



Improving access to wound care, a patient Caring Access program using the first Human Keratin matrix

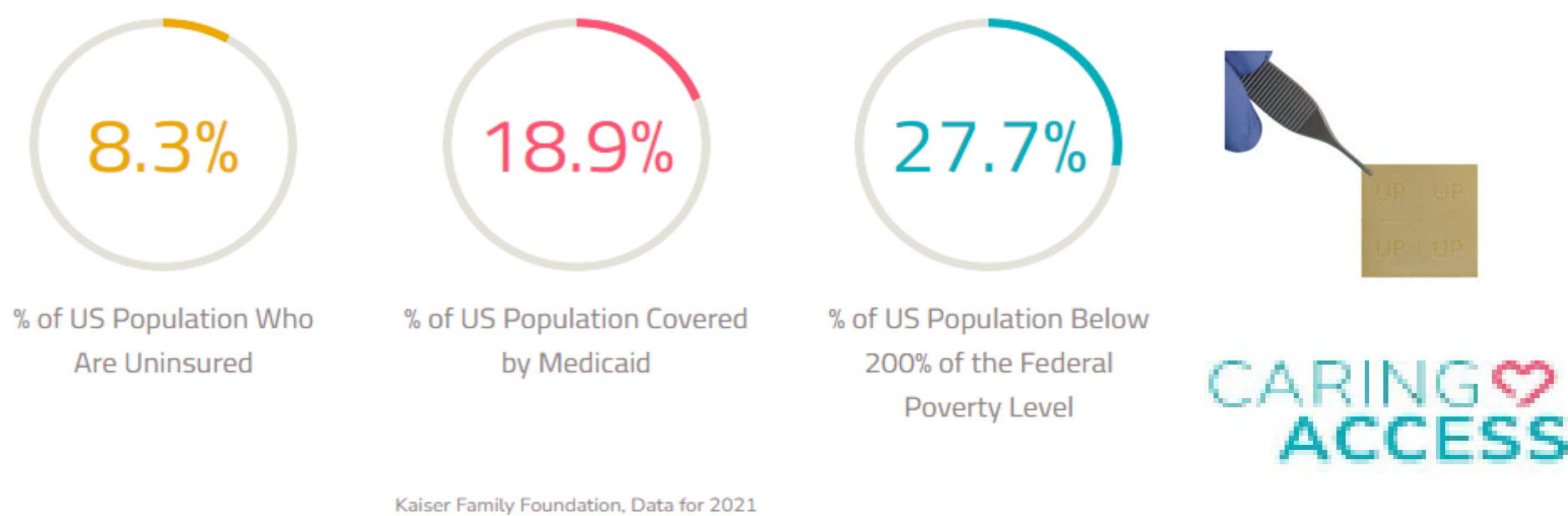


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INTRODUCTION

The underserved and uninsured continue to lack access to adequate medical care. Care for acute and chronic wounds is no exception. The economic challenge of wound care affects 15% of Medicare beneficiaries alone, and over \$28 billion spent on globally. Lack of access to wound care by the uninsured or underserved areas remains a source of soaring healthcare cost [4].

Driven to make a difference, Progena Care Global has committed one-third of its production of the first human keratin grafts, Progena matrix*, to a patient Caring Access program (PCA). This program seeks to address healthcare inequality and disparity in wound care. The human keratin matrix graft is provided at no cost for those qualifying patients with chronic wounds. We present our data from a small series of patients who participated in the PCA program with ProgenaMatrix [6]



METHODS

We present a series of 10 chronic refractory wounds. Patients were pre-selected based on chronic wound type and eligibility guidelines set forth by the PCA program. A total of 5 VLU, 1 DFU, and 2 pressure ulcers were treated. Three females and two males, age range of 41-83 years of age, who had previously been denied access to advanced wound products/skin substitutes due to their current insurance coverage or poor financial resources.

RESULTS

100% of the wounds were responsive to the human keratin graft. There was increased epithelialization and granulation tissue in wound base. There was 100% compliance with both follow-up appointments and treatment program. Three wounds resolved by end of series (1 VLU, 1 DFU, and 1 pressure ulcer). 7 wounds remained open but averaged a 50% decrease in size, and improved wound bed condition since treatment initiation. There were no hospital admissions, amputations, nor complications during the treatment series related to the chronic wounds.

Fig 1a. PCA Program case examples :
All wounds treated with HKHM showed positive clinical response: increased epithelialization, wound bed granulation, and decreased wound size

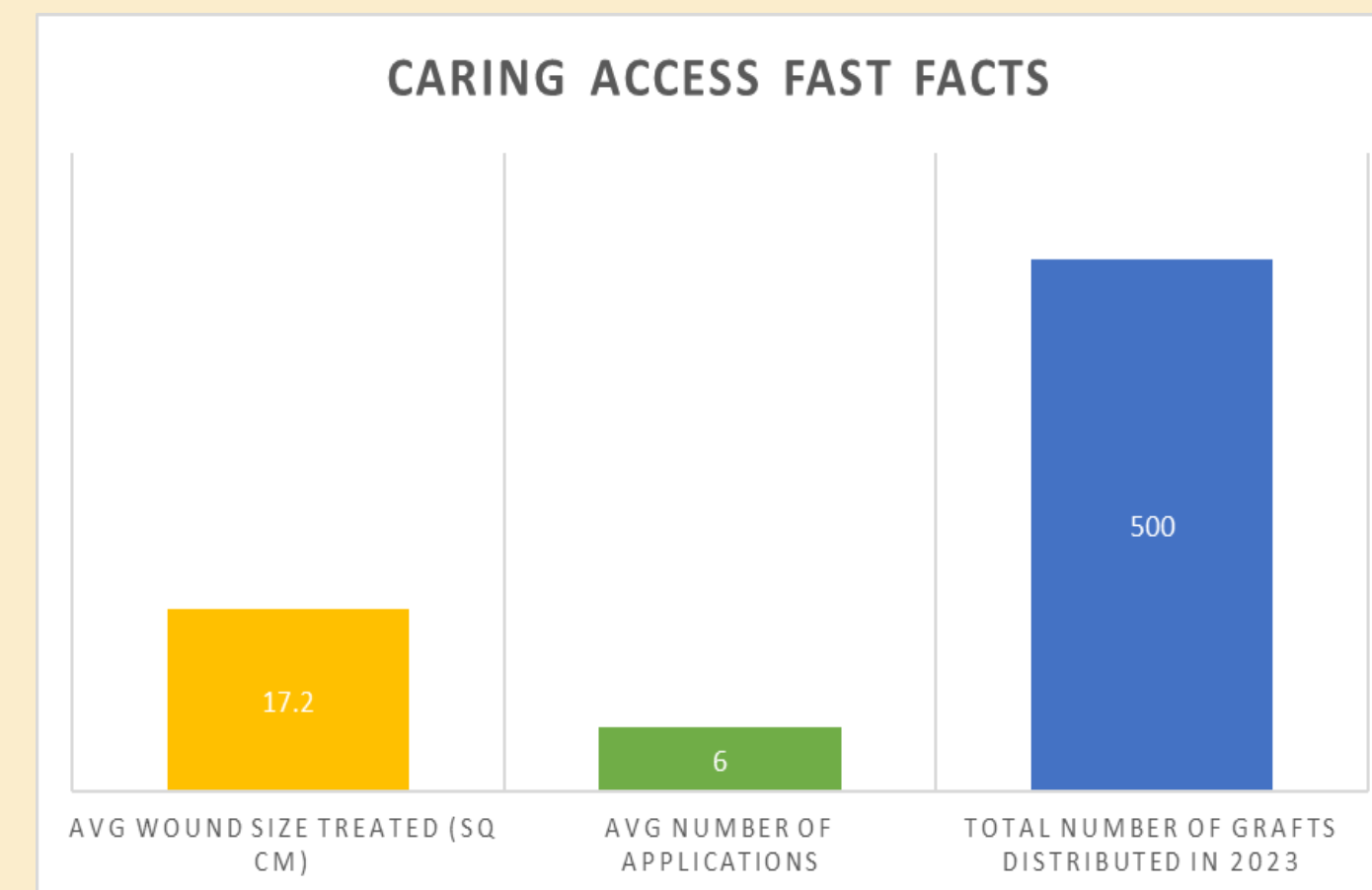
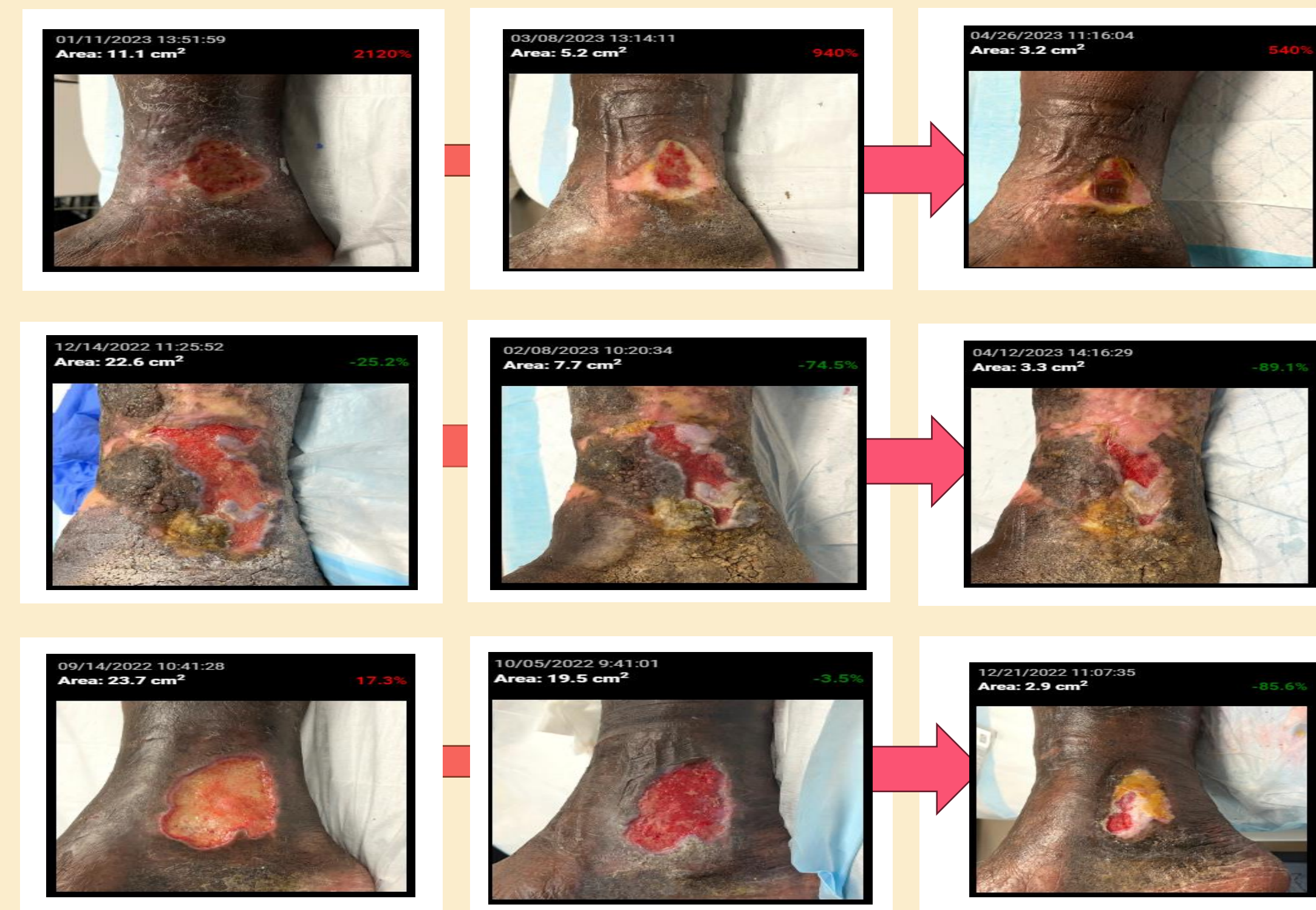


Fig 1b. Caring Access Program Fast Facts

SIGNIFICANCE

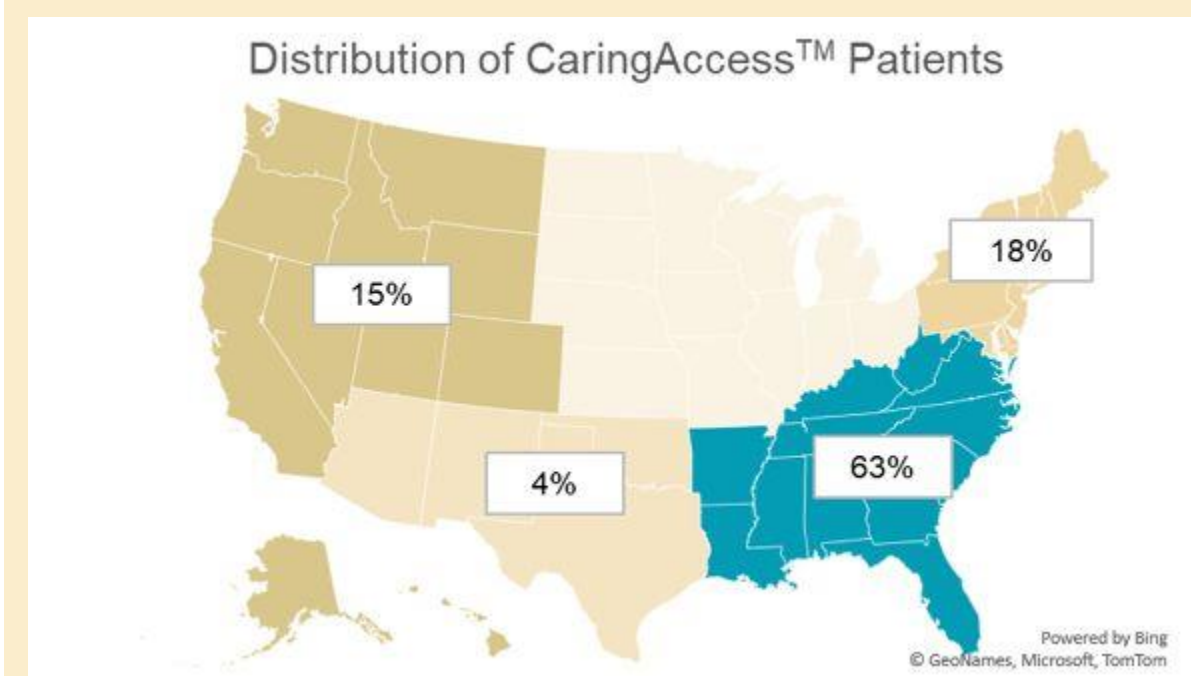


Fig 2. PCA Geographical Distribution US only

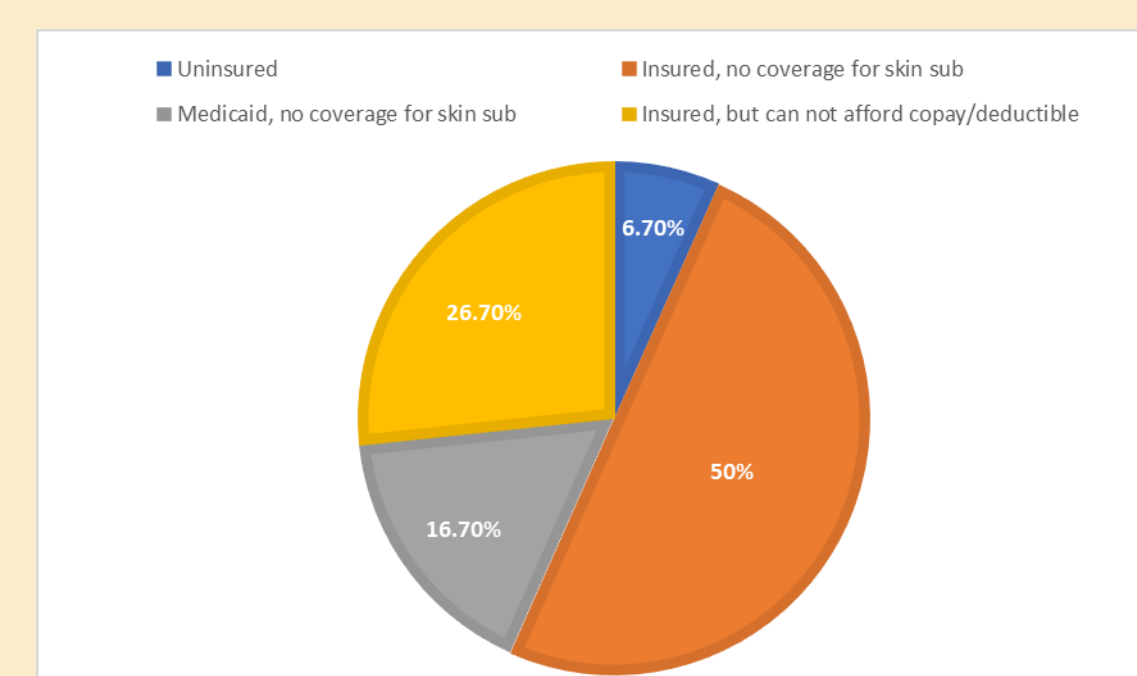


Fig 3. Graph showing: Caring Access Basis of Need

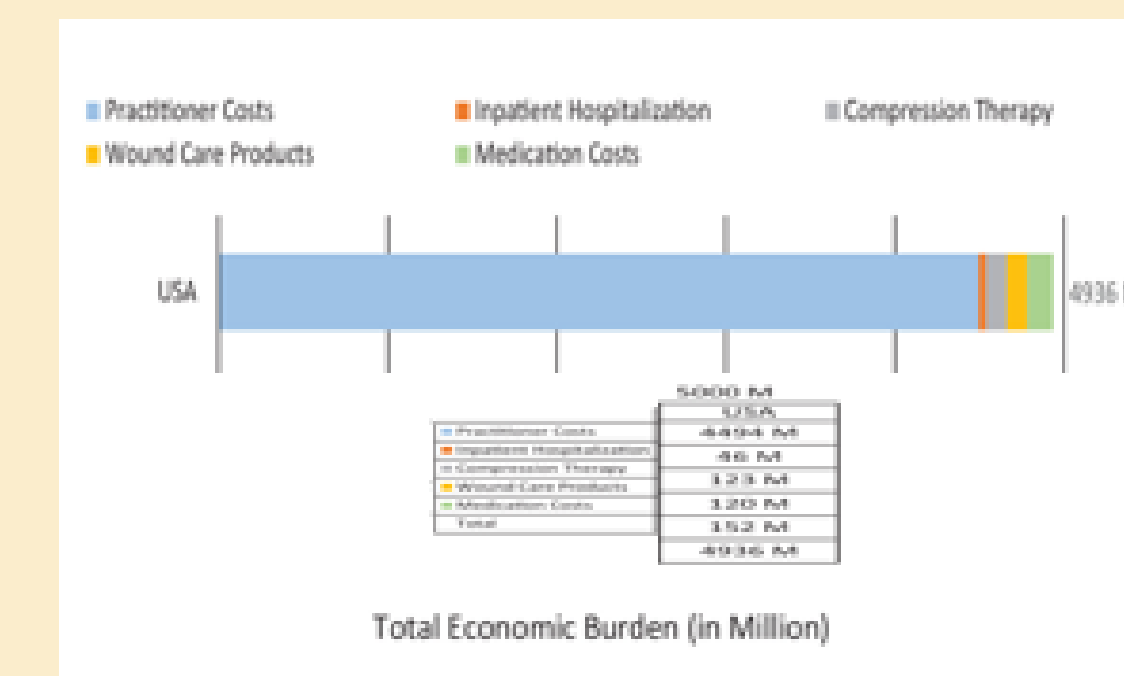


Fig 4. The economic impact of chronic wound care in US

DISCUSSION

Progena Care Global improves access for the underserved and uninsured with the first human keratin graft. The use of keratin in wound healing promotes epithelialization, promotion of quicker healing and epidermal regeneration [3,4]. An effective PCA program can address economic disparities in wound care and make an impressionable economic and healing impact on the lives of many.

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