

# THE DIFFERENCE IS **REAL**

Dermagraft® is bioengineered with human fibroblasts to accelerate healing in stalled diabetic foot ulcers (DFUs).<sup>1</sup>

## Description

- Dermagraft is a cryopreserved human fibroblast-derived dermal substitute containing metabolically active human fibroblasts seeded on a bioabsorbable scaffold<sup>1</sup>
- Human fibroblasts proliferate to produce human collagen, ECM proteins, human growth factors, and cytokines<sup>1</sup>
- Dermagraft is FDA-approved to heal DFUs

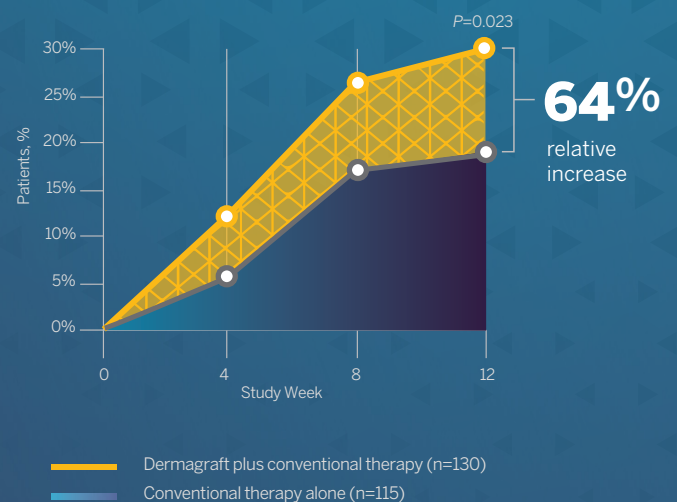
## Indications

Dermagraft is indicated for use in the treatment of full-thickness DFUs greater than 6 weeks duration that extend through the dermis but without tendon, muscle, joint capsule, or bone exposure. Dermagraft should be used in conjunction with standard wound care regimens and in patients who have adequate blood supply to the involved foot<sup>1</sup>

## Data

- In a phase 3 multicenter, prospective, randomized, controlled trial, Dermagraft plus conventional therapy resulted in significantly more patients with DFUs greater than 6 weeks duration achieving complete wound closure by 12 weeks vs conventional therapy alone (30% vs 18%;  $P=0.023$ )<sup>1,2</sup>

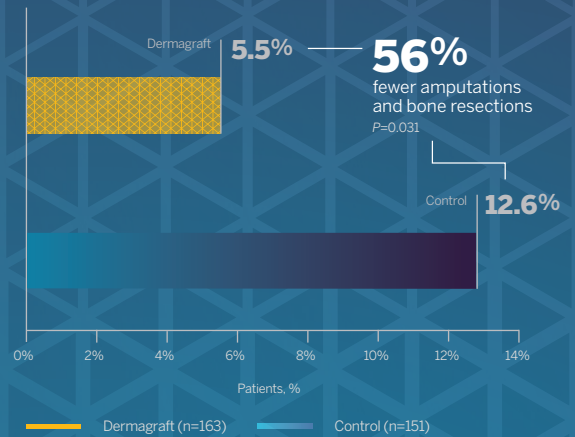
### Percentage of patients with complete healing by 12 weeks



## Data (cont'd)

- Dermagraft is proven to heal more DFUs faster in a randomized controlled trial and in the real-world setting<sup>3,4</sup>
- The evaluation of the clinical trial adverse events shows that Dermagraft patients experienced fewer amputations, bone resections, and adverse events\*<sup>4</sup>

### Frequency of patients experiencing an ulcer-related amputation or bone resection at 12 weeks



\*This study was not designed to determine the incidence of amputations and resections. Data were acquired through evaluation of clinical trial adverse events.

## Application

Dermagraft may be applied weekly for up to 8 applications over a 12-week period<sup>1</sup>

## Coverage

### Medicare

- Dermagraft is reimbursed by CMS as a skin substitute in the high bindle
- Dermagraft is covered by 100% of local coverage determinations (LCDs)

### Commercial Insurance

- All commercial medical policies cover Dermagraft treatment
  - Supplied in 37.5 cm<sup>2</sup> (for billing purposes, round up to 38 cm<sup>2</sup>)
  - Billed using HCPCS code Q4106 and CPT codes 15275-15278



Please refer to the included Dermagraft Directions for Use for complete prescribing information and contraindications.

References: **1.** Dermagraft Directions for Use. Organogenesis 2015. **2.** Marston WA, et al. *Diabetes Care*. 2003;26(6):1701-1705. **3.** Kraus, I, et al. *Wounds*. 2017;29(5):125-132. **4.** Frykberg RG, et al. *Adv Skin Wound Care*. 2015;28(1):17-20.

[www.dermagraft.com](http://www.dermagraft.com)

For product information, technical questions, or reimbursement, please call 1-888-432-5232.