

V-LOC™ 90 WOUND CLOSURE DEVICE FOR C-SECTION



Has demonstrated significantly higher residual myometrium thickness (4.9 mm versus 4.2 mm)^{1,2}



Less intraoperative bleeding when closing uterine wall defects.⁴⁻⁸



Reduce the incidence of uterine niche (scar defects).



Delivers superior patient outcomes by eliminating knot-related complications and may reduce the suturing time of a procedure.⁹



Reduction in the time required to close uterine wall defects.^{*,4,5,6}



Is easier to use and is associated with significantly lower surgical difficulty in uterine wall repairs.^{4,6}

* As compared to conventional sutures

Medtronic

1. Alessandri, F., Ferrero, S., Altieri, M., Evangelisti, G., Centurioni, M. G., & Barra, F. (2020). Incidence and ultrasonographic characteristics of cesarean scar niches after uterine closure by double-layer barbed suture: a prospective comparative study. *Fertility and Sterility*, 114(3), e54.
2. Roberge S, Demers S, Girard M, et al. Impact of uterine closure on residual myometrial thickness after cesarean: a randomized controlled trial. *Am J Obstet Gynecol*. 2016;214(4):507.e1-507.e6. doi:10.1016/j.ajog.2015.10.916
3. Alessandri F, Evangelisti G, Centurioni MG, Gustavino C, Ferrero S, Barra F. Fishbone double-layer barbed suture in cesarean section: a help in preventing long-term obstetric sequelae?. *Arch Gynecol Obstet*. 2021;304(3):573-576. doi:10.1007/s00404-021-06121-8
4. Alessandri F, Remorgida V, Venturini PL, Ferrero S. Unidirectional barbed suture versus continuous suture with intracorporeal knots in laparoscopic myomectomy: a randomized study. *J Minim Invasive Gynecol*. 2010;17(6):725-729. doi:10.1016/j.jmig.2010.06.007
5. Angioli R, Plotti F, Montera R, et al. A new type of absorbable barbed suture for use in laparoscopic myomectomy. *Int J Gynaecol Obstet*. 2012;117(3):220-223. doi:10.1016/j.ijgo.2011.12.023
6. Song T, Kim TJ, Kim WY, Lee SH. Comparison of barbed suture versus traditional suture in laparoendoscopic single-site myomectomy. *Eur J Obstet Gynecol Reprod Biol*. 2015;185:99-102. doi:10.1016/j.ejogrb.2014.11.022
7. Chan, C., 2013. The experience of the v loc™ 180 wound closure device used in laparoscopic myomectomy. *Fertility and Sterility*. Volume 100, Issue 3, S396
8. Iefimenko A, Bondarchuk V, Zhegulovich O, et al. The benefits of V loc suture during laparoscopic myomectomy. 21st Annual Congress ESGE September 11-14, 2012, Paris. *Gynecol Surg* 9, 1137 (2012). <https://doi.org/10.1007/s10397-012-0767>
9. Song T, Kim TJ, Kim WY, Lee SH. Comparison of barbed suture versus traditional suture in laparoendoscopic single-site myomectomy. *Eur J Obstet Gynecol Reprod Biol*. 2015;185:99-102.

Medtronic

Do not tie knots. Tying knots may damage the barbs and potentially reduce their effectiveness. Adverse effects include but not limited to wound dehiscence, failure to provide adequate wound support in sites where expansion, stretching or distention occur. Please refer to IFU for complete contraindication and risk information.

© 2022 Medtronic. All rights reserved. Medtronic, Medtronic logo and Further, Together are trademarks of Medtronic. All other brands are trademarks of a Medtronic company. EMEA-WC-2200008 - 22-weu-v-loc-in-c-section-flyer-6370636

[medtronic.com/covidien/uk](https://www.medtronic.com/covidien/uk)