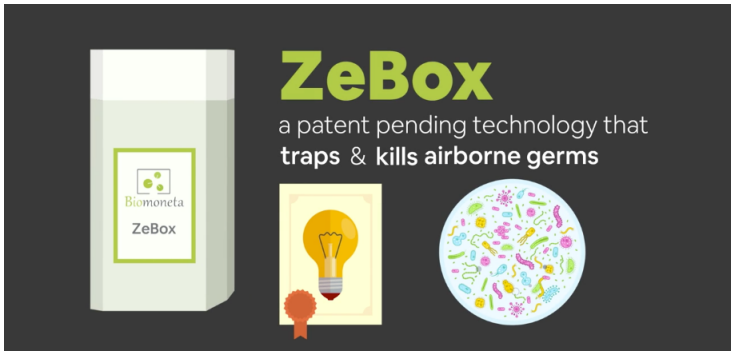
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C-CAMP announces trifecta of excellence to prevent spread of infections

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C-CAMP, Applied Materials India and Biomoneta collaborate for innovative anti-infection biotechnology



The Centre for Cellular and Molecular Platforms (C-CAMP) has collaborated with Applied Materials India and Biomoneta Research to develop and commercialize an industrial biotech solution to prevent the spread of infections. The solution uses Biomoneta's innovative Zebox technology that has revolutionized the concept of air filtration and purification in infection prone

settings such as Intensive Care Units (ICUs).

At a time when hospitals have become infection hotspots and 20% of hospital patients with COVID-19 are reported to have caught Hospital Acquired Infection (HAI), there is a significant need for such a technology not just in India or in Low or Middle Income Countries (LMICs) but across the world. This collaboration will undoubtedly reduce the go-to-market time while also sharpening the market-fit of the product.

By providing funding and strategic support, Applied Materials India is helping identify and bridge the gap in Biomoneta's final push towards commercializing Zebox. The global engineering leader is also extending support in modelling and building simulations that will help optimize the device flow parameters and location within rooms of varying dimensions.

Bengaluru based startup Biomoneta's Zebox is a powerful air decontamination technology that combines state-of-the-art electronics and air-flow design with novel anti-microbial materials to effectively destroy a billion plus microbes across the entire spectrum of bacteria, fungi, and virus families including COVID-19. The device was designed primarily to prevent HAIs, specifically multi-drug resistant (MDR) bacterial infections. An effective decontamination technology that improves infection control in healthcare spaces must: (i) kill pathogenic or contaminating microbes instead of merely trapping, (ii) operate continuously and safely in human presence, and (iii) require near-zero manual intervention while operating close to the source of infection or contamination.