

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 formation¹⁻⁵

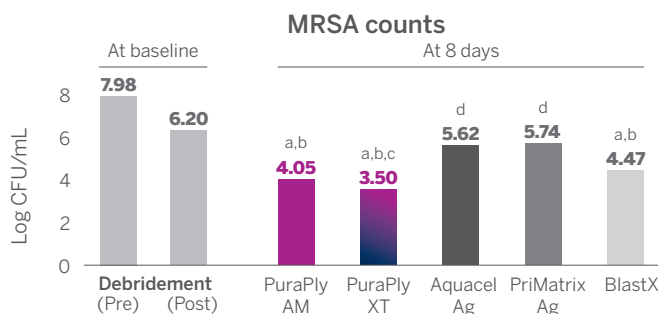


SIGNIFICANT MRSA REDUCTION

ANTIMICROBIAL EFFECTIVENESS WITHIN PURAPLY AM & PURAPLY XT^{3,*}

>99%

MRSA reduction from post-debridement baseline



*P<0.05 vs pre- and post-debridement baseline; †P<0.05 vs Aquacel Ag and PriMatrix Ag; ‡P<0.05 vs BlastX; §P<0.05 vs pre-debridement baseline

Data shown compared MRSA (methicillin-resistant *Staphylococcus aureus*) colonies in each wound, using a porcine deep reticular dermal wound model

PROVEN REAL-WORLD EFFECTIVENESS

THE STUDY

N=307
28 Sites

Prospective, multicenter cohort study⁵

Large
Difficult-to-Heal
Wounds

12.9 cm² mean wound area⁵

THE RESULTS

86% of wounds demonstrated improvement in wound bed conditions⁵



Increased granulation tissue



Reduced exudate



Readiness for other advanced skin substitutes

85% of wounds achieved >75% reduction in volume⁵

⁵In a study evaluating the antimicrobial effectiveness within Puraply AM and Puraply XT versus a variety of other wound products
Note: Puraply AM and Puraply XT resist microbial colonization within the product and reduce microbes penetrating through it

CONTROL BIOBURDEN AND SUPPORT HEALING

CASE STUDY 1

PuraPly® AM, native ECM scaffold + broad-spectrum PHMB antimicrobial, supported healing of a diabetic foot ulcer (DFU) at 6 weeks

Marjorie Fridkin, MD

PATIENT DETAILS AND HISTORY

- 71-year-old female with a DFU on the left heel, which was present for 3 months and had stalled due to suspected biofilm
- Medical history: diabetes, chronic kidney disease, peripheral vascular disease, hypertension, severe rheumatoid arthritis, and peripheral neuropathy
- Previous treatments: enzymatic debridement, negative pressure wound therapy, Dermagraft® (1 application)

APPLICATION PROTOCOL

- Applications 1-5: PuraPly AM (post-debridement)
- Patient assessed at return visits and product reapplied if no longer present or resorbed



1st PuraPly AM application

Pre-debridement
Wound Area: 14.8 cm²



3rd PuraPly AM application

Pre-debridement
Wound Area: 5.2 cm²



Complete wound closure

Wound remained closed at week 12

Patient received 5 applications of PuraPly AM to control bioburden and support healing

CASE STUDY 2

PuraPly® XT, native ECM scaffold + broad-spectrum PHMB antimicrobial, supported healing of a surgical wound at 6 weeks, after failing a full-thickness skin graft (FTSG)

Daniel L. Kapp, MD

PATIENT DETAILS AND HISTORY

- 79-year-old female with a surgical wound on the left medial leg, which was present for 6 weeks
- Medical history: melanoma and cardiac ablation
- Surgical history: melanoma excision, which was closed using a FTSG
- Previous treatments: Xeroform and Unna's boot compression

APPLICATION PROTOCOL

- Applications 1-5: PuraPly XT (post-debridement)
- Patient assessed at return visits and product reapplied if no longer present or resorbed



1st PuraPly XT application

Pre-debridement
Wound Area: 12.0 cm²



3rd PuraPly XT application

Post-debridement
Wound Area: 6.0 cm²



Complete wound closure

Thin layer of epithelium present

Patient received 5 applications of PuraPly XT to control bioburden and support healing

ECM=extracellular matrix; PHMB=polyhexamethylene biguanide

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.