



Clinical Support for Protease Technology

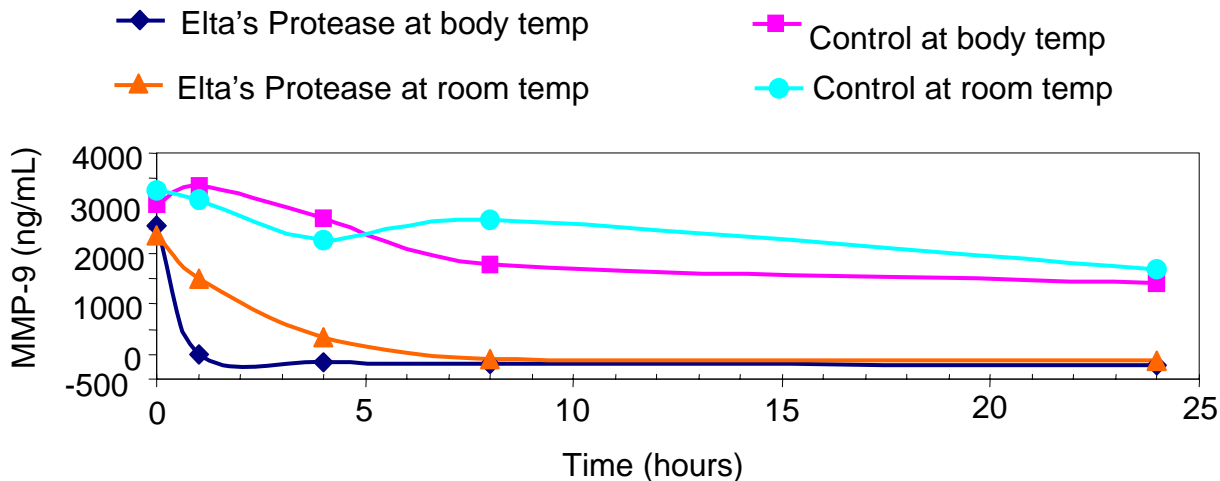
Results from in-vitro laboratory testing suggest that **Elta Protease Technology** deactivates elements that impede healing within wounds. Study results also suggest that that Protease Technology selectively preserves proteins known to promote wound healing.¹

Fungal infected venous ulcers — Compression and **Elta Trivase** therapy resulted in marked improvement. Peri-wound skin was supple and pliable. Ulcer base was clean with minimal exudate. Odor and inflammation were resolved.³

Dermal and epidermal inflammation — A small sample of patients experienced complete relief of outward symptoms of Cellulitis with application of **Elta Nuvase**, in conjunction with standard treatment protocols. All but one saw complete relief by the next visit, and all by the second visit.⁵

Persistent contact dermatitis — Use of **Elta Provase** at night along with **Elta Nuvase** during the day resulted in resolution of itching, redness, and swelling in three months after a previous 15 months of traditional prescription products had failed.²

Chronic pressure ulcers — **Elta Hydrovase** wound gel in conjunction with a pressure management surface in a preliminary study resulted in 90% of patients experiencing healed or healing Stage II and III pressure ulcers within 4-6 weeks.⁴



MMP-9 is just one of the negative Matrix-Metalloproteinase's that has been shown to be clinically degraded by Elta's Protease Technology. At body temperature MMP-9 is completely degraded within an hour. In addition to degrading detrimental healing components such as MMP-2 and MMP-9, Elta's Protease Technology does not adversely affect beneficial healing components such as PDGF's.¹

1. Sampson EM, Baskovich B, Schultz G, Parnell LKS. *Elta Hydrovase wound dressing components degrade proteins detrimental to wound healing*. Wound Healing Society annual meeting, Scottsdale, AZ; May 14-17, 2006.
2. Barnett L, Parnell LKS. *Contact Dermatitis treated with new topical products: A case study*. *Ost Wound Manage*. 2001;47(9):47- 53.
3. Pattison PS, Gordon JK. *Proper skin hydration requires assessment, re-assessment, and education*. Wound Ostomy Continence Nurses annual meeting, May 2004.
4. Parnell LKS, Ciufi B, Gokoo CF. *Preliminary use of a hydrogel containing enzymes in the treatment of stage II and stage III pressure ulcers*. *Ost Wound Manage*. 2005;51(8):50-60.
5. Barnett L, Parnell LKS. *Data on File*. Swiss-American Products, Inc.. 2002