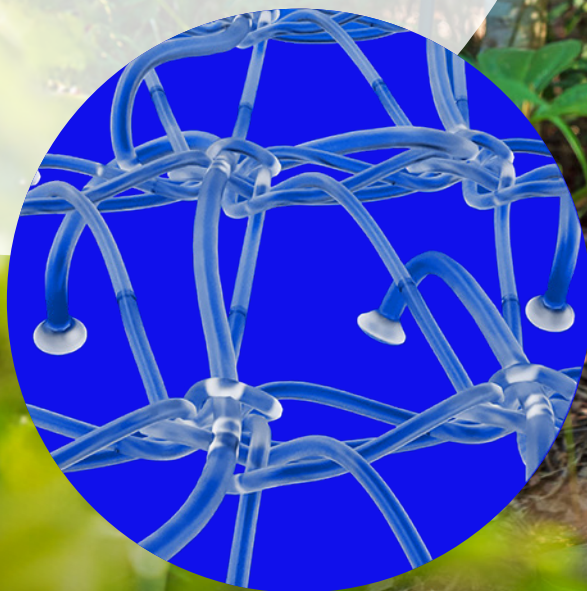


Medtronic

Sizes you need.
Grips you love.

ProGrip™ self-gripping polypropylene mesh



The world of ProGrip™ self-gripping polypropylene mesh has expanded to provide more sizes for your inguinal and ventral hernia repair procedures.



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Uniform fixation^{1,†,‡} — faster placement.^{2,§,Ω}

Now available in a comprehensive range of sizes to fit all inguinal and ventral hernia defects,^{2-4,§,††,‡‡} the self-anchoring grips used in the ProGrip™ mesh family provide a vast constellation of uniform fixation points across the entire mesh surface.^{1,†,‡}

Polylactic acid (PLA) resorbable microgrips

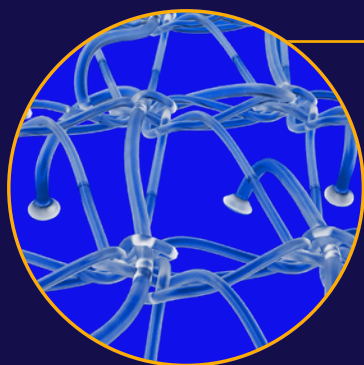
support good tissue integration^{5,§§} and prevent the mesh from shifting during placement^{2,§,††}

Immediate gripping

across the mesh surface facilitates easy positioning^{2,4,6} and faster placement^{2,§,Ω} of the mesh

Trimmable to different sizes

to meet your varying procedural needs^{3,7,8,†,ΩΩ} —
without impacting mechanical characteristics^{3,§,ΩΩ}



Mesh transparency

aids visualization of underlying anatomic structures^{2,3,§,††}

[†]Based on benchtop data, not necessarily indicative of human clinical outcomes. [‡]The technique used to fixate the mesh (suture and/or tacks) is left up to the surgeon. The textile self-gripping feature makes it possible to position the mesh without fixation, depending on the size of the defect, the hernia position, and the quality of the anatomical structures. [§]Based on preclinical data, not necessarily indicative of human clinical outcomes. ^ΩCompared to flat sheet meshes. Based on feedback from 6 answers, 5 surgeons (83%), conducted in lab setting with cadaver. Surgeons compensated. ^{††}Based on feedback from 6 surgeons, conducted in lab setting with cadaver. Surgeons compensated. ^{‡‡}Applicable to PP1515G, PP2015G, PP3020G, PP3030G, PP4030G. ^{§§}Based on animal study, not necessarily indicative of human clinical outcomes. ^{ΩΩ}If a pre-cut mesh is trimmed, special care should be taken to preserve the sewing to limit the risk of recurrence. If a pre-cut mesh is trimmed, the green marking should not be cut as it could detach from the base textile. If the mesh is trimmed, the green marking may no longer be present, compromising its function.

Risk statement: Mesh complications may include but are not limited to acute and chronic pain, extrusion/erosion, hematoma, infection, inflammation, recurrence, and/or seroma. See full risk statements on last page.

Big advantages for your inguinal hernia repairs.

The uniform fixation^{1,†,‡} of ProGrip™ self-gripping polypropylene mesh gives you the confidence of positive clinical outcomes expressed in terms of low hernia recurrence rates and improved patient quality of life.^{9-12,§}

Lower pain scores and lower dosing of postoperative analgesics^{13,§,Ω,††}

- Good tissue integration^{5,††}
- Reduced need for additional fixation^{3,10-12,††}
- Prevents shifting of the mesh during placement^{2,§§,ΩΩ}
- Significantly shorter procedure times than sutured mesh^{10,13,14,§}

[†]Based on benchtop data, not necessarily indicative of human clinical outcomes. [‡]The technique used to fixate the mesh (suture and/or tacks) is left up to the surgeon. The textile self-gripping feature makes it possible to position the mesh without fixation, depending on the size of the defect, the hernia position, and the quality of the anatomical structures. [§]Applicable to PP1208DL, PP1208DR, PP1509G. ^ΩA study conducted by M. Kapischke showed a beneficial impact of the self-gripping mesh on pain score and a lower dosing of postoperative analgesics during hospital stay compared to a sheet of polypropylene mesh. ^{††}The textile self-gripping feature makes it possible to position the mesh without fixation, depending on the size of the defect, the hernia position, and the quality of the anatomical structures. ^{‡‡}Based on animal study, not necessarily indicative of human clinical outcomes. ^{§§}Based on preclinical data, not necessarily indicative of human clinical outcomes. ^{ΩΩ}Based on feedback from 6 surgeons, conducted in lab setting with cadaver. Surgeons compensated.

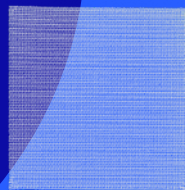
Risk statement: Mesh complications may include but are not limited to acute and chronic pain, extrusion/erosion, hematoma, infection, inflammation, recurrence, and/or seroma. See full risk statements on last page.

Features and benefits

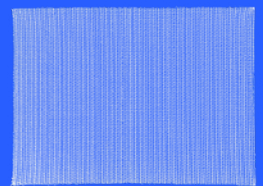
Expanding to meet all of your ventral hernia repair needs

Gain the flexibility you've been waiting for. Introducing five large polypropylene mesh sizes to fit all sizes of ventral hernia defects^{2-4,†,‡,§:}

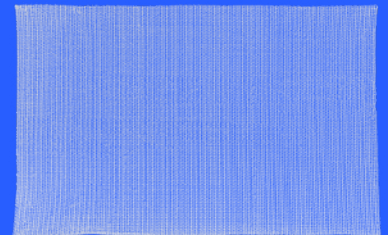
- 15 × 15 cm
- 20 × 15 cm
- 30 × 20 cm
- 30 × 30 cm
- 40 × 30 cm



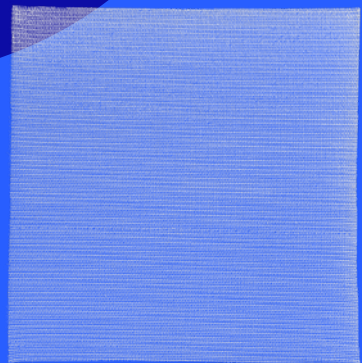
15 × 15 cm



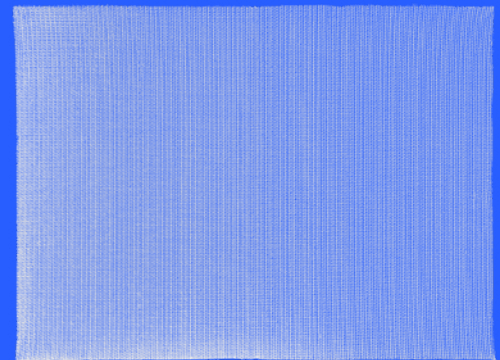
20 × 15 cm



30 × 20 cm



30 × 30 cm



40 × 30 cm

†Based on preclinical data, not necessarily indicative of human clinical outcomes. ‡Based on feedback from 6 surgeons, conducted in lab setting with cadaver. Surgeons compensated. §Applicable to PP1515G, PP2015G, PP3020G, PP3030G, PP4030G. ¶Based on benchtop data, not necessarily indicative of human clinical outcomes.

††The technique used to fixate the mesh (suture and/or tacks) is left up to the surgeon. ‡‡The textile self-gripping feature makes it possible to position the mesh without fixation, depending on the size of the defect, the hernia position, and the quality of the anatomical structures. §§Based on feedback from 6 answers, 5 surgeons (83%), conducted in lab setting with cadaver. Surgeons compensated.

Risk statement: Mesh complications may include but are not limited to acute and chronic pain, extrusion/erosion, hematoma, infection, inflammation, recurrence, and/or seroma. See full risk statements on last page.

- Uniform fixation across the mesh surface^{1,¶,††,‡‡}
- Reduced need for additional fixation,^{15,¶,‡‡} eliminating associated pain^{6,8,10-12,14-16,‡‡}
- Faster mesh placement (including fixation) compared to flat sheet meshes^{2,†,‡‡}

Clinical overview

Clinical confidence. Economic efficiency.

ProGrip™ polypropylene self-gripping mesh accommodates physicians in their surgical techniques and clinical cases through its enablement of extraperitoneal mesh placement, its quality of perioperative handling, and its compatibility with open surgical approaches.^{4,6,8,14}

**60%
stronger**

peeling strength
than fibrin
sealant fixation
at 8 weeks^{17,18,†,‡,§}

Position and place
in less than

**60
seconds^{19,†}**

**Significantly
shorter**

procedure times than
sutured mesh^{10,13,14,†}

Product specifications

Mesh ²⁰	2-D textile structure with grips
Raw material ²⁰	Polypropylene (PP)
Mono / multifilament ²⁰	Monofilament Ø0,10 mm
Grips ²⁰	Polylactic acid (PLA)
Mono / multifilament ²⁰	Monofilament Ø0,15 mm
Contribution to mesh fixation ²¹	> 8 weeks
Pore size ^{22,Ω}	1.6 mm × 0.6 mm
Thickness ^{22,Ω}	1.3 mm
Surface density (before grips absorption) ^{22,Ω}	76 g/m ²
Surface density (after grips absorption) ^{23,Ω}	43 g/m ²

†Applicable to PP1208DL, PP1208DR, PP1509G. ‡Based on preclinical animal and benchtop studies, not necessarily indicative of human clinical outcomes. §ProGrip™ self-gripping polypropylene mesh and ProGrip™ self-gripping polyester mesh have equivalent gripping properties. ProGrip™ self-gripping polyester mesh has stronger peel strength than Bard™ soft mesh fixed to soft tissue using absorbable Baxter Tisseel™ glue at eight weeks. Accordingly, ProGrip™ self-gripping polypropylene mesh has stronger peel strength than Bard™ soft mesh fixed to soft tissue using absorbable Baxter Tisseel™ glue at eight weeks. ΩMean value measured on one batch. Values may differ slightly within and between batches, or by using an alternate testing method.

Risk statement: Mesh complications may include but are not limited to acute and chronic pain, extrusion/erosion, hematoma, infection, inflammation, recurrence, and/or seroma. See full risk statements on last page.

Ordering information

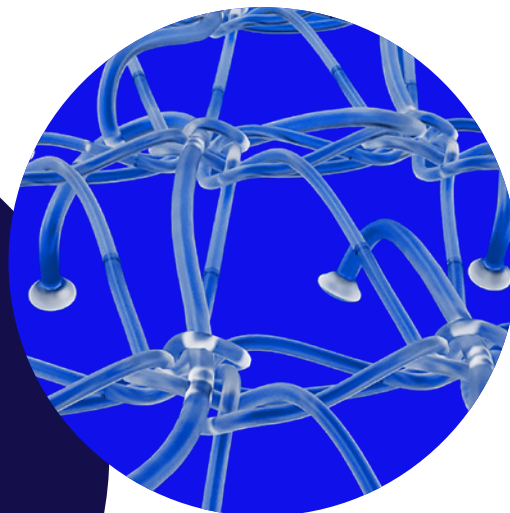
Sizes you need.

By putting more choice in surgeons' hands, the ProGrip™ self-gripping polypropylene mesh portfolio has you and your patients covered for hernia repairs large and small.

Item number	Description	Dimensions	Shape	Side	Qty.
PP1208DL	ProGrip™ self-gripping polypropylene mesh	12 cm × 8 cm (4.7 in × 3.0 in)	Elliptical pre-cut with flap, marking	Left	1
PP1208DR	ProGrip™ self-gripping polypropylene mesh	12 cm × 8 cm (4.7 in × 3.0 in)	Elliptical pre-cut with flap, marking	Right	1
PP1509G	ProGrip™ self-gripping polypropylene mesh	15 cm × 9 cm (6.0 in × 3.5 in)	Rectangular	N/A	1
PP1515G	ProGrip™ self-gripping polypropylene mesh	15 cm × 15 cm (5.9 in × 5.9 in)	Square	N/A	1
PP2015G	ProGrip™ self-gripping polypropylene mesh	20 cm × 15 cm (7.9 in × 5.9 in)	Rectangular	N/A	1
PP3020G	ProGrip™ self-gripping polypropylene mesh	30 cm × 20 cm (11.8 in × 7.9 in)	Rectangular	N/A	1
PP3030G	ProGrip™ self-gripping polypropylene mesh	30 cm × 30 cm (11.8 in × 11.8 in)	Square	N/A	1
PP4030G	ProGrip™ self-gripping polypropylene mesh	40 cm × 30 cm (15.7 in × 11.8 in)	Rectangular	N/A	1

Gain the confidence of a technology used, tested, and trusted globally.²⁴⁻²⁸

With more than 5 million implants used in 27 countries, ProGrip™ technology is trusted by surgeons worldwide to provide a secure hernia repair²⁴⁻²⁸ – delivering the improved comfort and recovery²⁴⁻²⁸ necessary to help your patients get moving again.



Inguinal risk statement (PP1208DL, PP1208DR, PP1509G): Mesh complications may include but are not limited to acute and chronic pain, extrusion/erosion, hematoma, infection, inflammation, recurrence, and/or seroma. ProGrip™ self-gripping polypropylene mesh is not intended to be used for laparoscopic hernia repair. Do not place the mesh in direct contact with the viscera. Direct contact with the viscera may lead to risks of adhesions, fistula formation, and bowel obstruction. Do not implant the mesh in an intra-peritoneal position. When implanting in a pre-peritoneal site, the mesh shall be placed with the grips towards the muscle fascia with the mesh completely covered with peritoneum.

Ventral risk statement (PP1515G, PP2015G, PP3020G, PP3030G, PP4030G): Mesh complications may include but are not limited to acute and chronic pain, extrusion/erosion, hematoma, infection, inflammation, recurrence, and/or seroma. The compatibility of ProGrip™ self-gripping polypropylene mesh with trocars and laparoscopic instruments has not been established. Do not place the mesh in direct contact with the viscera. Direct contact with the viscera may lead to risks of adhesions, fistula formation, and bowel obstruction. Do not implant the mesh in an intra-peritoneal position. When implanting in a pre-peritoneal site, the mesh shall be placed with the grips towards the muscle fascia with the mesh completely covered with peritoneum.

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