

Case study: Non-healing, post-surgical finger wound

Contributed by Michael Bain, MD

Smith+Nephew

Collagenase
SANTYL 
Ointment 250 units/gram

Patient

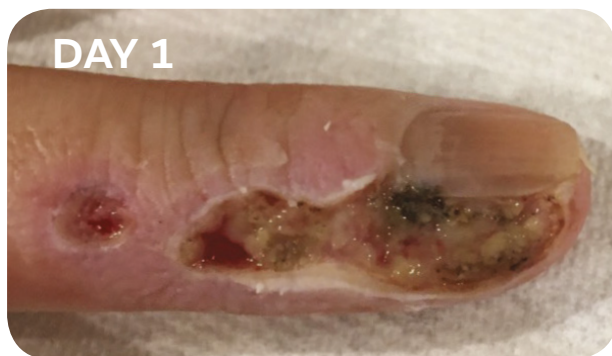
The patient is a 34-year-old Caucasian female with a non-healing wound and infection on the left third finger. The patient had no notable past medical history.

Wound presentation

The patient was referred with a non-healing wound on the left third finger and an infection that was being treated with amoxicillin, clavulanic acid and Silver Sulfadiazine. The infected status was post excision and curettage and cauterization of multiple viral warts on both hands.

Treatment

The patient was treated with sharp debridements and the daily application of SANTYL Ointment for 22 days.



- Wound measures 3.5cm length x 0.8cm width; 0.3cm depth
- Sharp debridement performed
- Daily SANTYL Ointment initiated

Results

After two weekly sharp debridements and 22 days of treatment with SANTYL Ointment, the wound rapidly progressed toward healing and it had a thin layer of epithelium on the distal nail bed.

Individual results may vary.

Treatment

DAY 8



- Wound measures 2.0cm length x 0.6cm width; 0.2cm depth
- Sharp debridement performed
- Daily SANTYL[®] Ointment continued

DAY 15

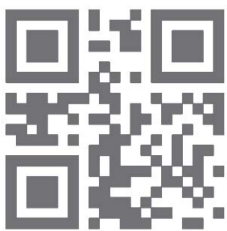


- Wound measures 1.5cm length x 0.3cm width; 0.1cm depth
- No sharp debridement performed
- Daily SANTYL Ointment continued

DAY 22



- Wound fully debrided
- Distal nail bed appeared to have thin epithelium layer
- Daily SANTYL Ointment discontinued
- Patient discharged



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Important Safety Information

Indications: Collagenase SANTYL Ointment ("SANTYL") is a prescription-only medication indicated for debriding chronic dermal ulcers and severely burned areas. **Contraindications:** SANTYL is contraindicated in patients who have shown local or systemic hypersensitivity to collagenase. **Warning and Precautions:** The optimal pH range of collagenase is 6 to 8. Higher or lower pH conditions will decrease the enzyme's activity and appropriate precautions should be taken. The enzymatic activity is also adversely affected by certain detergents, and heavy metal ions such as mercury and silver which are used in some antiseptics. As such, the wound should be properly cleansed prior to application of SANTYL. Debilitated patients should be closely monitored for systemic bacterial infections because of the theoretical possibility that debriding enzymes may increase the risk of bacteremia. A slight transient erythema has been noted occasionally in the surrounding tissue, particularly when SANTYL was not confined to the wound. SANTYL is not indicated for wound closure. Discontinue use of SANTYL after granulation tissue is well-established. **Adverse Reactions:** No allergic sensitivity or toxic reactions have been noted in clinical use when used as directed. The risk information provided herein is not comprehensive. For complete prescribing information, please refer to the accompanying PI or visit: <https://santyl.com/sites/default/files/2019-12/SANTYL-PI.pdf>. You are encouraged to report negative side effects of prescription drugs to FDA. Visit MedWatch or call 1-800-FDA-1088.