

# New Opportunities for Wound Care Clinicians: Taking the Leap into Industry

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**O**f the estimated 16 million Americans who have diabetes, 15% to 20% will develop a diabetic foot ulcer.<sup>1</sup> There are 2.5 million Americans with venous leg ulcers<sup>2</sup>; more than 2.1 million have pressure ulcers.<sup>3</sup> This year the first baby boomer will turn 60 years old — the majority of chronic wounds occur in people over age 65. By the year 2030, the US population over age 65 will increase from 13% to 20%.<sup>4</sup>

These statistics represent the societal demographics utilized by companies that develop wound care technologies. Wound care manufacturers realize that meeting the needs of the aging population will demand the development of highly effective advanced wound care technologies that will require clinical educators to maximize their effectiveness.

Within the last several years, wound care manufacturers have increasingly sought to identify, recruit, and hire experienced clinical professionals who have the practical knowledge and experience necessary to provide customers with clinical education support. In addition, many of these manufacturers utilize their clinical teams to provide wound care education and support for their sales teams. This trend has become more evident since wound care products have moved beyond traditional gauze dressings to more advanced technologies such as antimicrobial dressings, negative pressure wound therapy, tissue-engineered products, and countless others that require in-depth clinical presentation.

Recruiters for wound care companies note that wound care clinicians share a similar passion: making a positive difference in their patients' lives. These clinicians also have the innate ability to share their knowledge with others for the benefit of successfully treating patients with wounds. They are accustomed to deciding what wound care products and protocols will be utilized. They are aware of the challenges of treating chronic wound patients. They share their knowledge with fellow staff members and make a positive difference in the lives of their patients and colleagues. They

realize that through cost-conscious product utilization and protocols (many of which they initiated), their organizations have been saved a considerable amount of money. These attributes not only enhance bedside provision of care, but they also present opportunities for different ways to serve the healthcare sector. Hence, facility “wound care experts” are uniquely qualified to take on new roles as Sales Professionals, Clinical Nurse Consultants, Clinical Educators, Clinical Marketers, and various Clinical and Regulatory Affairs positions, leveraging their clinical expertise as well as their love for teaching to pursue a rewarding career that often includes sharing their successes and knowledge with other clinicians.

Wound care manufacturers recognize that knowledgeable, experienced practitioners are assets to their organizations. Manufacturers will compensate clinical expertise — it commands the attention and respect of fellow providers seeking product information. Manufacturers also will provide the training necessary to transition clinicians into their new role.

Wound care clinicians who have taken the leap from a clinical practice to industry often find themselves in a desirable position: they work in an autonomous environment and are well respected and appreciated by their peers and employers. They network regularly with clinicians while working at industry trade shows, attending clinical seminars, and speaking at symposiums and corporate-sponsored training programs.

An example of a clinician active in industry is Clinical Specialist Daniel J. Smart, RN, BSN, WOCN, who recently was promoted to Director of Clinical Affairs, Mölnlycke Health Care (Norcross, Ga). Approximately 10 years ago, Dan transitioned from clinical practice to industry, fulfilling a desire to “try something new.” Believing in the products he sold was important. Dan says, “I am doing what I enjoy — interacting with clinicians and patients and witnessing the positive outcomes of my products.”

## Accuzyme<sup>®</sup> SE

(Papain, Urea) Spray Emulsion

### First Fasting

**DESCRIPTION:** ACCUZYME SE enzymatic debriding spray contains papain, USP (6.5 x 10<sup>6</sup> USP units of activity based on Lot100389 per gram of spray) and urea, USP 10% w/w in a base composed of n-hydroxylactose, cetyl alcohol & cetyl-20 phosphate & dicetyl phosphate, triglyceride, glycerin, methylparaben, mineral oil, potassium phosphate monobasic, propylparaben, purified water and sodium hydroxide.

**Clinical Pharmacology:** Papain, the proteolytic enzyme from the fruit of certain papaya, is a potent digester of noncollagen protein matter but is harmless to viable tissue. Its active over a pH range of 8 to 12. Papain is relatively ineffective when used alone as a debriding agent and requires the presence of activators to stimulate its digestive potency. In ACCUZYME SE, papain is combined with urea, a denaturant of proteins, to bring about two supplemental chemical actions: (1) to expose by solubilization the active sites of papain, and (2) to denature the noncollagen protein matter in lesions and thereby render it more susceptible to enzymatic digestion. Pharmacologic studies have shown that the combination of papain and urea result in twice as much digestive activity as papain alone.

**INDICATIONS AND USE:** ACCUZYME SE is indicated for debridement of necrotic tissue and liquefaction of eschar in acute and chronic lesions such as pressure ulcers, venous and diabetic ulcers, burns, postoperative wounds, pilonidal cyst wounds, outbursts and miscellaneous traumatic or infected wounds.

**CONTRAINDICATIONS:** Do not use if you are allergic to or have known or suspected hypersensitivity to any ingredient in this product.

**PRECAUTIONS:** See Dosage and Administration. Not to be used in eyes.

**ADVERSE REACTIONS:** ACCUZYME SE is generally well tolerated and nonirritating. A transient "burning" sensation may be experienced by a small percentage of patients upon applying ACCUZYME SE. Occasionally the profuse exudate from enzymatic digestion may irritate the skin. In such cases, more frequent dressing changes will alleviate discomfort until exudate decreases.

**DOSE AND ADMINISTRATION:** Cleanse the wound with ALLCLENZ<sup>®</sup> Wound Cleanser or saline. Avoid cleansing with hydrogen peroxide solution as it may inactivate the papain. NOTE: Papain may also be inactivated by the salts of heavy metals such as lead, silver and mercury. Contact with medications containing these metals should be avoided. In accordance with good wound care practices, protect the periwound with a skin protectant of choice to prevent and/or reduce maceration and irritation due to drainage from the wound. Apply a single, even layer of ACCUZYME SE daily or twice daily with dressing change or as recommended by physician. Irrigate the wound at each re-dressing to remove any accumulation of liquefied necrotic material. If eschar is present, it may be necessary to consult a qualified practitioner in the use of a #10 blade to debride the eschar prior to application of ACCUZYME SE in order to improve penetration of the product. Prior to eschar debridement, moisten the eschar with saline or a suitable wound cleanser such as ALLCLENZ Wound Cleanser.

**INSTRUCTIONS FOR USE:** Hold the ACCUZYME SE spray bottle 2"-4" from wound. Upon first use, depress the nozzle gently to break seal. Apply spray in a single layer to cover wound bed. Note that application of cover dressing gloves or appropriate dressing of device should cause spray to dispense for additional coverage. Wipe nozzle with clean glove after each use. It is not necessary to shake or prime the bottle.

**HOW SUPPLIED:** 34 ml bottle.

Store in a cool place.

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Clinicians interested in exploring this opportunity should speak with their wound care sales representatives or industry-based clinical nurse consultants, inquiring how they like working for their current company, why they decided to take the leap, and whether they are happy with their career decision. They should review corporate websites and find the company's mission statement to determine whether it complements their passions and goals (hopefully, the clinician has had positive experiences with the company's products and services). The upcoming Symposium on Advanced Wound Care (SAWC) in San Antonio, Tex, offers additional opportunities to explore career options — talking with nurses working at an industry trade show booth can yield insights into the pros and cons of working in industry.

Any professional change requires a great deal of soul-searching. Industry positions afford clinicians additional ways to capitalize on their passion for wound care and positively influence others, possibly discovering untapped capabilities in an environment that nurtures personal and professional excellence.

## References

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3. Krasner D. Prevalence of chronic non-healing wounds. In: Rodeheaver G, Krasner DL. *Chronic Wound Care: A Clinical Source Book for Professionals*. King of Prussia, Pa: Health Management Publications, Inc: 1990:14.
4. Task Force on the Future of the Health Care Labor Force in a "Graying Society." Who will care for each of us? Chicago, Ill: Nursing Institute University of Illinois 2001:7. Available at: <http://www2.uiuc.edu/unit/nursing/institute/pdf/executive-report.pdf>.

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