

# MANAGEMENT OF POST-MOHS MICROGRAPHIC SURGERY WOUNDS WITH A HYPOTHERMICALLY STORED AMNIOTIC MEMBRANE: A CASE SERIES

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## INTRODUCTION

- Skin cancer is the most common form of cancer in the United States with an estimated 1 in 5 individuals affected in their lifetime<sup>1-3</sup>
- Basal cell carcinoma (BCC) and squamous cell carcinoma (SCC) are the most common skin cancers and account for a combined 5.4 million cases diagnosed each year<sup>4</sup>
- Mohs Micrographic Surgery (MMS) is regarded as the most effective treatment for the management of BCC and SCC.<sup>5</sup> However, MMS can leave large tissue defects that may require skin grafts, flaps, or are left to heal by secondary intention<sup>6,7</sup>
- Autologous skin grafts are the gold standard treatment, but are limited by donor skin availability and donor site wounds bring the potential for added pain and scarring<sup>6,8</sup>
- Skin substitutes may offer a solution for post-MMS wounds by eliminating the need for donor site wounds and supporting wound healing
- This case series presents an alternative approach to managing post-MMS wounds with hypothermically stored amniotic membrane (HSAM)<sup>a</sup>

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## METHODS

- A total of 7 wounds on 7 patients underwent weekly appointments for wound assessment, serial debridement, and application of HSAM
- Treatment also included management of bioburden to help prevent infection, proper skin care, and compression therapy for lower extremity wounds
- 4 patients were referred for non-healing chronic wounds following MMS procedures that were performed 1-3 months earlier

## SUMMARY OF RESULTS

- The case series consisted of four females and three males with a mean age of 87.6 years
- Mean wound size at first application of HSAM was 1.34 cm<sup>2</sup>
- All wounds closed, with an average time to wound closure of 43.7 days after 4.6 HSAM applications
- The four non-healing chronic wounds had an average time to wound closure of 35.5 days with an average duration of 86.5 days prior to first HSAM application
- 4 out of 7 cases are presented

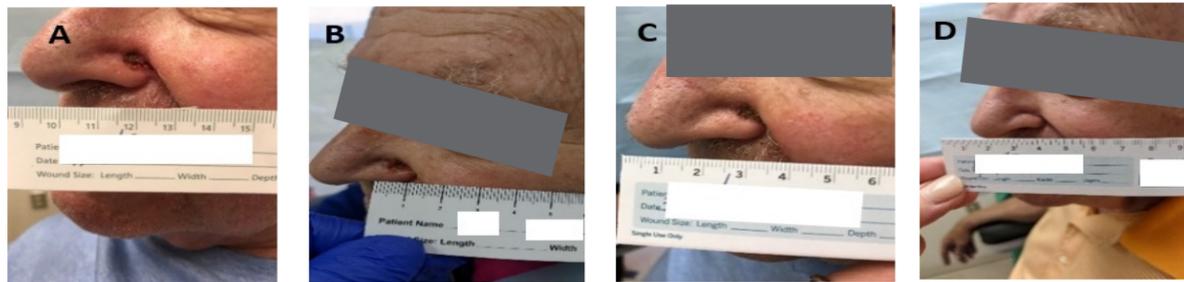
## CONCLUSIONS

- HSAM application as a wound covering may provide an alternative approach to managing non-healing and post-MMS wounds
- In addition, these findings suggest HSAM may be of greatest benefit when applied early after MMS
- Further studies of greater sample size and of randomized or comparative design are warranted to confirm our results

## REFERENCES

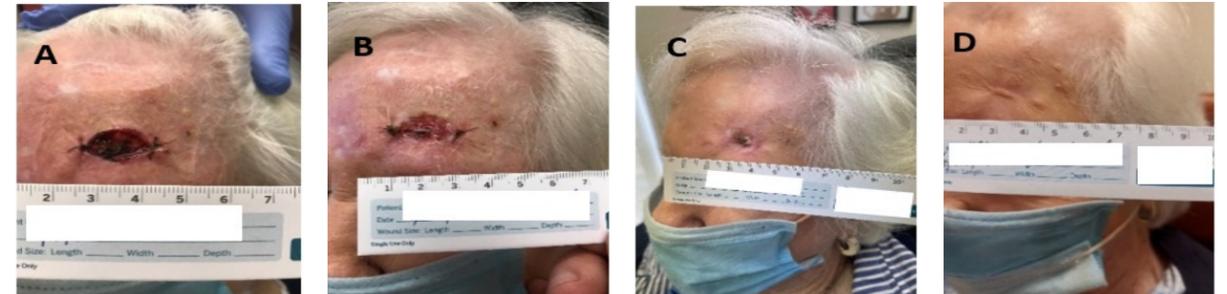
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## CASE 1



**Post-Mohs Left Nasal Ala Wound.** A: Initial application of HSAM at 6 days post-Mohs; B: 20 days post-Mohs; C: 28 days post-Mohs; D: 3-month follow-up.

## CASE 2



**Post-Mohs Forehead Wound.** A: Initial application of HSAM at 8 days post-Mohs; B: 20 days post-Mohs; C: 44 days post-Mohs; D: 3-month follow-up.

## CASE 3



**Post-Mohs Left Lower Leg Wound.** A: Initial presentation; B: Initial application of HSAM at 115 days post-Mohs; C: 129 days post-Mohs; D: 136 days post-Mohs.

## CASE 4



**Post-Mohs Right Dorsal Foot Wound.** A: Initial application of HSAM at 111 days after procedure; B: 125 days post-Mohs; C: 132 days post-Mohs; D: 146 days post-Mohs.