CASE STUDY

SANTYL Ointment is indicated for debriding chronic dermal ulcers and severely burned areas. Use of SANTYL Ointment should be terminated when debridement is complete and granulation tissue is well established. One case of systemic hypersensitivity has been reported after 1 year of treatment with collagenase and cortisone. Occasional slight transient erythema has been noted in surrounding tissue when applied outside the wound.

Please see accompanying complete Prescribing Information.

Traumatic injury anterior ankle ulcer

Patient
18-year-old male

Wound type
Traumatic ulcer

History
Unremarkable medical history

Wound presentation
A degloving of the skin over the anterior ankle resulting from a fall. Within one week of suturing, partial necrosis of the skin flaps developed. Previous treatment consisted of Xeroform™ gauze and antibiotic ointment.
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SAWE-10-0617-UE

Treatment
Application of Collagenase SANTYL Ointment daily for debridement.

Individual results will vary

Baseline
• 8.0cm x 5.2cm
• Full-thickness injury
• Black and yellow necrotic tissue present
• SANTYL Ointment initiated

Day 21
• 5.0cm x 2.5cm
• 75% yellow necrotic tissue and 25% granulation tissue
• Sutures were removed

Day 42
• 2.6cm x 1.0cm
• Wound fully debrided
• 100% granulation tissue
• SANTYL Ointment discontinued

Result
100%
100% granulation tissue achieved in six weeks and SANTYL Ointment was discontinued*

*Individual results will vary