Post-hoc review of healing rates at one month using SilvaKollagen Gel

Background: Failure to reach wound healing benchmarks is associated with delayed healing and the need to reevaluate the treatment plan of care. The amount of healing expected in 4 weeks to be on track for wound closure is at least 50% for diabetic foot ulcers and at least 40% for venous leg ulcers. Pressure ulcers should have at least a 40% wound area reduction in 2 weeks to be considered on track for closure.[1]

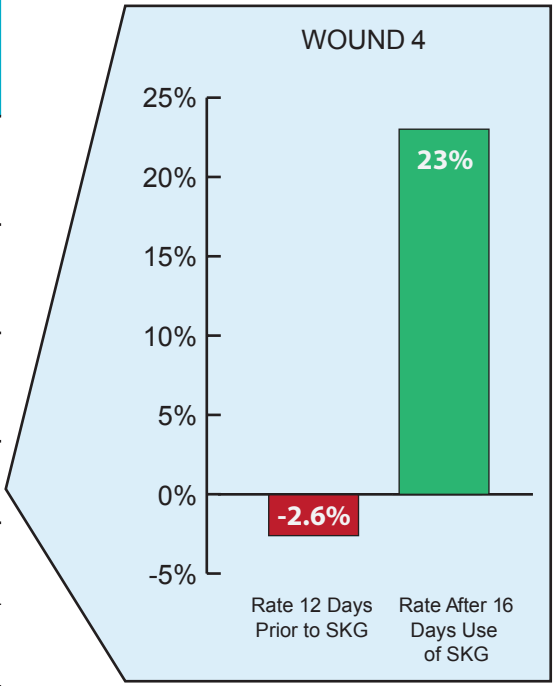
Objective: To retrospectively analyze if treatment with SilvaKollagen Gel (SKG) achieved healing rates near the benchmarks of 40-50% for various wound diagnoses in long-term care.

Methods: A post-hoc analysis of the percent wound area reduction (healing) achieved in one month for 6 "on label" wounds reported in SKG case studies from 2006-2008.[2-4]

Results: All 6 wounds treated with SKG achieved ≥48% wound area reduction or healing within one month. The range of healing rates for one month of treatment was 48% -100%. Wound 4 had previous treatment for 12 days with a deterioration trajectory as size increased 2.6% during that time, which improved to a 23% healing rate 16 days later with use of SKG. Five of these wounds went onto complete closure within ≤78 days of the SKG treatment regime.

Conclusion: Wounds treated with SilvaKollagen Gel for one month achieved healing rates of at least 48% which is in accordance with wound healing benchmarks supported by published research. Treatment with SilvaKollagen Gel was also able to convert a deteriorating wound into a healing wound and achieved overall wound closure in 83% of the wounds reviewed, including chronic arterial ulcers.

Wound Info	Gender	Age	Wound Duration Prior to SKG Treatment	Initial Wound Area (cm^2) at Start of SKG Treatment	Amount of Healing	Number of Days Using SKG to Achieve Reported Healing
1 - Surgical Wound Dehisced left lower medial thigh laceration	Female	42	3 Weeks	13.5	**70%** 100%	**29 Days** 42 Days
2 - Surgical Wound Post-surgical excision scalp squamous cell carcinoma	Male	87	2 Months	1.2	**100%**	**20 Days**
3 - Surgical Wound Post-surgical excision scalp basal cell carcinoma	Female	76	1 Week	26.0	**63%** 94%	**31 Days** 73 Days
4 - Second Degree Burn Deep PT, left heel	Female	75	12 Days	132.2	**48%** 100%	**30 Days** 78 Days
5 - Arterial Insufficiency Ulcer Left dorsal, mid-foot	Male	67	18 Months	3.4	**89%** 100%	**30 Days** 55 Days
6 - Surgical Wound 4th toe nonhealing amputation				1.1	**86%** 100%	**30 Days** 45 Days



References:
1. Bolton L. Benchmarking chronic wound healing outcomes. Wounds. 2012;24(1):18-24.
2. Heasley D. Evaluation of a silver collagen based amorphous gel for the use of treatment of a deep partial thickness burn. #3213. JWOCN. May/June 2009;36(3S):S9.
3. Khandaker K, Kohl DS. Evaluation of the use of a silver collagen amorphous gel in the healing of post surgical and dehisced lesions. # 3226. JWOCN. May/June 2009;36(3S):S13.
4. Data on file.

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