The Use of Activated Collagen in Wound Care: The Art of Patient Involvement

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Background: Diabetic foot ulcerations are a common and costly complication of the disease process. Ulceration is a key pivotal factor in the causal pathway among people with diabetes that leads to infections and amputations. It has been noted that 85% of lower extremity amputations are preceded by non-healing foot ulcerations. Thus, if we are to make a significant impact in lowering the amputation rate among people living with diabetes, we must focus on healing wounds and keeping them healed. The wound care field has recently become an explosive and costly aspect of our overburdened health care system in the United States. There are a myriad of creams, gels, ointments, and adjunct therapies available for treatment of diabetic foot ulcerations. Tenants of “good wound care practices” are still maintained however, including frequent sharp debridement, moist wound healing environment, improvement of blood flow if impaired, and pressure relief through offloading. The question the health care provider must frequently ask is “What product do I choose and why?” A significant barrier to expeditious healing of wounds is patient adherence to prescribed wound care regimens. We often assign the term “non-compliant” to many patients that do not follow our recommendations. However, many times patients may feel as though they are being told what to do but do not understand the why behind the clinician’s decision. From the Empowerment Approach to Diabetes Education supported by the American Association of Diabetes Educators, patient success is much more frequent when patients come up with solutions to their own problems. It is well known that collagen is an essential growth factor required for healing wounds and anecdotal experience with CellerateRx at many facilities including the Miami VA Healthcare System has yielded excellent results. CellerateRx comes in two forms: CellerateRx Powder is 95% collagen and absorbs up to 30x its own weight. Thus, it is indicated in exuding wounds. CellerateRx Gel is approximately 65% collagen and donates moisture to the wound bed. A dry wound bed is the main indication for the gel vehicle. This clinician has anecdotal experience in prescribing both forms of CellerateRx to patients simultaneously. There are several advantages to this practice when patients are given appropriate education. The patient is allowed to self assess the wound and decide if the powder or gel vehicle is most appropriate for that particular dressing change. Another advantage is the combination of the two vehicles to produce a “paste” that is advantageous to fill defects and tracts. This clinician has found an increase in patient adherence and thus, better outcomes when patients are allowed to be directly involved in the wound care product selection process.

62 yo AAM well known to podiatry service at Miami VAPMH: DM (latest HbA1C 7.7mg/dl), CAD, CKD Stage III, Hypertension, Neuropathy PSH: Right TMA x 5 years, Left partial 5th ray amp x 3 years SH: Lives alone, disabled, denies tobacco, ETOH use.

Conclusion

Activated Collagen is the most biologically active form of collagen available. It principally acts as a major chemoattractant for epithelialization. Thus, the process of wound closure is potentially facilitated through the use of activated collagen.

Literature References: