New treatment for oxygen-deprived, slow healing wounds available across the UK

- Innovative haemoglobin spray adds new category to NHS Drug Tariff -

October 2016 – infirst Healthcare announces its innovative haemoglobin spray Granulox® has been added to the NHS Drug Tariff, establishing a new Haemoglobin category. The first of its kind, Granulox® is used in the treatment of chronic wounds and will be available on prescription across the UK from today.

Currently more than 200,000 patients in the UK are living with non-healing wounds[1,2] such as diabetic foot ulcers, venous leg ulcers, pressure ulcers and post-surgical wounds. Treating patients with chronic wounds costs the NHS between £2.3-3.1 billion a year[2] in associated costs including nursing time, dressings, hospital admissions, pain relief and often unnecessary amputations.

Granulox® increases levels of oxygen at the wound bed, speeding up the rate of healing[3] in wounds such as venous leg ulcers, by 75 per cent compared to standard care[4]. The treatment also reduces pain by an average of 68 per cent within two weeks[5.]

Independent clinical studies have shown that, when added to standard care, Granulox® could save the NHS an average of £2,330 for every diabetic foot ulcer patient and £1,469 for chronic wound patients after six months[6].

Alistair Copley, Wound Care Manager, infirst Healthcare says, "This is good news for both patients and healthcare professionals. The assessment process undertaken by the NHS Prescription Service is in-depth, challenging and rigorous. Treatments that pass this level of scrutiny have to prove both clinical and cost effectiveness. We are pleased that Granulox® has received this recognition and expect to see it being administered across the UK over the coming months."

The clinical efficacy and cost analysis data have also been reviewed and verified by the Scottish Health Technologies Group (SHTG), part of NHSScotland, which recently published its summary of evidence in support of Granulox®. It stated that the addition of "Granulox® was found to be more effective and less costly than standard care alone[6]".

Sharon Bateman, Lead Advanced Nurse Practitioner, Northumberland NHS has been administering Granulox with her patients, she comments: "The impact of chronic wounds is not only physical, but social and emotional too. Patients need to know that innovations like this are available to them. Granulox helps wounds to heal, reducing pain, time spent with nurses, and patients can even administer the treatment themselves with support, regaining confidence and independence. "

Granulox® Haemoglobin Spray is quick and easy to administer. Granulox® should be applied every time the dressing is changed, or at least every three days. The bag-on-valve technology also means that Granulox can be sprayed at any angle, even upside down, for difficult to reach wound areas.

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Notes to editors

About Granulox:
Granulox® is a spray for use on chronic wounds, and is a treatment that uses facilitated diffusion of oxygen. Granulox® is an innovative medical device for the treatment of chronic wounds, such as venous leg ulcer, arterial leg ulcer, mixed leg ulcer, diabetic foot ulcers, secondary healing of surgical wounds and pressure sores.

Granulox® is applied topically on the wound as a water soluble spray. The active ingredient in the spray, haemoglobin, binds to oxygen from the surrounding air and transports it to the wound base, from where it diffuses into the cells to speed up the healing process.[8] This enables Granulox® to facilitate healing in previously non-healing wounds.

Granulox® can be self-administered with little medical supervision needed, making it easy for patients and nurses to incorporate as part of the wound care regime. Granulox® has an established safety profile with no side effects.[10]

The key treatment benefits of Granulox® include:

- Patients treated with Granulox® experience a significant pain reduction within two weeks of treatment, compared to standard care
- Healing speed when treated with Granulox® is approximate 75% faster, compared to standard care[13]
- Trials show a 53% reduction in mean wound size, after treatment with Granulox®[14]
- Granulox® is easy to use and does not require a prescription

About chronic wounds:
Chronic wounds do not heal in an orderly set of stages and in a predictable amount of time (within 3 months), the way most wounds do. The aetiology of chronic wounds is diverse, but more than 80% are associated with venous insufficiency, high blood pressure or diabetes mellitus leading to inadequate oxygen supply via the vascular system.[7]

The role of oxygen in treating chronic wounds:
Oxygen is a vital component of the wound healing process[8] and prolonged lack of oxygen prevents wounds from healing.[9] Chronic wounds are exacerbated by lack of oxygen circulating to the issue, and in patients with impaired circulation, wounds heal poorly, if at all.[8]

Healing wounds demand more oxygen than healthy tissue. Oxygen is transported in the bloodstream through a molecule called haemoglobin, which is able to bind oxygen and then release it again.[10] Three main types of technology exist for improving oxygen supply to chronic wounds; topical oxygen therapy, hyperbaric oxygen therapy and facilitated diffusion of oxygen.

Whilst topical oxygen therapy has produced positive results for patients, a recent NICE review of a new oxygen dressing found little proven benefit.[11] Similarly, whilst hyperbaric oxygen therapy improves the amount of oxygen in the blood plasma, a systematic review suggests that the efficacy data of this treatment is weak.[12]

While oxygen has been recognized for many years as important for wound healing, other than re-vascularisation surgery in the case of chronic arterial wounds, treatments for improving oxygen supply to chronic wounds have not been widely available.

About infirst Healthcare:
infirst Healthcare is a UK-based healthcare company which operates in the US and the UK. Its developments aim to build on the trust and safety of well-known drugs and to develop formulations which result in a genuinely perceived difference in performance. The ultimate goal is improved and highly effective health management at an early intervention stage, involving patients, clinicians, and payers as well as pharmacists.

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