

# INTEGRATED THERAPEUTIC SOLUTIONS TO MANAGE AND PREVENT DIABETIC FOOT ULCERS

REMOVE • REBUILD • REDUCE



THERAPIES. HAND IN HAND.

**BSN** medical

CHALLENGE:

## Without Total Contact Casting

Diabetic Foot Ulcers Take Longer to Heal and Are Costly



Approximately 1/3 of diabetic treatment costs in the U.S. are spent on treating diabetic foot ulcers, and 85% of lower extremity amputations are preceded by a DFU.<sup>2</sup>

Timely wound healing is less likely without comprehensive management, including off-loading.<sup>2</sup>

- Management of peripheral artery disease (PAD)
- Infection management
- Debridement
- Off-loading with a total contact cast
- Maintaining a moist wound environment

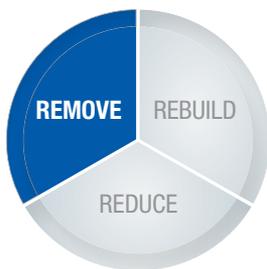
SOLUTION:

# An Integrated Therapy Approach

## “Remove, Rebuild, Reduce” Promotes Faster Healing

### Is it Possible to Improve the Outcome?

- Aggressive off-loading of neuropathic plantar ulcers in diabetic patients is not an adjunct therapy to treatment – it is the most extensively studied treatment<sup>4</sup>
- Advanced therapeutics are unlikely to succeed in improving wound healing outcomes unless effective off-loading is achieved
- Increased healing of a DFU is more likely to occur with adherence to off-loading

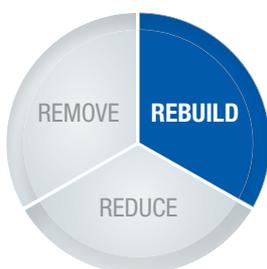


### REMOVE EXUDATE AND BACTERIA

#### CUTIMED® SILTEC SORBACT®

*Silicone Foam Dressing Featuring DACC Technology*

- Binds and inactivates bacteria
- Smart Pore Structure allows vertical absorption of exudate
- Super-absorbent particles lock in wound exudate reducing risk of maceration
- Effectively absorbs highly viscous exudate



### REBUILD TISSUE

#### CUTIMED® EPIONA

*Collagen Dressing with 3D Matrix™ Technology*

Cutimed® Epiona is a native collagen, absorbent wound dressing developed with the same microstructure as the intact collagen network of human skin.

- Captures and binds excessive proteases and inflammation-inducing elements (MMPs) to help protect the growth factors that stimulate healing
- Reduces enzymatic degradation from inflammatory cells by binding MMPs
- Delivers structural support for proliferation of vital cells needed for wound repair<sup>5</sup>
- Creates an ECM-like scaffold encouraging cell proliferation and tissue growth



# Total Contact Casting

## Proven Advantages for Off-Loading



**TCC has consistently demonstrated the best healing outcomes**

- Evidence shows that when off-loading is integrated into patient care and provided at each visit, the likelihood of DFU healing increases, and the chance for complications decreases<sup>3</sup>

**Advanced therapies are unlikely to succeed in improving outcomes unless effective off-loading is achieved.<sup>3</sup>**

# Off-Loading Therapy From BSN: Customizable, Easy to Apply and Remove



## REDUCE PRESSURE

### CUTIMED® OFF-LOADER SELECT TCC System

- **TRUE** Total Contact Casting
- Customizable for most legs
- Cost-effective
- Easy to apply and remove



## Clinical and Economic Benefits of Healing Diabetic Foot Ulcers With a Rigid Total Contact Cast

- Numerous studies have demonstrated TCC's excellent healing performance and results
- TCC has a healing rate of about 90% within 6-8 weeks<sup>3</sup>

# 90% healing rate

## Cutimed® Off-Loader Select Offers Superior Results to Newer, More Expensive Therapies<sup>6</sup>

	% Healed	Healing Time
Total Contact Cast	80-90%	42 Days
Removable Boot	52-74%	38-50 Days
Apligraf	56%	65 Days
Dermagraft	50%	72 Days
PDGF-BB	50%	86 Days

## Cutimed® Off-Loader Select TCC Treatment Pathway



# Preventing DFU Recurrence

## Risk Factors for Recurring DFU

- Deformity, peripheral artery disease, peripheral neuropathy, previous foot wound, and/or a prior amputation are risk factors predictive of new or recurrent DFU<sup>3</sup>
- The more risk factors that are present, the more likely DFU will occur<sup>3</sup>
- Within 1 year of wound healing following DFU, up to 60% of patients with a previous DFU history will develop a recurrent wound<sup>3</sup>

The first step in DFU preventive care is patient education.

## Ways to Help Ensure Positive Post-Healing Outcomes

### DFU Education

- Without sound self-management and proper foot care, DFUs are three times more likely to reoccur
- Discuss healthy diet, blood sugar levels, weight, daily foot exercise and other key factors

### Maintain Range of Motion (ROM)

- As healed DFUs can impact normal ROM, range of joint motion and repetitive foot exercises have been shown to increase blood supply to affected areas, aiding in both healing and future prevention

### Intelligent Footwear and Device Choices

- Healing sandals, diabetic socks, and shear-reducing insoles offer both comfort and protection



# BSN Advanced Wound Care Solutions

## For Management of Diabetic Foot Ulcers

Adjunctive therapy will work best if the overarching goals include appropriate off-loading while managing the diabetic foot ulcer. BSN offers you and your patients integrated therapy solutions to manage the DFU throughout the healing process.



# Ordering Information

REMOVE	Size	Ref-No.	Dressings/ Box	Suggested HCPCS**
<b>Cutimed® Siltec Sorbact® Dressing*</b>				
	3 x 3 in.	7992900	10	A6212
	5 x 5 in.	7992901	10	A6212
	6 x 6 in.	7992902	10	A6212
	7 x 7 in.	7992903	5	A6213
	9 x 9 in.	7992904	5	A6213
	Sacral 7 x 7 in.	7992905	5	A6213
	Sacral 9 x 9 in.	7992906	5	A6214

REBUILD	Size	Ref-No.	Dressings/ Box	Suggested HCPCS**
<b>Cutimed® Epiona Collagen Dressing</b>				
	2 x 2 in.	7322700	10	A6021
	4 x 4 in.	7322701	10	A6021
	8 x 8 in.	7323002	10	A6023

REDUCE	Ref-No	Description	Qty
<b>Cutimed® Off-Loader Select – Synthetic</b>			
	7800901	Cutimed® Cavity	1 each
		2" x 2" Cotton Gauze	4 each
		3" Delta-Lite® Conformable	3 rolls
		4" Delta-Lite® Conformable	2 rolls
		3" Delta Terry-Net™ Stockinette	1 each
		4" Specialist® 100 Cotton Cast Padding	2 each
		Delta Terry-Net™ Adhesive Felt	1 each
		Open Cell Foam	1 each
<b>Cutimed® Off-Loader – Plaster &amp; Synthetic Combination</b>			
	7800900	Cutimed® Cavity	1 each
		2" x 2" Cotton Gauze	4 each
		4" Ortho-Flex® Elastic Plaster	3 rolls
		4" Extra Fast Gypsona® S	2 rolls
		3" Delta-Lite® Conformable	1 each
		4" Delta-Lite® Conformable	2 each
		3" Delta Terry-Net™ Stockinette	1 each
		4" Specialist® Cotton Cast Padding	1 each
		Delta Terry-Net™ Adhesive Felt	1 each
		Open Cell Foam	1 each
<b>Canvas Rocker Bottom Cast Shoe</b>			
	43101408	Canvas Rocker Bottom Cast Shoe – Small	1 each
	43101505	Canvas Rocker Bottom Cast Shoe – Medium	1 each
	43101602	Canvas Rocker Bottom Cast Shoe – Large	1 each
	43101709	Canvas Rocker Bottom Cast Shoe – X-Large	1 each

Please refer to the product label and/or package insert for full instructions on the safe use of these products.

#### REIMBURSEMENT DISCLAIMER:

This document includes suggested HCPCS codes that might be used to bill for BSN medical products and related services. Each provider will have to verify the appropriate codes for each patient. These codes are determined by Noridian Healthcare Solutions as the Pricing, Data Analysis and Coding (PDAC) Contractor of the Centers for Medicare and Medicaid Services. These codes may change at the discretion of the PDAC at any time and BSN is not responsible for such changes.

It is the supplier or provider's sole responsibility to determine and submit appropriate codes, charges, and modifiers for services rendered. Providers should contact insurers to verify correct coding procedures prior to submitting claims related to any product or service. BSN medical Inc. cannot guarantee coverage or reimbursement with the codes listed in this billing guide. In all cases, providers will need to follow local payer policies for billing and reimbursement.

BSN medical Inc. 5825 Carnegie Blvd. Charlotte, NC 28209-4633  
Tel. (+1) 704 554 9933 Fax (+1) 800 835 4325 www.bsnmedical.com

1. Centers for Disease Control. [http://www.cdc.gov/diabetes/pubs/pdf/ndfs\\_2011.pdf](http://www.cdc.gov/diabetes/pubs/pdf/ndfs_2011.pdf). 2. Incidence of diabetic foot ulcer and lower extremity amputation among Medicare beneficiaries, 2006 to 2008. [www.ahrq.gov](http://www.ahrq.gov). 3. Snyder RJ, et al. The Management of Diabetic Foot Ulcers through Optimal Off-loading. Building Consensus Guidelines and Practical Recommendations to Improve Outcomes. *Journal of the American Podiatric Medical Association*. Vol 104, No. 6, Nov/Dec 2014. 4. Vickie R, Driver MS, DPM, FACP, FAS; Professor, Orthopedic Surgery Brown University; President, Association for the Advancement of Wound Care, AAWC; Chief Podiatric Surgery, VA Healthcare New England, RI; Director Research Wound Healing, RI Hospital; Director Research Fellowship Program. 5. Data on file. 6. Reyes, Diabetes Care, 2001; Gentzkow, Diabetes Care, 1996; Armstrong, Diabetes Care, 2007; Mueller, Diabetes Care, 1989; Peters, Arch Phys Med Rehab, 2001; Kantor, Margolis, Expected Healing Rates for Chronic Wounds, Wounds 2000, 12: 155-158.