

Case Report: Collagen cream effective for healing lower extremity non-healing wounds

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Numerous medications and products are available in market for difficult and non-healing skin wounds with various results and outcomes. We experienced 2 cases in which collagen cream was effective in healing non-healing skin ulcers.

Case I

71-year old male with history of diabetes, hypertension, and Hepatitis B carrier developed cellulitis of right ankle 2 years ago. This infection progressed into fasciitis and wound necrosis which required formal surgical debridement. Then infectious process got subsided and granulation tissue was gradually formed. But the wound never healed completely even after a few months and the patient refused wound closure procedures such as skin grafting and flaps. We started using 40% collagen cream on wound twice daily in November, 2005 when the wound size was 7.0cm by 3.5cm. The wound was reduced to 5.0cm by 2.5cm in January, 2006 when collagen concentration was lowered to 5%. The wound further regressed to 4.5cm by 2.0cm in March. Then the wound remained the same for 2 months with 5% collagen. 10% collagen was used next but no further progress was seen up to present time. The following are the table of the wound size and the photo of the wound as of May 10, 2006.

	Size(cm)	Area(cm ²)	% reduction
2005 Nov	7.0 * 3.5	24.5	0%
Dec	6.0 * 2.5	15.0	39%
2006 Jan	5.0 * 2.5	12.5	49%
Feb	5.0 * 2.0	10.0	59%
Mar	4.5 * 2.0	9.0	63%



Case II

89-year old female with no significant medical history fell down and suffered abrasions in right shin in November, 2005. Initially she was treated with topical antibiotics at another medical institution. The size of the initial wound is unknown. Then the wound progressed to be an ulcer with granulation tissue which failed to heal for 3 months without reduction of its size. The patient was first seen by us in February, 2006 and found to have 2.5cm by 2.0cm skin ulcer in right shin with no evidences of infection. Conservative wound management was tried for 1 month with no success. In March, 2006, we started using 10% collagen cream (med|3) on wound twice daily. By the end of the month it got smaller to 2.2cm by 1.6cm. In April it was further reduced to 1.8cm by 1.3cm. In May the wound completely healed.

From these cases, it is suggested that collagen cream is effective in healing difficult skin wounds. The optimal concentration of collagen, ways of application and its frequency, and duration of treatment remain to be seen and should invite further investigations.