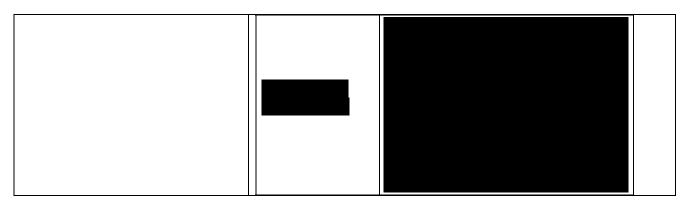
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SUMMARY CLINICAL STUDY REPORT

PROTOCOL TITLE:	A 16-Day, Single Center, Randomized, Comparator-Controlled Study to Assess Wound Healing Efficacies of Different Clean, Teat, and Protect Wound Care Regimens Compared to Standard of Care and Untreated					
PROTOCOL NUMBER:	CCSTOH003808 Final Version 1.0, dated 09-AUG-2021					
SITE STUDY NUMBER:	C21-D154					
SPONSOR:	Johnson & Johnson Consumer Inc. 199 Grandview Road, Skillman, NJ 08558 USA					
STUDY SITE:	SGS Stephens, Inc. Dallas Research Center 1801 N. Glenville Dr., Suite 200 Richardson, Texas 75081 USA					
PRINCIPAL INVESTIGATOR:	Tanja Emmerich, Ph.D. Address: Refer to Study Site address					
KEY SITE STAFF	Study Physician – Peter D. Hino, M.D Dermatologist Sub-Investigator: John Hoopman, A.A.S., C.M.L.S.O. Statistics: Esther Qin, Ph.D. Study Grader: Savanna Ewing					
STUDY INITITION DATE (First Subject First Visit):	08-SEP-2021					
STUDY COMPLETION DATE (Last Subject Completed):	15-OCT-2021					
SPONSOR REVIEW AND APPROVAL:	Name	Signature and date:				

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The principles of the International Council for Harmonisation (ICH) Guidelines for Good Clinical Practice (GCP E6 (R2)) were applied to this study.

CONFIDENTIAL: The information in this document contains trade secrets and commercial information that are privileged or confidential and may not be disclosed unless such disclosure is required by Federal or State law or regulations. Subject to the foregoing, this information may be disclosed only to those persons involved in the study who have a need to know, but all such persons must be instructed not to further disseminate this information to others. These restrictions on disclosure will apply equally to all future information supplied to you, which is indicated as privileged or confidential.

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PURPOSE

The primary goal in wound care is to protect the wound from further damage and to facilitate healing by providing the optimal environment that limits infection, inflammation, and scarring. Appropriate wound dressings play an important role in providing this necessary protection and may promote restoration of skin barrier function compared to untreated wounds.¹

Wound healing is a complex process wherein the skin surface and the underlying tissue must go through an intricate process of tissue repair. The dermis of an uncovered wound is relatively more fibroplastic, fibrotic, and scarred compared to occluded wounds, and is likely to be more inflamed and necrotic in early stages of repair. Exudate, the moisture secretion from the wound site, facilitates the healing process, by providing a variety of bioactive mediators such as enzymes, growth factors and hormones. Wound exudate may also aid in limiting inflammation by providing various immune cells with an ideal medium to destroy invading pathogens such as bacteria, foreign bodies and necrotic tissues. However, exudate in an uncovered wound can lead to scab formation, with trapped inflammatory cells, wound debris, and a layer of desiccated dermal tissue. Covering a wound with an occlusive dressing reduces scab formation and may radically alter the pattern of epidermal wound healing.

Another factor that plays an important role in wound healing is the moisture in the wound environment. As early as 1962, Winter et al., provided the first evidence that keeping wounds moist helps them heal faster compared to dry wounds.²

As occlusion affects both the epidermis by enhancing epithelial cell migration and the dermis by enhancing dermal collagen synthesis, maintaining a moist environment may promote the restoration of epidermal barrier function and overall wound healing while making dressing changes relatively easier. Moreover, it has been suggested that the scar left by an occlusively dressed wound is more cosmetically acceptable than that left by an uncovered wound.³

Moist wound healing is widely practiced by healthcare providers in the United States to enhance wound repair and recovery by protecting the wound against bacteria, creating an optimal wound healing environment, limiting reinjury and pain, and facilitating dressing changes. Hydrocolloid dressings are designed to combine the benefits of occlusion and absorbency and have been introduced in the consumer sector in various parts of the world as a non-traditional approach to treating minor wounds. However, there is an unfilled need gap in identifying the optimal hydration and occlusivity conditions to best facilitate the wound healing process with minimal cosmetic damage to the skin.

Guidelines for caring for minor cuts, scrapes, and burns are inconsistent in the literature. While cleaning and covering the wound is consistent throughout, some recommend including an antiseptic cleanser and/or antibiotic ointment. In the Handbook of Nonprescription Drugs, the American Pharmacists Association explains that in addition to irrigating wounds with saline or water for removal of debris, the use of nonprescription antiseptics is helpful in preventing secondary infections.⁴ Treatment of minor wounds with topical antibiotics helps keep the wound moist, and helps prevent infection.^{4,5}

More research is needed to understand the benefits of antiseptic wound cleansers and topical antibiotic ointments in the treatment of minor wounds.

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This single center, randomized, comparator-controlled, 16-day clinical trial was conducted, to compare healing rates and infection protection for different treatment regimens, including an antiseptic cleanser, an antibiotic ointment, and a standard of care bandage. This study also evaluated the impact of two newly designed hydrocolloid prototype bandages on wound healing in comparison with standard of acre bandage and the different treatment regimens.

STUDY DESIGN SUMMARY

A total of 34 subjects completed study participation, with all 34 subjects included in the intent-to-treat (ITT) population. The subjects enrolled in this trial were 25- to 55-year-old males and females of Fitzpatrick skin types I-III who had uniform skin color on both volar forearms, and who had consented to participate in this clinical trial.

At Screening (Visit 1; 3 to 7 days prior to Baseline), subjects were provided with an auxiliary cleanser to use on their forearms and for all body cleansing in place of their regular body cleanser for the duration of the study.

At Baseline (Visit 2), a Sciton Er:YAG 2940 laser was used to induce eight partial-thickness (i.e. minor) wounds on the subjects' forearms (four per arm).⁶ The wounds created by this method heal by the migration of epidermal cells from the dermal appendages located in the wound's base (dermal islands) and/or wound borders, and mimic minor wounds similar to real life scraped skin, typically healing in less than 16 days if left untreated.

Each test site for each subject was randomly assigned to one of the following:

Treatment code	Treatment description	
A	Uncovered wound	
В	Standard of Care Bandage	
С	Antibiotic Ointment	
D	Antibiotic Ointment + Standard of Care Bandage	
Е	Antiseptic Wash Care Bandage (IP regimen applied for only 3 days) + Sta	andard of
F	Antiseptic Wash + Antibiotic Ointment + Sta Care Bandage + Antibiotic Ointment	andard of
G	Hydrocolloid Pad	
Н	Hydrocolloid Pad	

Each wound site and assessed at specified intervals by clinical grading of wound healing parameters (until Day 16).

Between Baseline and Day 7, each wound site was treated with one of 8 randomly assigned treatments. Treatments included an adhesive bandage that is considered the SoC alone, a marketed antibiotic ointment alone, a marketed antiseptic wash, various regimens (combinations of antiseptic wash/bandage/ointment) and durations of use, hydrocolloid bandages, and no treatment (uncovered,

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negative control). Treatments were applied/changed by an experienced staff member at the Site at specified intervals: six of the treatments were applied/changed daily from Day 1 through Day 6; one treatment was be changed only on Days 0 through 2 and the wound left uncovered after day 3.

All other treated wound sites were uncovered from Day 7 (after clinic visit) to Day 16, at which point subjects returned to the site for clinical assessments.

STATISTICAL ANALYSIS SUMMARY

The primary endpoint of this study was the Composite Healing Score, which was calculated from the clinical grading of wound healing parameters as follows:

Composite Healing Score = [general wound appearance score + smoothness score + epithelial confluence score] – [erythema score + edema score + crusting/scabbing score]

The composite healing score on a 25-point scale (-12 thru+12) is indicative of the extent of wound healing and was calculated for each wound site at each evaluation day.

Composite healing score was summarized at each time point and was analyzed within-treatment and between-treatment. The within-treatment comparison will be performed at each post-baseline time point by comparing the post-baseline scores with the baseline score (defined as the post-wound score on Day 0) within each treatment using the paired t-test. The between-treatment comparison will be performed by comparing the change from baseline (defined as post-baseline score minus baseline score) between treatments using a mixed effect analysis of covariance (ANCOVA) model.

The secondary endpoints were analyzed in a similar way as for the composite healing score, and were as follows:

- Clinical Grading of Wound Healing Erythema
- Clinical Grading of Wound Healing Edema
- Clinical Grading of Wound Healing General Wound Appearance
- Clinical Grading of Wound Healing Smoothness
- Clinical Grading of Wound Healing Epithelial Confluence
- Clinical Grading of Wound Healing Crusting/Scabbing

The other two secondary endpoints were the following:

- Wound Healing Process Assessment was summarized at each time point and was analyzed at each post-baseline time point using logistic regression.
- Subject Self-assessment Questions subject questionnaire data was summarized at each time point by treatment.

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RESULTS AND FINDINGS

Primary Outcomes:

Composite Healing Score

Within-treatment analysis of the composite healing score indicated the following when compared with baseline (post-wound day 0):

- A (uncovered), B (bandage), and C (antibiotic ointment) showed a statistically significant **decrease** (worsening)* in scores at days 1, 2, 3, 4, 5, 6, and 7, and a statistically significant **increase** (improvement) in scores at day 16.
- D (antibiotic ointment + bandage), F (antiseptic wash + antibiotic ointment + bandage), and H (hydrocolloid pad (hydro
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) showed a statistically significant decrease (worsening) in scores at days 1, 2, 3, 4, and 5, and a statistically significant increase (improvement) in scores at day 16.
- G (hydrocolloid pad a statistically significant decrease (worsening) in scores at days 1, 2, 3, and 4, and a statistically significant increase (improvement) in scores at days 5, 6, and 7, 16.

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the composite healing score, showed the following results:

- B (bandage) **performed better than**:
 - A (uncovered) at days 1, 2, 3, 4, and 16
 - o C (antibiotic ointment) at days 1, 2, 3, and 16
- D (antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 2, 3, 4, 5, 6, 7, and 16
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
- F (antiseptic wash + antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
- G (hydrocolloid pad part) performed better than:
 - A (uncovered), B (bandage), C (antibiotic ointment), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, 16)
 - o D (antibiotic ointment + bandage) at days 1, 2, 3, 4, 5, 6, and 7

^{*}Note that initial worsening in composite healing score was expected.

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- o H (hydrocolloid pad) at days 2, 3, 4, 5, 6, and 7
- H (hydrocolloid pad) performed better than:
 - A (uncovered), B (bandage), and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 1, 2, 4, 6, 7, and 16
 - o F (antiseptic wash + antibiotic ointment + bandage) at days 2, 3, 7, and 16
 - o D (antibiotic ointment + bandage) at days 1, 2, and 7

Secondary Outcomes:

<u>Clinical Grading of Wound Healing – Erythema</u>

Within-treatment analysis of the erythema score indicated the following when compared with baseline (post-wound day 0):

- A (uncovered) and C (antibiotic ointment) showed a statistically significant **increase (worsening)** in scores at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16).
- B (bandage), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage) showed a statistically significant **increase (worsening)** in scores at days 1, 2, 3, 4, 5, 6, and 7.
- G (hydrocolloid pad statistically significant increase (worsening) in scores at days 1, 2, 3, 4, 5, 6, and 7, and a statistically significant decrease (improvement) in scores at day 16.

A worsening in erythema was expected on days following post-wounding.

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the erythema score, showed the following results:

- B (bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at day 16
- D (antibiotic ointment + bandage) performed better than:
 - o A (uncovered), B (bandage), and C (antibiotic ointment) at days 4, 5, 6, and 16
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) performed better than:
 - o A (uncovered) and C (antibiotic ointment) at days 4, 5, 6, 7, and 16
 - o B (bandage) at days 4, 5, and 6
- F (antiseptic wash + antibiotic ointment + bandage) **performed better than**:
 - o A (uncovered) at days 4, 5, 6, and 16
 - B (bandage) at days 4 and 6
 - o C (antibiotic ointment) at days 4, 6, and 16
- G (hydrocolloid pad performed better than:
 - o A (uncovered) and C (antibiotic ointment) at days 3, 4, 5, 6, 7, and 16
 - o B (bandage) at days 2, 3, 4, 5, 6, 7, and 16
 - o D (antibiotic ointment + bandage) at days 2, 3, 5, 6, and 7
 - E (antiseptic wash + antibiotic ointment + bandage for 3 days) and F (antiseptic wash + antibiotic ointment + bandage) at days 2, 3, 5, 6, 7, and 16
 - o H (hydrocolloid pad) at days 3, 4, 5, 6, and 7
- H (hydrocolloid pad performed better than:
 - A (uncovered) at days 5, 6, 7, and 16
 - B (bandage) at days 6 and 16

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- o C (antibiotic ointment) at days 6, 7, and 16
- D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage) at day 16

Clinical Grading of Wound Healing – Edema

Within-treatment analysis of the edema score showed a statistically significant **decrease (improvement)** in scores at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16) when compared with baseline (post-wound day 0) for each wound site.

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the edema score, showed the following results:

- B (bandage), C (antibiotic ointment), D (antibiotic ointment + bandage), and E (antiseptic wash + antibiotic ointment + bandage for 3 days) **performed better than**:
 - A (uncovered) at day 3
- F (antiseptic wash + antibiotic ointment + bandage), G (hydrocolloid pad (hydrocolloid pad performed better than:
 - o A (uncovered) at days 1 and 3
 - o C (antibiotic ointment) at day 1

Clinical Grading of Wound Healing – General Wound Appearance

Within-treatment analysis of the general wound appearance score showed a statistically significant **increase (improvement)** in scores at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16) when compared with baseline (post-wound day 0) for each wound site.

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the general wound appearance score, showed the following results:

- B (bandage) **performed better than**:
 - A (uncovered) at days 1, 2, 3, 4, and 16
 - C (antibiotic ointment) at days 1, 2, 3, and 16
- D (antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 2, 3, 4, 5, 6, 7, and 16
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) and F (antiseptic wash + antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage) at days 2, 3, 4, 5, 6, and 7
- G (hydrocolloid pad pad page) performed better than:
 - A (uncovered), B (bandage), and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o D (antibiotic ointment + bandage) at days 2, 3, 4, 5, 6, and 7
 - E (antiseptic wash + antibiotic ointment + bandage for 3 days) and F (antiseptic wash + antibiotic ointment + bandage) at days 2, 3, 4, 5, 6, 7, and 16
 - o H (hydrocolloid pad) at days 3, 4, 5, 6, and 7

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- H (hydrocolloid pad page) performed better than:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 2, 3, 4, 5, 6, 7, and 16
 - o D (antibiotic ointment + bandage) at days 2, 3, and 7
 - o E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 2, 3, 4, 5, 6, and 7
 - o F (antiseptic wash + antibiotic ointment + bandage) at days 2, 3, 7, and 16

Clinical Grading of Wound Healing – Smoothness

Within-treatment analysis of the smoothness score showed a statistically significant **decrease (worsening)** in scores at days 1, 2, 3, 4, 5, 6, and 7, and a statistically significant **increase (improvement)** in scores at day 16, when compared with baseline (post-wound day 0) for each wound site. A worsening in smoothness was expected on days following post-wounding.

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the smoothness score, showed the following results:

- B (bandage) **performed better than**:
 - o A (uncovered) and C (antibiotic ointment) at day 16
- D (antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
 - o E (antiseptic wash + antibiotic ointment + bandage for 3 days) at day 6
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) **performed better than**:
 - o A (uncovered) at days 1, 2, 3, 5, 6, and 16
 - o B (bandage) at days 1, 2, 3, 4, 5, 6, 7
 - o C (antibiotic ointment) at days 1, 2, 5, 6, 7, and 16
- F (antiseptic wash + antibiotic ointment + bandage) **performed better than**:
 - o A (uncovered) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
 - o C (antibiotic ointment) at days 1, 2, 4, 5, 6, 7, and 16
 - E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 4, 5, 6, and 7
- G (hydrocolloid pad part) performed better than:
 - A (uncovered), B (bandage), and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - D (antibiotic ointment + bandage) and E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 1, 2, 3, 4, 5, 6, and 7
 - o F (antiseptic wash + antibiotic ointment + bandage) at days 2, 3, 5, 6, and 7
 - o H (hydrocolloid pad) at days 3, 4, 5, 6, and 7
- H (hydrocolloid pad performed better than:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
 - D (antibiotic ointment + bandage) and F (antiseptic wash + antibiotic ointment + bandage)
 at day 2
 - E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 2, 3, 4, 6, and 7

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Clinical Grading of Wound Healing – Epithelial Confluence

Within-treatment analysis of the epithelial confluence score showed a statistically significant **increase** (**improvement**) in scores at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16) when compared with baseline (post-wound day 0) for each wound site (except for treatment G at day 16 [$P = NA \{ \text{not calculable} \} \}$).

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the epithelial confluence score, showed the following results:

- B (bandage) **performed better than**:
 - o A (uncovered) at days 1, 2, and 3
 - o C (antibiotic ointment) at days 1, 2, 3, 5, and 16
- D (antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage) at days 4, 5, 6, and 7
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 4, 6, and 7
- F (antiseptic wash + antibiotic ointment + bandage) **performed better than**:
 - o A (uncovered) at days 1, 2, 3, 4, 5, and 6
 - C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
- G (hydrocolloid pad performed better than:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage) at days 2, 3, 4, 5, 6, and 7
- H (hydrocolloid pad performed better than:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 2, 3, 4, 5, 6, and 7
 - D (antibiotic ointment + bandage) and E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 2, 4, 5, 6, and 7
 - o F (antiseptic wash + antibiotic ointment + bandage) at days 3, 4, 5, 6, and 7

Clinical Grading of Wound Healing – Crusting/Scabbing

Within-treatment analysis of the crusting/scabbing score showed a statistically significant **increase** (worsening) in scores at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16) when compared with baseline (post-wound day 0) for each wound site, except for treatment B (bandage) at day 16. A worsening in crusting/scabbing was expected on days following post-wounding since crusting/scabbing takes time to develop.

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Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for the crusting/scabbing score, showed the following results:

- B (bandage) **performed better than**:
 - o A (uncovered) at days 1, 2, 3, 4, 5, and 16
 - o C (antibiotic ointment) at days 1, 2, 3, and 16
- D (antibiotic ointment + bandage) **performed better than**:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - o B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
- E (antiseptic wash + antibiotic ointment + bandage for 3 days) and F (antiseptic wash + antibiotic ointment + bandage) **performed better than**:
 - o A (uncovered) and B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
 - o C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
- G (hydrocolloid pad
 performed better than:
 - A (uncovered) and C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - B (bandage), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage) at days 1, 2, 3, 4, 5, 6, and 7
 - o H (hydrocolloid pad) at days 3, 4, 5, 6, and 7
- H (hydrocolloid pad) performed better than:
 - o A (uncovered) and B (bandage) at days 1, 2, 3, 4, 5, 6, and 7
 - o C (antibiotic ointment) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
 - D (antibiotic ointment + bandage) and F (antiseptic wash + antibiotic ointment + bandage) at days 1 and 2
 - E (antiseptic wash + antibiotic ointment + bandage for 3 days) at days 1, 2, 6, and 7

Wound Healing Process Assessment

Between-treatment comparisons, based on logistic regression, showed the following results:

- B (bandage), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and H (hydrocolloid padage) performed better than A (uncovered) and C (antibiotic ointment)
- F (antiseptic wash + antibiotic ointment + bandage) **performed better than** C (antibiotic ointment)
- G (hydrocolloid pad performed better than A (uncovered), C (antibiotic ointment), D (antibiotic ointment + bandage), and F (antiseptic wash + antibiotic ointment + bandage)

<u>Subject Self-Assessment Questions</u>

Subject Assessment of Pain/Soreness

Within-treatment analysis of the subject assessment of pain/soreness score showed a statistically significant **decrease (improvement)** in scores at the following post-baseline time points when compared with baseline (post-wound day 0):

- With arm resting by side:

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- For B (bandage), C (antibiotic ointment), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), F (antiseptic wash + antibiotic ointment + bandage), and G (hydrocolloid padage) at each post-baseline time point (days 1, 2, 3, 4, 5, 6, 7, and 16)
- o For A (uncovered) at days 1, 2, 3, 4, 5, 6, and 16
- o For H (hydrocolloid pad) at days 2, 3, 4, 5, 6, 7, and 16
- With arm in normal motion:
 - o For A (uncovered) at days 2, 4, 5, 6, 7, and 16
 - o For B (bandage) and C (antibiotic ointment) at days 2, 3, 4, 5, 6, 7, and 16
 - For D (antibiotic ointment + bandage) and F (antiseptic wash + antibiotic ointment + bandage) at days 4, 5, 6, 7, and 16
 - For E (antiseptic wash + antibiotic ointment + bandage for 3 days) and G (hydrocolloid pad a days 3, 4, 5, 6, 7, and 16
 - o For H (hydrocolloid pad) at days 2, 3, 4, 5, 7, and 16

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for pain/soreness with arm resting by side and with arm in normal motion, showed no statistically significant difference between treatments at any time point.

Subject Assessment of Itchiness

Within-treatment analysis of the subject assessment of itchiness score showed a statistically significant decrease (improvement) in scores at day 16 when compared with baseline (post-wound day 0) for A (uncovered), B (bandage), C (antibiotic ointment), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage). There was no statistically significant change in scores for itchiness for G (hydrocolloid pad/) or H (hydrocolloid pad/) at any post-baseline time point when compared with baseline (post-wound day 0).

Between-treatment comparisons, based on the mean change from baseline (post-wound day 0) for itchiness, showed that A (uncovered), B (bandage), C (antibiotic ointment), D (antibiotic ointment + bandage), E (antiseptic wash + antibiotic ointment + bandage for 3 days), and F (antiseptic wash + antibiotic ointment + bandage) **performed better than** treatment H (hydrocolloid pad day 16.

Percentage of Healed

For the wound site treated with G (hydrocolloid pad a part), the wound was determined as healed for 4 subjects (11.8%) at day 7, and for all 34 subjects (100.0%) at day 16.

The other wound sites were determined as healed only by the end of the study at day 16 for the following number and percentage of subjects:

- 26 subjects (76.5%) for A (uncovered)
- 32 subjects (94.1%) for B (bandage) and E (antiseptic wash + antibiotic ointment + bandage for 3 days)

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- 24 subjects (70.6%) for C (antibiotic ointment)
- 33 subjects (97.1%) for D (antibiotic ointment + bandage)
- 34 subjects (100%) for F (antiseptic wash + antibiotic ointment + bandage) and H (hydrocolloid pad

OVERALL CONCLUSIONS

Overall results from this sing	le-center, randomize	d, comparator-conf	rolled clinical tri	ial indicate that,
under the conditions of this to	est, wounds treated f	or 7 days with treat	ment F (Antisept	ic Wash
+ Antibiotic Ointment	+	Standard of Care	Bandage) showed a
statistically significantly highe	r composite wound	healing score than	wounds treated	for 7 days with
treatment B (Standard of Care	Bandage	at day 7.		
Use of either hydrocolloid pa	d for 7 days was gen	erally better than a	II other treatme	nts. Additionally,
Hydrocolloid Pad	(G) was generally bet	ter than Hydrocollo	id Pad	(H).

Use of a bandage for 7 days (B), use of an antibiotic ointment and a bandage for 7 days (D), and use of an antiseptic wash, an antibiotic ointment, and a bandage for 3 days (E) or 7 days (F), were generally better than leaving the wound uncovered for 7 days (A) or use of only an antibiotic ointment for 7 days (C). Additionally, D, E, and F (bandage plus topical treatment[s]) were generally better than B (bandage only).