

# Case study: Unstageable right heel pressure ulcer

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**Smith+Nephew**

Collagenase  
**SANTYL** <sup>◇</sup>  
Ointment 250 units/gram

## Patient

80-year-old female living in a skilled nursing facility with a history of Alzheimer's disease, anxiety, type 2 diabetes mellitus, hyperlipidemia, hypertension, anemia, and coronary artery disease.

## Wound presentation

When patient was first seen, right heel ulcer had initiated from pressure, but patient also presented with erythema and warmth at the wound site. The wound was initially cultured and treated with Bactrim™ DS orally and Aquacel® Ag Dressing topically for 10 days. After the infection in the wound was treated, Aquacel® Ag Dressing and Bactrim™ DS were discontinued.\*

## Treatment

The wound was cleansed daily using normal saline, then debrided with SANTYL Ointment, then covered with saline moistened gauze, followed by a dry dressing. Dressings were changed daily and as needed.

## Results

Successful enzymatic debridement over 27 days was associated with a 91% reduction in wound area.

Individual results will vary.



- Aquacel® Ag and Bactrim™ DS discontinued\*
- SANTYL Ointment initiated
- 3.0cm wide x 5.5cm long (depth undetermined)
- 75% necrotic tissue and 25% pink tissue

## Treatment



- 2.2cm wide x 4.5cm long (depth undetermined)
- 60% necrotic tissue and 40% pink tissue



- 2.3cm x 4.2cm (depth undetermined); measured as one area with islands of epithelial tissue in the center
- 25% necrotic tissue and 75% pink tissue



- 1.2cm x 1.3cm; 0.3cm depth; measured as one area with islands of epithelial tissue in the center
- 2% slough and 98% pink tissue
- SANTYL<sup>®</sup> Ointment discontinued
- Hydrogel initiated to maintain a moist wound environment until full epithelialization obtained



Learn more

### 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.