THE POWER OF PLUS WITH PURAPLY® AM & PURAPLY® XT

Native, cross-linked extracellular matrix scaffold + sustained antimicrobial effectiveness within the product to support wound healing and aid in granulation tissue formation[1-5]

CONTROL

PuraPly® AM

PuraPly® XT

plus sharp debridement

Note: PuraPly AM and PuraPly XT resist microbial colonization within the product and reduce microbes penetrating through it[1,2]

ANTIMICROBIAL EFFECTIVENESS[3,*]

>99% MRSA reduction from post-debridement baseline

PROVEN REAL-WORLD EFFECTIVENESS[5,†]

86% of wounds demonstrated improvement in wound bed conditions

- Increased granulation tissue
- Reduced exudate
- Readiness for other advanced skin substitutes

* In a study evaluating the antimicrobial effectiveness of a variety of wound products; data shown compared MRSA (methicillin-resistant *Staphylococcus aureus*) colonies in each wound, using a porcine deep reticular dermal wound model

† In a large, cohort study (N=307) in partial- and full-thickness wounds

TRANSITION

ACCELERATE HEALING WITH APLIGRAF®

For more than 20 years, Apligraf has been the gold standard for healing venous leg ulcers (VLUs) and diabetic foot ulcers (DFUs)[6-8]

Apligraf®

FDA-approved to heal VLUs and DFUs[6,‡]

UNMATCHED

VLUs

85 days faster healing than SOC[6,7]

DFUs

25 days faster healing than SOC[8]

In randomized controlled trials, **Apligraf was proven to heal faster**

SOC=standard of care

‡ Please refer to the Apligraf Package Insert for complete prescribing information and contraindications

References: 1. PuraPly Antimicrobial [package insert]. Canton, MA: Organogenesis Inc; 2023. **2.** PuraPly XT [package insert]. Canton, MA: Organogenesis Inc; 2023. **3.** Davis SC, et al. *Int Wound J.* 2022;19(1):86-99. **4.** Brantley J, et al. *Wounds Int.* 2016;7(3):1-5. **5.** Bain MA, et al. *J Comp Eff Res.* 2020;9(10):691-703. **6.** Apligraf [package insert]. Canton, MA: Organogenesis Inc; 2017. **7.** Data on file. Organogenesis Inc. **8.** Veves A, et al. *Diabetes Care.* 2001;24(2):290-295.

PURAPLY® XT: CONTROL BIOBURDEN & SUPPORT HEALING APLIGRAF®: ACCELERATE HEALING

CASE STUDY 1

PuraPly AM, native ECM scaffold + broad-spectrum PHMB antimicrobial, transitioning to Apligraf, bioengineered with living cells, supported healing of a VLU at 12 weeks

Donovan Gowdie, DPM, AACFAS

PATIENT DETAILS AND HISTORY

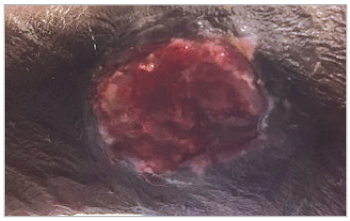
- 58-year-old female with a VLU on the distal lateral aspect of the left leg, which was present for approximately 13 weeks
- Medical history: congestive heart failure, peripheral vascular disease, hypertension, and diabetes
- Previous treatments: wet-to-dry dressings and Unna's boot compression

APPLICATION PROTOCOL

- Applications 1-4: PuraPly AM
- Applications 5-7: Apligraf
- Patient assessed at return visits and product reapplied if no longer present or resorbed

1st PuraPly AM application

Post-debridement
Wound Area: 35.0 cm²



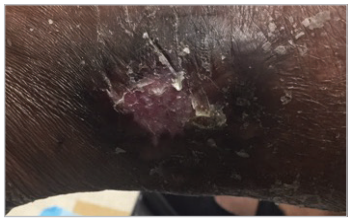
4th PuraPly AM application

Post-debridement
Wound Area: 22.5 cm²

Transition to Apligraf*

Pre-debridement
Wound Area: 17.5 cm²

*Bioburden well-managed and reduction in hypergranulation, malodour, and drainage; clinician transitioned to Apligraf to stimulate healing



Complete wound closure

Patient received 4 applications of PuraPly AM to control bioburden and support healing
Clinician transitioned to Apligraf and patient received 3 applications prior to wound closure
Compression was used throughout the course of treatment

CASE STUDY 2

PuraPly AM, native ECM scaffold + broad-spectrum PHMB antimicrobial, transitioning to Apligraf, bioengineered with living cells, supported healing of a DFU at 13 weeks

Antonio J. Carrasco, PhD, MD

PATIENT DETAILS AND HISTORY

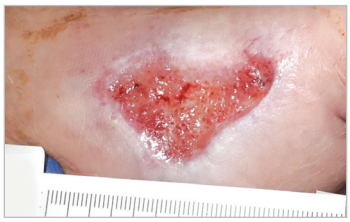
- 80-year-old male with a Wagner Grade 2 DFU on the medial aspect of the 1st left metatarsal head, which was present for 9+ months
- Wound healing was complicated by diabetes and peripheral vascular disease
- Medical history: atrial fibrillation, chronic obstructive pulmonary disease, glaucoma, hypertension, and iron deficiency anemia
- Previous treatments: weekly debridements and various dressings

APPLICATION PROTOCOL

- Applications 1-5: PuraPly AM
- Applications 6-10: Apligraf
- Patient assessed at return visits and product reapplied if no longer present or resorbed

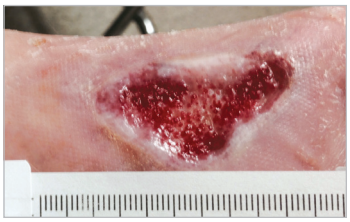
1st PuraPly AM application

Post-debridement
Wound Area: 10.0 cm²



5th PuraPly AM application

Post-debridement
Wound Area: 6.8 cm²



Transition to Apligraf†

Post-debridement
Wound Area: 3.4 cm²

†Reduction in wound size with bioburden well-managed and healthy granulation tissue present; clinician transitioned to Apligraf to stimulate healing

Complete wound closure

Patient received 5 applications of PuraPly AM to control bioburden and support healing
Clinician transitioned to Apligraf and patient received 5 applications prior to wound closure
Offloading shoe was used throughout the course of treatment

ECM=extracellular matrix; PHMB=polyhexamethylene biguanide