

This piece is not intended to provide medical advice or direction. Healthcare Professionals should assess each situation and consider their own procedures, including treatment and pain management, for their patients as each patient's situation will vary.

APPLICATION OVERVIEW

PRE-TREATMENT

TREATMENT WITH NEXOBRID

VISUAL ASSESSMENT

POST-TREATMENT

NexoBrid[®] is an effective enzymatic agent indicated for eschar removal in adults and pediatric patients with deep partial thickness and/or full thickness thermal burns.¹

NexoBrid is available by prescription and should only be administered by a healthcare provider.



Product illustration

INDICATION

NEXOBRID[®] (anacaulase-bcdb) is indicated for eschar removal in adults and pediatric patients with deep partial thickness (DPT) and/or full thickness (FT) thermal burns.

Limitations of Use

The safety and effectiveness of NEXOBRID have not been established for treatment of:

- Chemical or electrical burns
- Burns on the face, perineum, or genitalia
- Burns on the feet of patients with diabetes mellitus or on the feet of patients with occlusive vascular disease
- Circumferential burns
- Burns in patients with significant cardiopulmonary disease, including inhalation injury

NEXOBRID is not recommended for:

- Wounds contaminated with radioactive and other hazardous substances to avoid unforeseeable reactions with the product and an increased risk of spreading the noxious substance
- Treatment of burn wounds where medical devices (e.g., implants, pacemakers, shunts) or vital structures (e.g., large vessels) could become exposed during eschar removal

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

NEXOBRID is contraindicated in patients with: known hypersensitivity to anacaulase-bcdb, bromelain, pineapples, or to any other components; known hypersensitivity to papayas or papain because of the risk of cross-sensitivity.

Please see additional [IMPORTANT SAFETY INFORMATION](#) throughout and [Full Prescribing Information](#).

www.NexoBrid-US.com

The following provides information on the proper use of NexoBrid®. NexoBrid is only to be administered by a Healthcare Professional.

Please see [Full Prescribing Information](#) and the [NexoBrid Eschar Removal Guidelines](#) for full guidance on preparation and application.

PRE-TREATMENT

Pain management planning^{1,2}

- Eschar removal with NexoBrid and treatment-related burn wound procedures are painful and require adequate analgesia and/or anesthesia
- Pain management should be appropriate for an extensive dressing change of burn wounds
- At least 15 minutes prior to NexoBrid application ensure adequate pain control measures are in place to address NexoBrid-related pain
- Pain management for NexoBrid should be adapted to the patient and burn center protocols

Pain management should be considered during application and removal of NexoBrid

Pre-Treatment Treatment with NexoBrid Visual Assessment Post-treatment

Pain management consideration for application of NexoBrid

Pain management consideration for removal of NexoBrid

NexoBrid preparation¹

Calculate wound size and quantity of NexoBrid needed

NexoBrid Dosage

Adults	<ul style="list-style-type: none"> • Up to 15% BSA in one application • A second application may be applied 24 hours later—total treatment area must not exceed 20% BSA
Pediatric Patients 6-17 Years of Age	<ul style="list-style-type: none"> • Up to 15% BSA in one application • A second application is not recommended
Pediatric Patients <6 Years of Age	<ul style="list-style-type: none"> • Up to 10% BSA in one application • A second application is not recommended

- Precautions should be taken to avoid exposure during preparation and handling (e.g., gloves, surgical masks, other protective coverings, as needed). In the event of inadvertent skin exposure, rinse NexoBrid off with water to reduce the likelihood of skin sensitization

Gather the following sterile supplies prior to NexoBrid preparation and application

- Instrument for mixing (e.g., spatula or tongue depressor)
- Tongue depressor for NexoBrid application
- Occlusive film dressing
- 0.9% Sodium Chloride Irrigation
- Loose, thick fluffy dressing and bandage

Wound preparation, cleansing and soaking¹

- Thoroughly clean the wound to remove any charred tissue, blisters, and any topical products
- Keratin isolates the eschar from direct contact with NexoBrid and prevents eschar removal
- Apply a dressing soaked with an antibacterial solution to the treatment area for at least 2 hours
- Ensure the wound bed is clear of any remnants of topical agents (e.g., silver sulfadiazine or povidone iodine)

At least 15 minutes prior to NexoBrid application, ensure adequate pain control measures are in place to address NexoBrid-related pain.

NexoBrid Mixing¹

- Prepare NexoBrid at the patient's bedside within 15 minutes of the intended application
- Discard NexoBrid if not used within 15 minutes of preparation, as the enzymatic activity of NexoBrid decreases progressively following mixing

Using aseptic technique, mix NexoBrid lyophilized powder and gel vehicle as follows:

- Pour the NexoBrid lyophilized powder into the gel vehicle jar
- Thoroughly mix the NexoBrid lyophilized powder and gel vehicle using a sterile instrument (e.g., tongue depressor or spatula) until the mixture is uniform
- The mixed lyophilized powder and gel vehicle produce NexoBrid in a final concentration of 8.8%

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions, including anaphylaxis, have been reported with postmarketing use of anacaulase-bcdb. If a hypersensitivity reaction occurs, remove NEXOBRID (if applicable) and initiate appropriate therapy. Healthcare personnel should take appropriate precautions to avoid exposure when preparing and handling NEXOBRID (e.g., gloves, surgical masks, other protective coverings, as needed).

Please see additional [IMPORTANT SAFETY INFORMATION](#) throughout and [Full Prescribing Information](#).

Images are medical illustrations. Individual results may vary.



Connect with your Vericel Representative for NexoBrid training and use support

NexoBrid
(anacaulase-bcdb)

Wound preparation¹

- Apply an ointment skin protectant (e.g., petrolatum) 2 to 3 cm outside of the treatment area to create an ointment barrier
- Protect any open wounds (e.g., laceration, abraded skin and escharotomy incision) with skin protectant ointments or ointment gauze to prevent possible exposure to NexoBrid
- **Avoid applying the ointment to the treatment area itself, as this would impede direct contact of NexoBrid with the eschar**

TREATMENT WITH NEXOBRID®

Application¹

- Moisten the treatment area by sprinkling sterile 0.9% Sodium Chloride Irrigation onto the burn wound
- Using a sterile tongue depressor, completely cover the moistened burn wound treatment area with the mixed NexoBrid in a 3 mm thick layer (approximate thickness of a tongue depressor)
- **Ensure NEXOBRID covers the entire target treatment area**
- Cover the treated wound with a sterile occlusive film dressing
- Gently press the occlusive film dressing at the area of contact with the ointment barrier to ensure adherence between the occlusive film dressing and the ointment barrier and to achieve complete containment of NexoBrid on the treatment area
- **There should be no visible air under the occlusive film dressing**
- Cover the occlusive film dressing with a sterile loose, thick, fluffy dressing and secure with a sterile bandage
- **Ensure adequate pain control measures are in place throughout the entire procedure**

Monitoring¹

- Monitor patients for signs of local or systemic allergic reactions
- **If a hypersensitivity reaction occurs, remove NexoBrid (if applicable) from the treatment area and initiate appropriate therapy**

Removal¹

Implement and maintain pain management as practiced for an extensive dressing change of burn wounds throughout the following removal procedures.

- Remove NexoBrid after 4 hours
- Remove the dissolved eschar from the wound by scraping it away with a sterile blunt-edged instrument
- Wipe the wound thoroughly with a large sterile dry gauze, then wipe with a sterile gauze that has been soaked with sterile 0.9% Sodium Chloride Irrigation
- Rub the treated area until the appearance of a clean dermis or subcutaneous tissues with pinpoint bleeding
- To remove remnants of dissolved eschar, apply a dressing soaked with an antibacterial solution for at least 2 hours

ADULTS ONLY: A second application of NexoBrid may be applied 24 hours following the first application to either the same area previously treated with NexoBrid or to a new area. The total treatment area must not exceed 20% BSA across two treatment sessions. Please refer to the NexoBrid [Full Prescribing Information](#) and NexoBrid [Eschar Removal Guidelines](#) for second application instructions.

VISUAL ASSESSMENT

Burn depth assessment¹

- Following the removal of NexoBrid from a burn wound, a comprehensive assessment of the post-treatment tissue should be performed to determine the success of the procedure and the appropriate treatment of the burn wound following eschar removal

POST-TREATMENT

Wound care after eschar removal with NexoBrid¹

- Dress wound(s) sterilely, according to burn center protocols
- **Wound care following eschar removal should be based on the healthcare provider's clinical judgement (e.g., observe for spontaneous re-epithelization or proceed with autograft)**

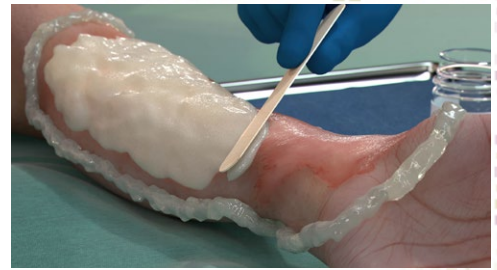
IMPORTANT SAFETY INFORMATION

WARNINGS & PRECAUTIONS

Coagulopathy

Avoid use of NEXOBRID in patients with uncontrolled disorders of coagulation. Use with caution in patients on anticoagulant therapy or other drugs affecting coagulation, and in patients with low platelet counts and increased risk of bleeding from other causes. Monitor patients for possible signs of coagulation abnormalities and signs of bleeding.

Please see additional [IMPORTANT SAFETY INFORMATION](#) throughout and [Full Prescribing Information](#).



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ADVERSE REACTIONS

The most common adverse reactions (>5%) in adults were pruritus, pyrexia, wound complication, anemia, vomiting and insomnia. The most common adverse reactions (>5%) in pediatric patients were pruritus, pyrexia and vomiting.

USE IN SPECIAL POPULATIONS

Geriatric Use

Clinical studies of NEXOBRID did not include sufficient numbers of subjects 65 years of age and older to determine whether they respond differently from younger adult subjects.

To report negative side effects contact Vericel Corporation at 888-454-BURN (888-454-2876) or FDA at 1-800-FDA-1088 (1-800-332-1088) or www.fda.gov/medwatch.

Please see [Full Prescribing Information](#).

References 1. NEXOBRID Prescribing Information. Cambridge, MA. Vericel Corporation; 2023. 2. Hirche C, Kreken Almeland S, Dheansa B, et al. Eschar removal by bromelain based enzymatic debridement (Nexobrid®) in burns: European consensus guidelines update. *Burns*. 2020;46(4):782-796.



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