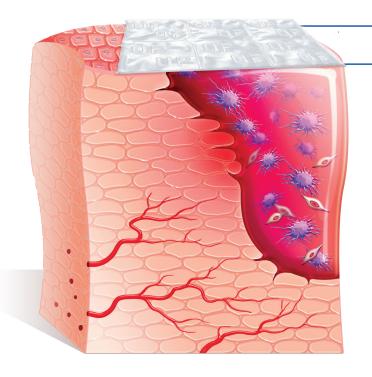
## PHYSICIAN OFFICE

# **EPIFIX**®

### CARING FOR CHALLENGING CLOSURES WHEN PATIENTS NEED IT MOST



#### EPIFIX

#### **Protective Barrier**

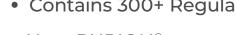
- Supports the healing cascade
- · Protects the wound bed to aid in the development of granulation tissue in acute and chronic wounds

#### **Provides a Human Biocompatible** Extracellular Matrix (ECM)

- Structural components: Collagen I, III, IV; elastin
- Cell-binding domains: Fibronectin, collagen V, VII
- ECM-binding domains: Proteoglycans, laminin











• Mesh configuration available





**Clinical Use Examples** 

- Comorbid patients with complex defects or delayed healing
- Diabetic Foot Ulcers (DFUs)
- Venous Leg Ulcers (VLUs)
- Debridement
- Decubitus ulcers

**Product Advantages** 

- Most level I evidence in placental-based allografts: 6 EPIFIX RCTs
- Easy to apply
- Shelf-stable\*
- 5-vear shelf life
- Terminally sterilized for additional level of safety
- Compatible with Negative Pressure Wound Therapy (NPWT) and Hyperbaric Oxygen Therapy (HBOT)

Patient Insurance Verification Team: 855.882.8480



Patents and patents pending see: www.mimedx.com/patents. EPIFIX, PURION, and MIMEDX are trademarks of MIMEDX Group, Inc. ©2023 MIMEDX Group, Inc. All Rights Reserved. www.mimedx.com US-GS-2100025 v4.0

EPIFIX is a dehydrated human amnion/chorion membrane allograft. EPIFIX sheets provide a protective barrier that supports the healing cascade and protects the wound bed to aid in the development of granulation tissue in acute and chronic closures. EPIFIX provides a biocompatible human extracellular matrix and Contains 300+ regulatory proteins.<sup>1-3</sup>

Published Studies	N	Outcomes Observed in Studies
<b>DFU RCT:</b> <sup>4,5</sup> EPIFIX vs. Apligraf <sup>®</sup> vs. SOC	EPIFIX: 32 Apligraf: 33 SOC: 35	Complete wound closure:
		<b>85% at 4 weeks</b> (EPIFIX vs. Apligraf p=0.001; EPIFIX vs. SOC p=0.001)
		<b>95% at 6 weeks</b> (EPIFIX vs. Apligraf p=0.0006; EPIFIX vs. SOC p=0.0001)
		<b>97% at 12 weeks</b> (EPIFIX vs. Apligraf p=0.0001; EPIFIX vs. SOC p=0.0001)
VLU Multicenter RCT: <sup>6,7</sup> EPIFIX vs. SOC	EPIFIX: 52 SOC: 57	Complete wound closure (Per Protocol): <b>60% at 12 weeks</b> (p=0.0128) <b>71% at 16 weeks</b> (p=0.0065)

#### Physician Office Ordering Information

ltem#	Size & Description	
GS-5024	24 mm disc	
GS-5330	3 cm x 3 cm sheet	
GS-5350	3 cm x 5 cm sheet	
GS-5460	4 cm x 6 cm sheet	
GS-5560	5 cm x 6 cm sheet	
GS-5770	7 cm x 7 cm sheet	
Item #	Size & Description	
ES-3500	3 cm x 5 cm mesh sheet	
ES-4400	4 cm x 4.5 cm mesh sheet	
ES-5500	5 cm x 5.5 cm mesh sheet	





Q Code: 4186

\*See Instructions for Use Apligraf is a registered trademark of Organogenesis.



REFERENCES: 1. Koob TJ, Lim JJ, Massee M, Zabek N, Denozière G. Properties of dehydrated human amnion/chorion composite grafts: Implications for wound repair and soft tissue regeneration. J Biomed Mater Res B Appl Biomater. 2014;102(6):1353-1362. 2. Lei J. Priddy LB, Lim JJ, Massee M, Koob TJ. Identification of Extracellular Matrix Components and Biological Factors in Micronized Dehydrated Human Amnion Chorion Membrane. Adv Wound Care (New Rochelle). 2017;6(2):43-53. 3. MIMEDX Internal Report. MM-RD-00086, Proteome Characterization of PURION Processed Dehydrated Human Amnion Chorion Membrane (dHACM) and PURION Processed Dehydrated Human Internal Report. MM-RD-00086, Proteome Characterization of PURION Processed Dehydrated Human amnion/chorion membrane allograft, bioengineered skin substitute or standard of care for treatment of chronic lower extremity diabetic ulcers. Int Wound J. 2015;12(6):724-732. 5. Zelen CM, Gould L, et al. Treatment of chronic diabetic lower extremity divers with advanced therapies: a prospective, randomised, controlled, multi-centre comparative study examining clinical efficacy and cost. Int Wound J. 2016;13(2):272-282. 6. Bianchi C, Cazzell S, Vayser D, et al. A multicentre andomised controlled trial evaluating the efficacy of dehydrated human amnion/chorion membrane (EPIFIX\*\*) allograft for the treatment of venous leg ulcers. Int Wound J. 2016;15(1):114-122. 7. Bianchi C, Tettelbach W, Istwan N, et al. Variations in study outcomes relative to intention-to-treat and per-protocol data analysis techniques in the evaluation of efficacy for treatment of venous leg ulcers with dehydrated human amnion/chorion membrane allograft. Int Wound J. 2016;17(5):714-767.