

# Medtronic

Transorb™ self-gripping resorbable mesh

## Resorbable mesh – reimagined.

The first and only fully resorbable macroporous synthetic mesh<sup>17</sup> with ProGrip™ technology is here. See how this unique design can help your patients – **and you.**

### Superior strength.<sup>†,1,2</sup>

- **Stronger mesh:** A significantly higher tensile strength than Phasix™\* mesh<sup>‡,1</sup>
- **Strong attachment:** Attachment force to the tissue is 1.6x stronger<sup>§,0,2</sup> with ProGrip™ technology
- **Strong repair:** Macroporosity allows for excellent tissue ingrowth, providing mechanical strength to the defect repair<sup>0,2-5</sup>

### Repairs. Reinforces. Resorbs.<sup>0,2-6</sup>

- **Tissue integration:** Resorbable microgrips support excellent tissue integration<sup>0,2,7</sup>
- **Critical healing period:** Provides the same support as a permanent synthetic mesh during the critical healing period, while gradually resorbing into the body over time<sup>0,1,2,6</sup>
- **Pore size matters:** Large pores are associated with a reduced risk of infection and shrinkage,<sup>2,3,8</sup> as well as reduced seroma formation<sup>0,2,9</sup>

Transorb™ mesh is made of poly-L-lactide, poly-trimethylene carbonate (PLLA/TMC) copolymers,<sup>2</sup> fully resorbing in 36 to 60 months post-implantation.<sup>0,#,2,6</sup>

Mesh complications may include but are not limited to hematoma, seroma, infection, acute and chronic pain, extrusion/erosion, inflammation, and recurrence.

<sup>†</sup>Compared to ProGrip™ self-gripping polyester mesh and Phasix™\* mesh. Compared to a flat sheet mesh with the same level of suture fixation. Based on preclinical testing and benchtop studies, not necessarily indicative of human clinical outcomes. <sup>‡</sup>Based on benchtop studies, not necessarily indicative of human clinical outcomes. <sup>§</sup>Compared to a flat sheet mesh with the same level of suture fixation. <sup>0</sup>Based on preclinical testing, not necessarily indicative of human clinical outcomes. <sup>1</sup>Compared to ProGrip™ self-gripping polyester mesh in simulated in vitro conditions at 20 weeks. <sup>#</sup>The total resorption period depends on numerous factors, including unique patient physiology.

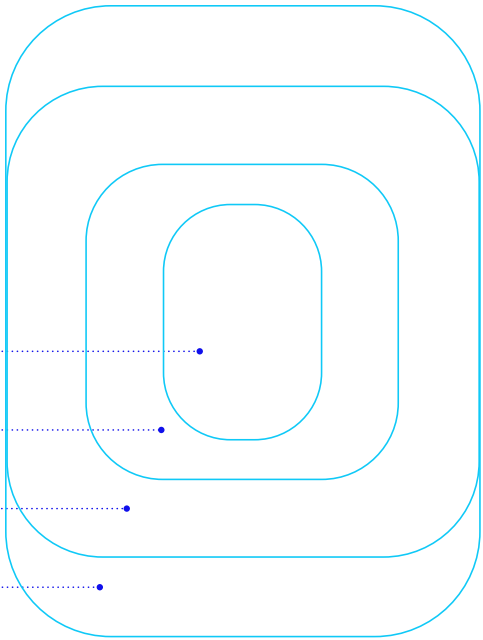
# Supple. Stable. Secure.<sup>†,9-14</sup>

With its self-gripping ProGrip™ technology and superior conformability,<sup>‡,14</sup> Transorb™ mesh can bring efficiencies to your open ventral hernia procedures while delivering a strong, fully resorbable hernia repair.<sup>§,2,6,15,16</sup>

## Ordering Information

Order code	Description	Dimensions
TSB1510	Poly-L-lactide, poly-trimethylene carbonate (PLLA/TMC) copolymers with grips on one side	15 cm × 10 cm (5.9 in × 3.9 in)
TSB2020	Poly-L-lactide, poly-trimethylene carbonate (PLLA/TMC) copolymers with grips on one side	20 cm × 20 cm (7.9 in × 7.9 in)
TSB3030	Poly-L-lactide, poly-trimethylene carbonate (PLLA/TMC) copolymers with grips on one side	30 cm × 30 cm (11.8 in × 11.8 in)
TSB4030	Poly-L-lactide, poly-trimethylene carbonate (PLLA/TMC) copolymers with grips on one side	40 cm × 30 cm (15.7 in × 11.8 in)

Sold **one unit** per box.



We're always here to support you and your patients.  
**Discover more at [medtronic.ca](https://www.medtronic.ca)**

Mesh complications may include but are not limited to hematoma, seroma, infection, acute and chronic pain, extrusion/erosion, inflammation, and recurrence. For a listing of indications, contraindications, precautions, warnings, and potential adverse events, please refer to the Instructions for Use.

†Compared to Phasix™ mesh and Gore™ BIO-A™ tissue reinforcement. 5 out of 5 surgeons surveyed agreed. Based on benchtop studies, not necessarily indicative of human clinical outcomes. Based on preclinical studies, animal data is not necessarily indicative of human clinical outcomes. The use of additional suture fixation is recommended to limit the risk of hernia recurrence. ‡Compared to Phasix™ mesh and Gore™ BIO-A™ tissue reinforcement. Based on feedback from 5 surgeons. §Based on preclinical testing, not necessarily indicative of human clinical outcomes. ¶ "Deternia" is a Medtronic internal project name for "Transorb self-gripping resorbable mesh".

**1.** Based on internal report #1203CR764a, Phasix™ mesh vs. Transorb™ self-gripping resorbable mesh – ball burst statistical comparison. October 2021. **2.** Vestberg R, Lecuivre J, Radlovic A, Payet E, Bayon Y, Bouré L. A novel self-gripping long-term resorbable mesh providing temporary support for open primary ventral and incisional hernia. *J Mater Sci Mater Med.* 2023;34(11):59. **3.** Brown CN, Finch JG. Which mesh for hernia repair? *Ann R Coll Surg Engl.* 2010;92(4):272-278. **4.** Lake SP, Ray S, Zihni AM, Thompson DM Jr, Gluckstein J, Deeken CR. Pore size and pore shape—but not mesh density—alter the mechanical strength of tissue ingrowth and host tissue response to synthetic mesh materials in a porcine model of ventral hernia repair. *J Mech Behav Biomed Mater.* 2015;42:186-197. **5.** Weyhe D, Cobb W, Lecuivre J, et al. Large pore size and controlled mesh elongation are relevant predictors for mesh integration quality and low shrinkage—Systematic analysis of key parameters of meshes in a novel minipig hernia model. *Int J Surg.* 2015;22:46-53. **6.** Based on internal report #1203CR462a, Evaluation of Transorb™ self-gripping resorbable mesh and Deternia™ self-gripping resorbable mesh degradation and associated local tissue effects. November 2023. **7.** Based on internal report #BIO111-a, Biological evaluation report: Transorb™ self-gripping resorbable mesh and Deternia™ self-gripping resorbable mesh. October 1, 2021. **8.** Weyhe D, Belyaev O, Müller C, et al. Improving outcomes in hernia repair by the use of light meshes—a comparison of different implant constructions based on a critical appraisal of the literature. *World J Surg.* 2007;31(1):234-244. **9.** Jin J, Schomisch S, Rosen MJ. In vitro evaluation of the permeability of prosthetic meshes as the possible cause of postoperative seroma formation. *Surg Innov.* 2009;16(2):129-133. **10.** He C, Lu J, Ong MW, Lee DJK, Tan KY, Chia CLK. Seroma prevention strategies in laparoscopic ventral hernia repair: a systematic review. *Hernia.* 2020;24(4):717-731. **11.** Based on internal report #1203CR749, Evaluation and comparison of Meshes fixation forces in a Porcine Model for marketing purpose. November 2023. **12.** Based on internal report #1203CR750, Transorb™ self-gripping resorbable mesh – marketing evaluation form. October 2021. **13.** Based on internal report #1203CR621a, Design verification activities associated with DI-261 (ex vivo gripping test without fixation). November 2020. **14.** Based on internal report #1203CR774, Transorb™ self-gripping resorbable mesh congress VOC. November 2021. **15.** Based on internal report #1203CR709, Comparison of abdominal hernia meshes evaluated in a porcine ventral abdominal wall defect model: A pivotal study. November 2023. **16.** Based on internal report #1203CR510a, Mémoire: Degradation mechanism of resorbable mesh. June 2020. **17.** Data on file.