Biodesign® Hernia Graft

Study finds use of Biodesign Hernia Graft results in minimal recurrence in 5+ year follow-up¹

Retrospective clinical study





| Hernia type | Number of procedures |
|------------------|----------------------|
| Incisional | 57 |
| Umbilical | 38 |
| Inguinal | 29 |
| Femoral | 3 |
| Spigelian | 4 |
| Parastomal | 2 |
| Total procedures | 133 |
| | |

| Surgical fields | |
|--------------------------|----|
| Contaminated | 39 |
| Potentially contaminated | 94 |

Method: All procedures were conducted laparoscopically using either the intraperitoneal onlay mesh (IPOM) technique (n = 130) or the two-layered "sandwich" repair (n = 3). As a general rule, the hernia was reduced and the borders cleared of adhesions per sharp dissection (5 cm circumferential margin). The hernia defect was closed with permanent suture and the SIS graft placed in an onlay position with a \geq 3 cm overlap in all directions, preferably 5 cm when practical. Fixation of the graft to the abdominal wall was maintained by transfascial sutures or staples.

Additional complications, out of 116 patients, including mild pain (n = 10; 8.6%), seroma (n = 11; 9.5%), and wound infection (n = 1; 0.9%), were reported.

Note: The name of our product has changed from Surgisis[®] to Biodesign since this trial was published.

1. Franklin ME Jr, Treviño JM, Portillo G, Vela I, Glass JL, González JJ. The use of porcine small intestinal submucosa as a prosthetic material for laparoscopic hernia repair in infected and potentially contaminated fields: Long-term follow-up. Surg Endosc. 2008;22:1941-1946.



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