Improved Tissue Compatibility of Novel SURGIMESH[®] XB Nonwoven Microfiber Polypropylene Barrier Mesh Shown To Produce Clinical Outcome Improvements In Challenging Patient Population

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At the premier US hernia surgery meeting of the American Hernia Society, the past president Bruce Ramshaw, MD presented on his clinical experience using the novel barrier mesh, SURGIMESH XB. The clinical use was part of a Clinical Quality Improvement (CQI) study analyzing the ventral hernia patient's entire cycle of care. The 59 patients represented 60 repairs in the CQI study were repaired using a laparoscopic approach with 40% of the patients being recurrent and involving on average 2.9 (range of 1 to 7) prior repairs. The patient population averaged 59 years of age with an average BMI of 36.4 (range of 21.4 to 62.4).

Patient follow-up ranged from 6 to 35 months with no repair or mesh related complications. SURGIMESH XB Mesh size for the repairs ranged from 144 cm² to 936 cm² using cardinal point transfascial suture and titanium tack fixation. During the course of the CQI study pain medication usage was reduced by 48%, length of hospital stay was decreased by 25% and time in the PACU was decreased by 25%. One patient developed a contralateral lower quadrant hernia which allowed examination of an 11 month repair. The SURGIMESH XB was found to have no adhesions with a formed neo-peritoneum and strong attachment to the surrounding tissues. Histopathologic analysis of a small retrieved specimen found complete fibrous connective tissue healing throughout with evidence of neovascularization and moderate inflammation consistent with that expected of a long term biocompatible implant.

Dr. Ramshaw concluded that the improved outcomes when using the non-woven microfiber polypropylene barrier mesh were due to the improved tissue integration and biocompatibility produced by the material in clinical hernia repairs. In the current healthcare marketplace delivering improved patient outcomes and thus improved value in hernia repair is a necessary part of any hernia implant offering. As an added benefit, helping to combat the "vicious cycle of complications", as published ¹⁾ recently in the Journal of the American College of Surgeons, the SURGIMESH[®] XB MatrixMesh[™] Hernia Implant is shown to not add to complications post-operatively and provide superior long term results in difficult ventral hernia repairs. For additional information on SURGIMESH hernia repair configurations visit the www.surgimesh.com web site.

References:

- 1) Holihan, J.L., et.al., Adverse Events after Ventral Hernia Repair: The Vicious Cycle of Complications, J Amer Coll Surg, vol. 221, pg. 478, August 2015,
- 2) Ramshaw, B., et.al., Laparoscopic Ventral Hernia Repair Using A Non-woven Randomly Oriented Polypropylene Microfiber Mesh, Hernia, vol. 20, pg. S118, P-462, Mar 2016

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