

Case studies

Smith+Nephew's
tissue portfolio

+ General Surgery

Complex injuries, difficult wounds
Shelf-stable, suture-ready biological tissues

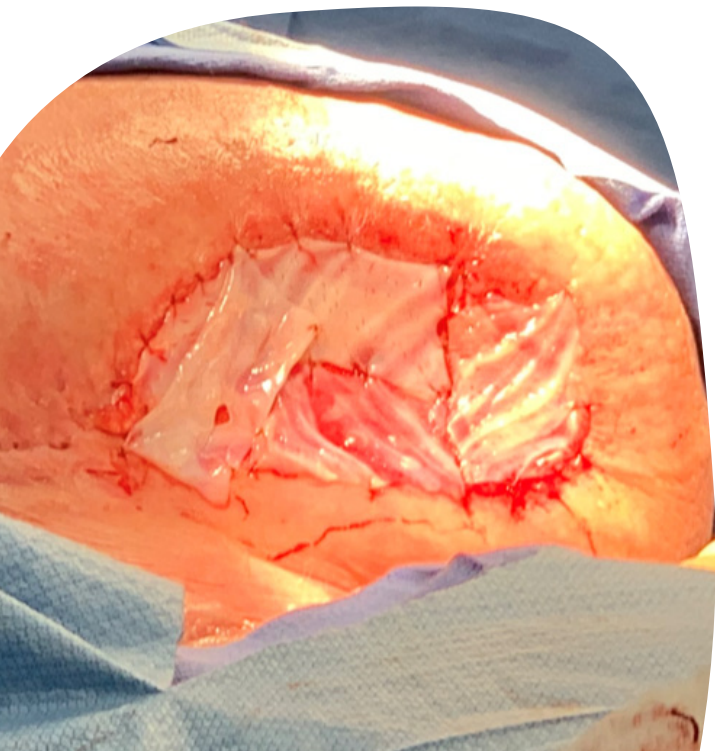
Aid repairs + Improve outcomes

Smith+Nephew

STRAVIX [◇]
Umbilical Tissue Products

GRAFIX [◇]
Placental Membrane Products

OASIS [®]
Matrix Products



Contact me to learn more about
Smith+Nephew's tissue portfolio

A versatile solution for multiple general surgery applications

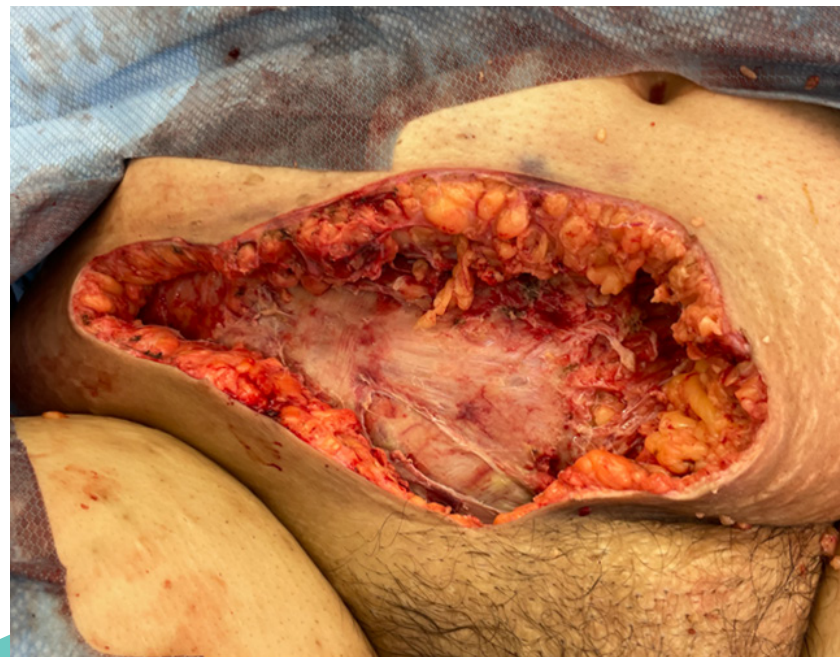
Necrotizing soft tissue infection

Case study

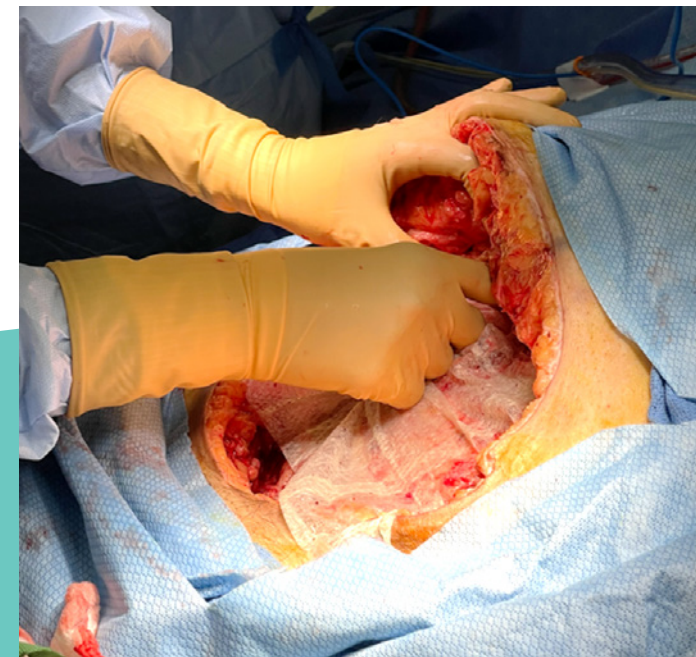
- 38-year-old female
- Diabetic, BMI 45
- Patient presented with 2-week progression of a boil on her thigh
- Five days prior to presentation the “boil” started to drain
- Over the last two days redness spread rapidly to her right labia, abdominal wall and right buttock
- The patient was evaluated and started on broad spectrum antibiotics for necrotizing soft tissue infection
- Taken to the OR emergently for debridement
- Total wound sizes:
 - Abdominal = 6,732 sq cm
 - Right groin region = 2,856 sq cm

Wound treatment

- Patient was taken back to OR two consecutive days for additional debridement and control of the infection
- On the third take-back OASIS® XL Matrix and OASIS ULTRA Tri-Layer Matrix placed on the abdominal wound given very minimal granulation tissue and obvious exposed fascia and muscle
- Placed one 20 cm x 30cm OASIS XL Matrix and two OASIS ULTRA Matrix 7 cm x 20 cm sheets on the abdominal wound bed
- Wound closed at right edge with sutures
- Covered with Mepitel™ contact layer and NPWT @ 125 mmHG
- Patient returned several times to the OR for NPWT changes
- Patient required a diverting colostomy to keep groin wound clean
- GRAFIX PL® Membrane was placed to the right groin wound 3 weeks after being admitted to help expedite wound healing in that area
- Four GRAFIX PL Membrane 5 cm x 5 cm used on groin wound



Initial debridement



Placement of OASIS XL Matrix



Prior to the placement of NPWT

Necrotizing soft tissue infection

Case study (cont'd)



Outcome

- Abdominal wound closed at 4 months
- Right groin wound closed at 3 months

Faster healing. Patient satisfaction.

A versatile solution for multiple general surgery applications

Panniculectomy with open wound

Case study

60-year-old obese male with hidradenitis suppurativa of lower abdomen (10 years). Wound size 31 cm x 31.6 cm x 17.

Procedure

- Panniculectomy and placement of NPWT. Returned to OR three times for debridement and NPWT change. Patient progressed, tolerated bedside NPWT changes, discharged at 11 days.
- At 2-week follow-up, granulation was adequate, patient declined STSG.
- 1 week later, patient received tangential debridement, placement of STRAVIX® Tissue and NPWT applied.



Initial presentation



Wound measurement: 17 cm x 14 cm



Placement of 5 STRAVIX tissue to cover opening



2-week follow up post STRAVIX tissue placement



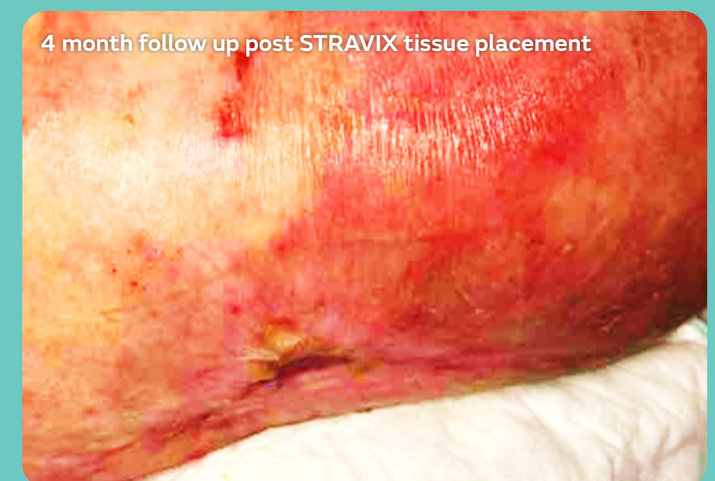
2-month follow up post STRAVIX tissue placement



3-month follow up post STRAVIX tissue placement



Wound measurement: 46 cm x 17 cm



4 month follow up post STRAVIX tissue placement

Outcome

- Patient was discharged at 1 week after 1 more NPWT change.
- Two-week, then monthly follow ups showed full closure of wound at 4 months.

Faster healing. Patient satisfaction.

A versatile solution for multiple general surgery applications

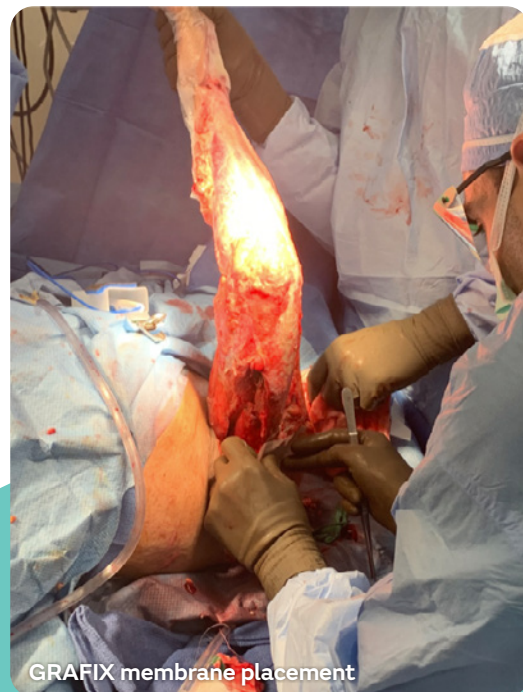
Necrotizing soft tissue infection

Case study

26-year-old female with history of obesity, DM, and anemia, previously hospitalized for coronoid process fracture with necrotizing soft tissue infection requiring emergency debridement of left hand, forearm and upper arm fasciotomies, was transferred to our care.

Procedure

- Upon arrival, patient immediately underwent debridement which found the NSTI extended into chest wall.
- During first week patient returned to OR four times for additional debridement as well as receiving hyperbaric treatment and NPWT which resulted in minimal granulation.
- Patient returned to OR for minimal debridement and placement of 15 5X5 Graftix Membranes



Outcome

- Plastic surgery performed STSG one month after Graftix application.
- At 3 months almost complete closure was achieved.



Faster healing. Patient satisfaction.

A versatile solution for multiple general surgery applications

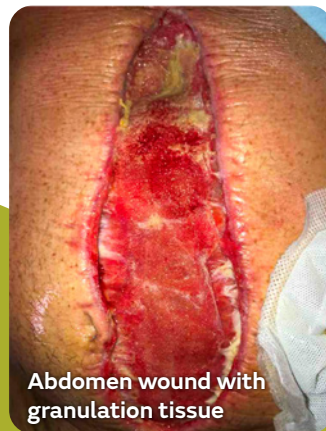
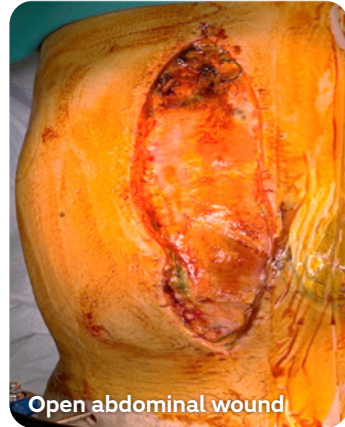
Abdominal trauma

Case study

56-year-old male with no comorbidities, working under a truck when it fell. Suffered cardiac arrest and return of spontaneous circulation at 5 min in ED. OR exploration found open book pelvic fracture with intra-abdominal fluid, high-grade bladder rupture, avulsion of urethra, complete avulsion of rectum, several lacerations, taken to ICU.

Procedure

- At 2 days, taken back to OR for colostomy and abdominal wall closure using Vicryl mesh and NPWT. After two weeks and several NPWT changes, granulation was insufficient.
- Return to OR, eight pieces of STRAVIX[◊] tissue were fenestrated then placed followed by Adaptic contact layer and NPWT which were changed every 5-7 days.
- At 2 weeks, wound, 30 cm X 8 cm had progressed with significant granulation.



Outcome

- At 3 weeks back to OR for skin flap. 85% wound closure, NPWT for remaining area
- One month after skin flap, patient had complete closure

Case studies provided by Zachary Bauman, DO, MHA, FACOS, FACS, Omaha, NE

No matter the size, Smith+Nephew's CTPs have you covered.

STRAVIX Meshed



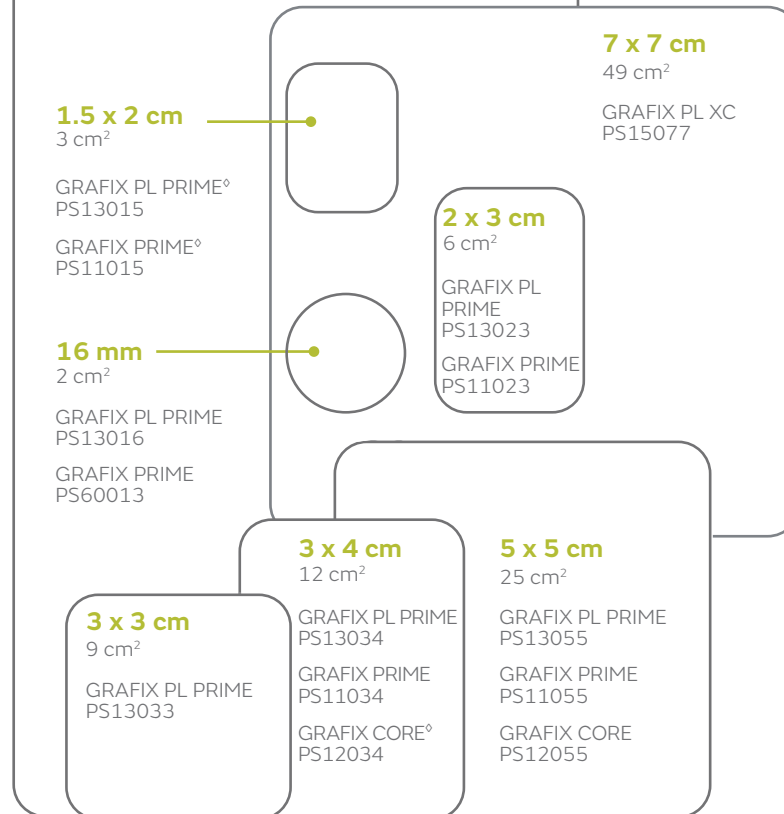
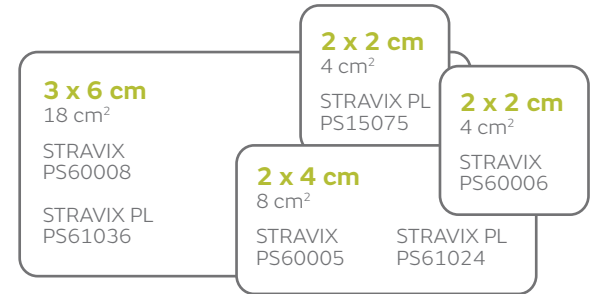
*PS60036 can be stretched to cover up to 30 cm²

STRAVIX PL[◊]

Lyopreserved Umbilical Tissue

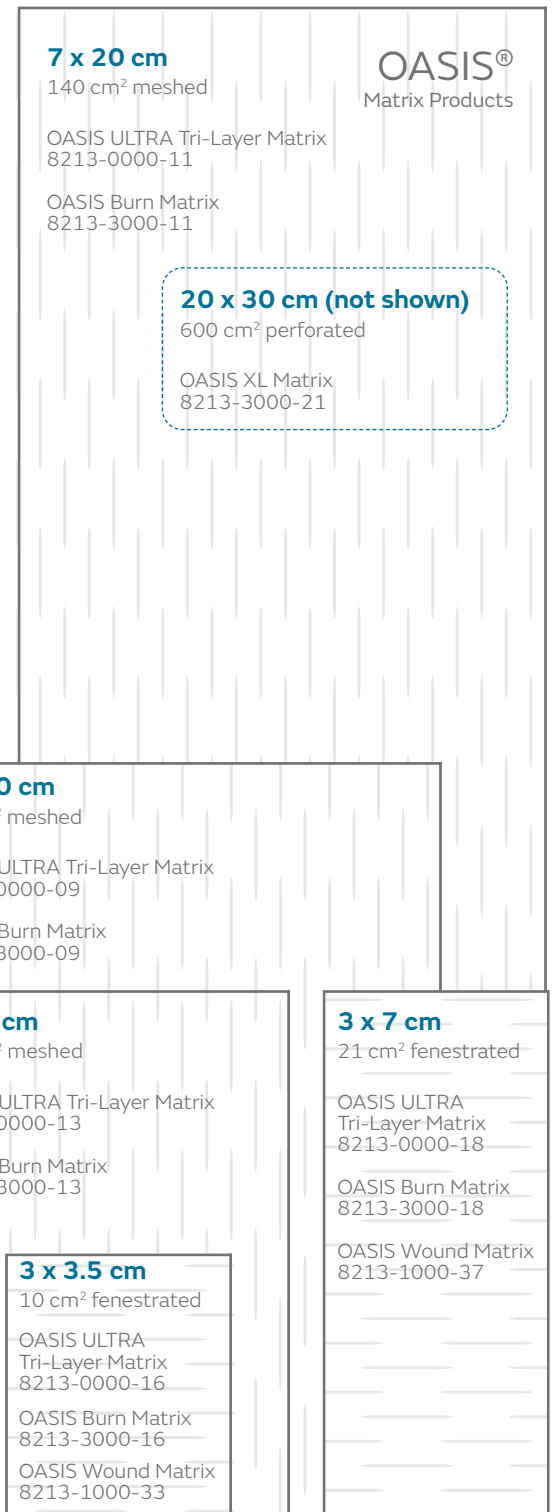
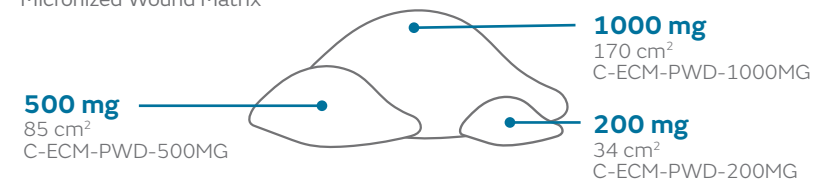
STRAVIX[◊]

Cryopreserved Umbilical Tissue



OASIS[®] MICRO

Micronized Wound Matrix



Convenient, affordable solutions for complex injuries and difficult wounds

Common inpatient usage

Product	
GRAFIX PL/GRAFIX STRAVIX PL ^o /STRAVIX ^o	Cover for complex wounds with exposed structures, cover around repair sites such as tendon/bone/nerve, barrier under incisions
OASIS ^o Matrix Products	Cover for large wounds (such as trauma wounds, burns, donor sites)
OASIS MICRO	Filler for tunneling wounds and deeper wounds with crevices

Please see each products' Instructions for Use for important safety information including approved uses.

Advanced Wound Management

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OASIS is distributed by:

Advanced Wound Management
Smith+Nephew Inc.
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