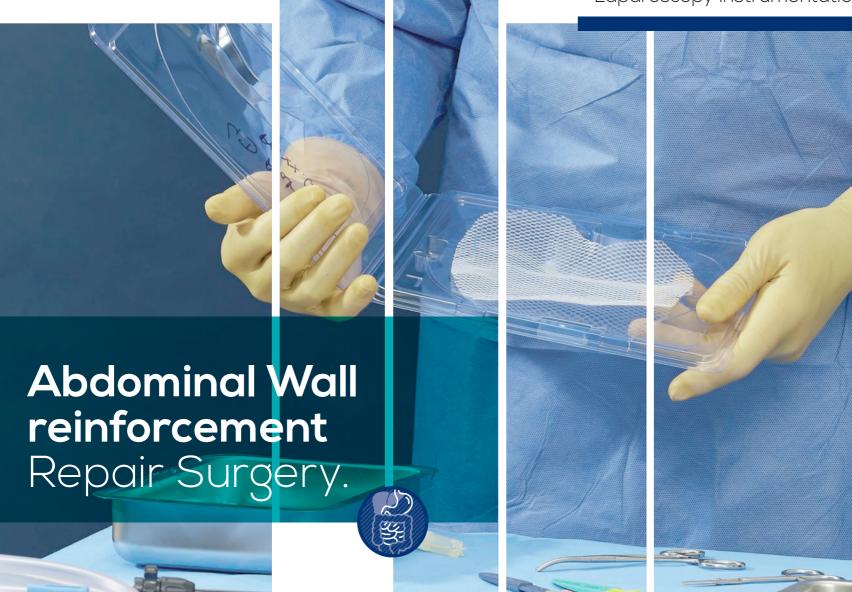


Hernia Mesh Fixation (Glue & Sutures) Laparoscopy Instrumentation





Our range of wall reinforcement implants Promesh® SURG

The solution to accompany your procedures in parietal repair.













- O HERNIA
 REPAIR
 BY
 LAPAROSCOPY
- Anatomical Mesh
- Partially Absorbable Mesh

- HERNIA
 REPAIR
 BY
 OPEN SURGERY
- Light Mesh
- Partially Absorbable Mesh

- VENTRAL
 HERNIA /
 INCISIONAL
 HERNIA
- Partially Absorbable Mesh
- Two-sided Mesh

PLLA (Poly-L-Lactic Acid), product of future?

What is PLLA?

The poly-L-Lactic acid (**PLLA**) is a biomaterial, an absorbable polymer of the naturally occurring amino acid lactate, which has a slow degradation profile. It has generated interest in tissue engineering because of its use as scaffolding for the cellular regeneration of bone, cartilage, vessels, nerves and muscle.

Why polypropylene knitted with PLLA?

- · Less tissue adherence*.
- · Less intracorporal shrinkage*.
- · Less inflammation, and cell immune response*.
- Greater fibrosis reaction than with conventional groin hernia prosthesis*.

The products of the Promesh®SURG range.







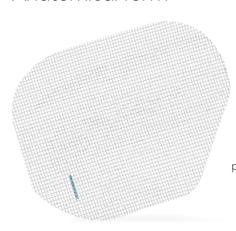




Inguinal Hernia Repair in Laparoscopic Surgery.

Promesh®SURG FLEXIL

Anatomical form





Composed of Polyester with a dimethyl siloxane impregnation provide an excellent memory effect.

Flexible 3D structure ensures an easy positioning and optimized tissue integration.









Code Size in cm RIGHT PSFX1214FR 12 x 14 PSFX1216FR 12 x 16 PSFX1214FL 12 x 14 PSFX1216FL 12 x 16

Promesh®SURG ST

Anatomical form



Anatomical structure in monofilament knitted polypropylene 100g/m².



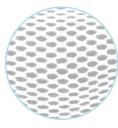
Code	LEFT I Size in cm	RIGHT I Size in cm
PSSTANATSL	10,5 x 14	_
PSSTANATML	12 x 15	-
PSSTANATLL	12 x 17	-
PSSTANATSR	-	10,5 x 14
PSSTANATMR	-	12 x 15
PSSTANATLR	-	12 x 17

PLLA

Promesh®SURG ABSO ANAT

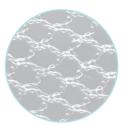
Anatomical form

Partially absorbable mesh.



75 % PLLA
Poly-L-Lactic Acid
25 % PP
Polypropylene

120 g/m²



30 g/m²

Medial landmark for pubis for **quick and precise** positioning

- · Wave design for spermatic cord
- Transparent material to easily identify anatomy and facilitate mesh placement.
- Large flat surface for wide cover of direct and indirect hernia site.

Code	LEFT I Size in cm	RIGHT Size in cm
PSABANATSL	10,5 x 14	-
PSABANATML	12 x 15	-
PSABANATLL	12 x 17	-
PSABANATSR	-	10,5 x 14
PSABANATMR	-	12 x 15
PSABANATLR	-	12 x 17

Inguinal Hernia Repair in Open Surgery.

Promesh®SURG

The range offers various shapes to match patient anatomy for the Lichtenstein technique.



Standard
Promesh® SURG ST

Standard Polypropylene / 100 g/m²

Code	Size in cm	Form
PSST0510PC	5 x 10	Pre-cut
PSST0611PC	6 x 11	Pre-cut
PSST0613PC	6 x 13	Pre-cut
PSST0611RT	6 x 11	Rectangle
PSST0715RT	7 x 15	Rectangle
PSST1015RT	10 X 15	Rectangle

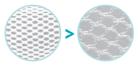


Promesh® SURG LI

Light Polypropylene / 37,8 g/m²

Code	Size in cm	Form	
PSLI0613PC	6 x 13	Pre-cut	-
PSLI0812SH	8 x 12	Shell/obus	





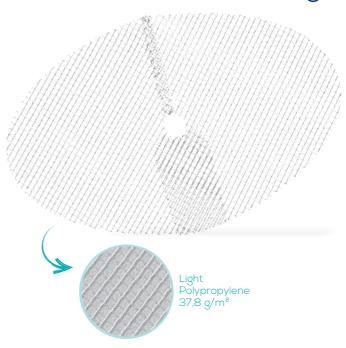
Partially absorbable
Promesh® SURG ABSO

25 % PP + 75 % PLLA

> Before resorption: 120 g/m² > After resorption: 30g/m²

Code	Size in cm	Form	
PSAB0613PC	6 x 13	Pre-cut	_
PSAB0812SH	8 x 12	Shell/obus	$\vdash \vdash$
PSAB1215RS	12 x 15	Round side	
PSAB1717SQ	17 x 17	Square	<u> </u>

Promesh®SURG Pre-cut with Flap design



The ovoid-shaped Promesh®SURG reinforcement implant is split perpendicularly and perforated with a flap design to tie without compressing the spermatic cord.

Code	Size in cm	Form	
PSLI812PC	8 x 12	With Flap	-(A)

Promesh®SURG DOME

Partially absorbable for the Plug Technique designed to repair inguinal.





Dome
90 % PLLA
Poly-L-Lactic Acid
10 % PP
Polypropylene



Geodesic Dome structure and a gripping tag allowing easy handing and faciliting introduction in hernia orifice.



Evolutive Dome shape concept

To combine reduction of implanted material and intra-abdominal pressure resistance.

	Implantation.	·	6 Months after.
External abdominal	Once the dome is placed and fixed, the pre-cut mesh is positioned in the anterior space beneath the aponeurosis of the external abdominal oblique muscle and in front of the transversalis fascia.	After implantation, dome resorption will start. Structure will slowly change from a dome shape to a flat shape and merge with the transversalis fascia.	The dome flat shape below and precut mesh above conception is designed to offer patient benefit of a tension-free double reinforcement with increased strength and pain - free groin.
oblique aponeurosis		 	
Transversalis fascia			
Peritoneum		 	1 1 1 1 1



Code	Dome diameter in cm
PSABDO2PCS	ø 2,4
PSABD03PCS	øЗ
PSABDO4PCS	ø 3,8



Code	Dome diameter in cm
PSABDO2PCL	ø 2,4
PSABD03PCL	øЗ
PSABDO4PCL	ø 3,8

Ventral Hernia Repair-Intraperitoneal.

Promesh®SURG INTRA 120g/m²

Easy introduction through the trocar and easy deployment due to its thinness in laparoscopic approach.







Good tissue integration thanks to the macroporous monofilament polypropylene face. Adhesions on the viscera limited thanks to the smooth surface of ePTFE (visceral side). Good and safe coverage of the defect thanks to the cross-shaped marker.



Code	Size in cm	
PSIN12DIAM	12	_
PSIN1015RS	10 x 15	
PSIN1520RS	15 x 20	
PSIN2025RS	20 x 25	
PSIN1515SQ	15 x 15	
PSIN2020SQ	20 x 20	
PSIN3030SQ	30 x 30	
PSIN3050RT	30 x 50	

Promesh®SURG UMB

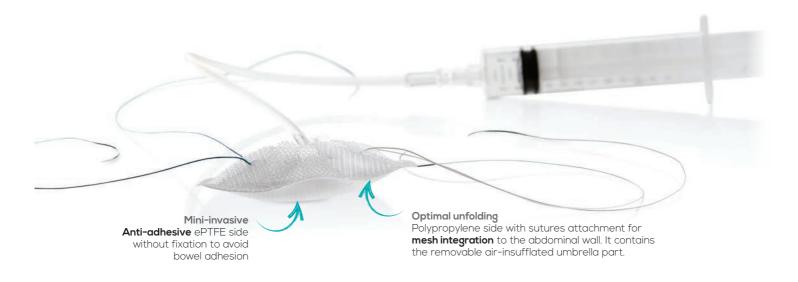
Device is a ready to use kit which simplifies the surgical procedure to ensure a deep reconstruction with a mini-invasive approach.

Easy fixation

Two pre-attached sutures help the surgeon to immediatly fix the mesh.

Time saving

The **inflation serynge** for integrated ballon comes with the kit.



Mesh is slipped through the hernia orifice to position it totally intra-peritonealy. By using air-insufflating syringe it, ensures the prosthesis remains centred above the hernia orifice.

Fixation is performed with the pre-attached sutures passing through the aponeurosis. Umbrella
is deflated and
removed by
ensuring the
perfect position
of the mesh.

Code	Diameter in cm
PSUMBIN05D	ø 5
PSUMBIN07D	ø 6,8
PSUMBIN09D	ø 9

Ventral Hernia Repair-Extraperitoneal.

Promesh®SURG ST



A standard knitted polypropylene monofilament (100g/m²). For the treatment of extraperitoneal ventral hernia.

Code	Size in cm
PSST1015RT	10 x 15
PSST1530RT	15 x 30
PSST2536RT	25 x 36
PSST1515SQ	15 x 15
PSST3030SQ	30 x 30
PSST4545SQ	45 x 45

Promesh®SURG LI



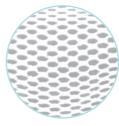
A lightweight knitted polypropylene monofilament (37.8 g/m²). For the treatment of extraperitoneal ventral hernia.

Code	Size in cm	
PSLI1215RS	12 x 15	<u>()</u>
PSLI1530RT	15 x 30	
PSLI1515SQ	15 x 15	
PSLI3030SQ	30 x 30	

Promesh®SURG ABSO VENT

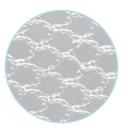


Promesh®SURG ABSO VENT is a hydrophilic mesh partially-absorbable composed of a combination of Poly-L-Lactic Acid and a mid-weight non-absorbable polypropylene. It is designed for the extraperitoneal treatment of **ventral and incisional hernias by open and laparoscopic approach**.



60 % PLLA
Poly-L-Lactic Acid
40 % PP
Polypropylene

155 g/m²



65 g/m²

Code	Size in cm	
PSABVT12DI	12	¬—()
PSABVT1515	15 x 15	
PSABVT3030	30 x 30	
PSABVT1530	15 x 30	
PSABVT2025	20 x 25	

Fixation & Closure.

Absorbable sutures

Time management in your hands



Optime R®

- · Undyed Polyglycolic Acid (PGA) braid.
- Solution for short-term support (10-14 days) and rapid absorption in in soft tissue approximation and/or ligation.



Optime®

- Violet/Undyed Polyglycolic Acid (PGA) coated braid.
- Solution for mid-term approximation and/or ligation of tissue in general surgery (28-35 days).



Advantime®

- Violet/Undyed Poliglecaprone 25 (PGA-CL) monofilament.
- Solution for mid-term approximation and/or ligation of tissue in general surgery. (21-28 days).
- Available with Extracut® cutting needle needle with precision point.



Monotime®

- · Violet Polydioxanone monofilament.
- Solution for long-term approximation and/or ligation of tissue (until 6 weeks) in general surgery.

Non-Absorbable sutures

Stable resistance with time



Corolène®

- Undyed/Blue Polypropylene monofilament.
- Intended for use in general soft tissue approximation and/or ligation.
- Shape memory & Great glide.



Filapeau®

- Blue Polyamide monofilament.
- Intended for use to suture superficial cutaneous skin and in plastic surgery.
- Good tolerance for the tissue.

Exemple of use

Peritoneal closure	Advantime®	USP 0 - 2/0, 1/2c, 25 at 40 mm
Aponeurosis closure	Monotime®	USP 2/0 - 3/0, 1/2c, 35 at 65 mm
Deep subcutaneous	Optime®	USP 2/0 - 2, 1/2c, 26 at 40mm
Superficial subcutaneous	Optime R®	USP 3/0 - 2/0, 3/8c, 13 at 26mm
Skin	Advantime or Filapeau or	USP 3/0 - 2/0, 3/8c, 13 at 26 mm
Reinforcement fixation	Corolene® or Optime®	USP 2/0; 1/2c

Ifabond® Surgical Glue





Applier: Adequate dimension for different surgeries

- Open Surgery: 15 cm
- Laparoscopic Surgery: 37 cm or 45 cm

Distal tip of each applier can be bent for a better Ifabond® delivery.



Designed for surgeon.

- Immediate polymerization with visible process (glue whitening color).
- · Adhesive effect after only 30 seconds**.
- Different sizes of appliers with curvable distal tip.

Secured for patient.

- · Atraumatic device, no risk of transfixion.
- Partial resorption** from 3 to 6 months.
- Total resorption* from 6 to 12 months.

Optimized for OR staff.

- Ready to use product: no mix nor preparation of component is requested.
- All in one kit: glue vial, syringe and extraction needle included.
- 3 volumes of glue available to match with surgery needs (waste prevention).

digestive surgery,
Ifabond® is used for
whatever the approach.





V	sc	er	a
	70		

n digestive surgery.

Code	Description	Qty/box
IB05-IB-IB+	N-hexyl cyanoacrylate glue + 2.5ml Luer-lock syringe + 18G puncture needle	6
MB15G-37G-45G	Drop-by-drop applicator for IFABOND® glue Length 15-37-45 cm	12

Visibi<u>lity & Opening</u>.

Pneumoperitoneum needle

Single use insufflation needles.



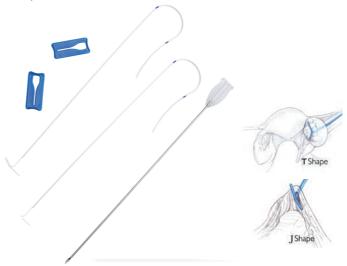
Ergonomics for the surgeon.

- · Ergonomic body.
- · Perforation coloured indicator.
- Standard and bariatric lengths available.

Code	Diameter x length in mm	Qty/box
AIG2120	2,1 x 120	25
AIG2150	2,1 x 150	25

T'Lift® Organ suspensor

Single use tissue retraction system.



Operating space opener device thanks to the organs suspension, facilitating then the access and visibility for the surgeon.

- Sigmoid colon: TRENDELENBURG position angulation reduction.
- Peritoneum (in laparoscopic & robotic surgeries).
- · Avoid the use of an additional trocar or grasping forceps.
- Facilitate the right positionning of wall reinforcement meshes before their fixation.

ENDO-CAN

Wide portfolio.



Code	Description	Diameter x length in mm	Spike connector	Qty/box
CAN2505P	Anti-drip system	5 x 330	1	10
CAN25010	Large diameter	10 x 330	1	10
CAN2505GL	Long length	5 x 450	1	10
CAN10	Single canula compatible	5 x 330	-	10

Other references available: CAN2505, CAN2505DP

ASI Advanced Suction Irrigator Single use suction irrigation set.



Code	Description	Diameter x length in mm	Spike connectors	Qty/box
ASI2200TB	ASI Advanced Suction Irrigation	5 x 385	2	12

Cutting, **Dissection** & Grasping.



Incut: Monopolar scissors

Single use laparoscopic scissors.



Endohook

Single use laparoscopic L-hooks.

Short protective sheathing.

For dissection
 & coagulating.



Handle Ergonomy.

- · Single digit handle for diagonal orientation.
- Two digits handle design for horizontal orientation.

Positioning & Cutting.

- 360° blades rotating wheel.
- Holding anatomical parts before the cutting due to specific blades sharpening/reworking.

Code	Diameter x length in mm	Connector	Handle	Qty/box
IC5330	5 x 330	Radial ø 4 mm	Simple digit	25
IK5330	5 x 330	Axial ø 4 mm	Double digit	25
C5470	5 x 470	Radial ø 4 mm	Simple digit	5

Long protective sheathing.

· For dissection only.



Resistance.

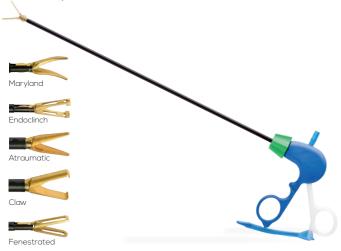
• Tip mechanical resistance >10 kgs*.



Code	Sheathing	Diameter x length in mm	Qty/box
H5330	Short	5 x 330	25
H5330L	Long	5 x 330	25

Endogrip

Monopolar single use dissector/ forceps.



Ergonomics for the surgeon.

- Safe closing/holding system: ratchet type.Excellent electrical conductivity & oxydation prevention: jaws gilding!
- · Quick instrument identification during the procedure: knob color coding.

Code / Name	Jaws length	Colour coding	Ratchet	Monopolar connector
MD5330 / Maryland	21 mm	Yellow	No	Yes
ECS5330 / Endoclinch	21 mm	Green	Yes	No
A5330 / Atraumatic	17 mm	Green	Yes	Yes
G5330 / Claw	17 mm	Purple	Yes	Yes
F5330 / Fenestrated	17 mm	Green	Yes	Yes

Kali®

Single use laparoscopic bipolar forceps.



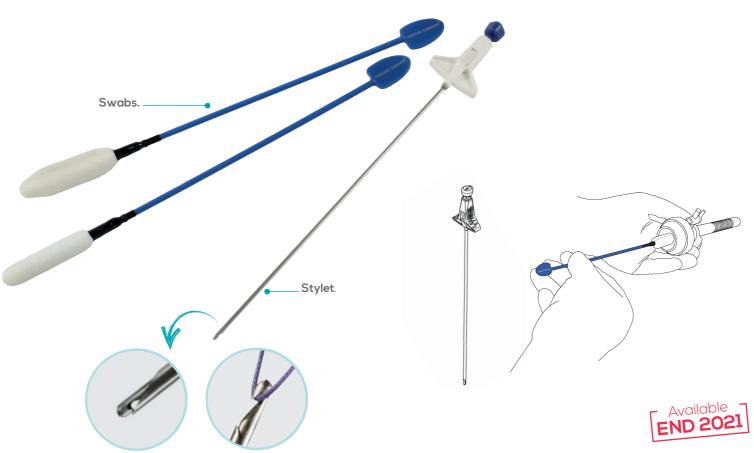
Code	Diameter x length in mm	Qty/box
BP5330	5 x 330	5
MC91926	Adapter/Connector	1

Diameter x length: 5 x 330 mm • Qty/box: 5.

Ventral hernias & Eventration prevention.



Port ClosOR Pro



Code	Description	Qty/box
PORT CLOS OR Pro (PC-120)	Stylet length 150mm 2 swabs (ø 8 & 13mm)	10

References.

Meshes.

Promesh®SURG FLEXIL3

INDICATIONS

Repair and parietal reinforcement of inguinal, crural and ventral hernias.

Promesh®SURG ABSO & ABSO ANAT3

INDICATIONS

Promesh®SURG ABSO & ABSO ANAT are indicated in repair and reinforcement of inguinal and femoral hernias.

Promesh®SURG ABSO VENT3

INDICATIONS

Promesh®SURG ABSO VENT is indicated in repair of ventral hernia or other fascial defects that require the addition of an extraperitoneal reinforcing or bridging material to obtain the desired surgical result.

Promesh®SURG DOME3

INDICATIONS

Promesh®SURG DOME device is indicated in repair and surgical reinforcement of inguinal and femoral hernias.

Promesh®SURG UMB3

INDICATIONS

Promesh®SURG UMB devices are indicated in all forms of hernia repair requiring reinforcement with non-absorbable support material.

Promesh®SURG ST³

INDICATIONS

Repair and parietal reinforcement of inguinal, crural and ventral hernias.

Promesh®SURG LI3

INDICATIONS

Repair of hernias or other fascial defects that require the addition of reinforcing material to achieve the desired surgical result.

Promesh®SURG INTRA 120g/m23

INDICATIONS

Promesh®SURG INTRA implants are indicated in parietal reinforcement and repair of umbilical and ventral hernias.

Sutures.

Optime® 2 1a

INDICATIONS

The synthetic absorbable surgical sutures Optime® R are indicated for use in soft tissue approximation, when short time wound support is acceptable and when rapid absorption is needed. They are indicated for general surgery in skin and mucous membrane closure, particularly in pediatric surgery, stomatology, episiotomies, circumcisions and in ophthalmic surgery for conjunctival sutures.

Optime®la

INDICATIONS

The synthetic absorbable surgical sutures Optime® are indicated for use in general tissue approximation and/or ligation, including use in ophthalmic surgery.

Advantime®1a

INDICATIONS

The synthetic absorbable surgical sutures Advantime® are indicated for use in general soft tissue approximation and/or ligation where an absorbable suture is indicated.

Monotime^{®la}

INDICATIONS

The synthetic absorbable surgical sutures Monotime® are indicated for use in general soft tissue approximation and/or ligation, particularly when long time support is required (until six weeks), including use in pediatric cardiovascular and vascular surgery, in peripheral vascular surgery, in ophthalmic surgery and in microsurgery.

Corolène®1a

INDICATIONS

Sutures are intended for use in general soft tissue approximation and/or ligation, including use in cardiovascular and vascular surgery, in ophthalmic surgery, in plastic surgery and in neurological surgery.

Corolene® sutures can be used for laparoscopic surgery and abdominal aorta surgery.

Filapeau®1c

INDICATIONS

Sutures are intended for use to suture superficial cutaneous skin and in plastic surgery.

References.

Surgical Glue.

Ifabond®1a

INDICATIONS

Ifabond® surgical glue is intended to be used during surgical procedures, in open surgery and in laparoscopic surgery, for its adhesive and hemostatic sealant actions. These surgeries for the adult population include digestive and visceral surgery for the treatment of hernia, bariatric surgery for sleeve-bypass, urological and gynecological surgery with sacrocolopopexy and breast surgery for mastectomy and axillary curage. The glue can be used in the pediatric population for circumcision.

Laparoscopic Instruments.

Single use pneumoperitoneum needles1b

INDICATIONS

The Peters Surgical Pneumoperitoneum Needle is a sterile, single-use device intended to be inserted percutaneously into the peritoneal cavity for insufflation of carbon dioxide to create a pneumoperitoneum prior to trocar placement during laparoscopic procedures.

T'Lift® Organ suspensor¹b

INDICATIONS

The T'Lift® is an instrument exclusively designed for laparoscopic surgery. It should only be used by qualified practitioners having gained due experience thereof. The T'Lift® is designed to enable the suspension and presentation of anatomical sections during laparoscopic surgery.

ENDO-CAN¹¹

INDICATIONS

The irrigation-suction kit with cannula is a single-use device for laparoscopic surgery, serving to cleanse the abdominal cavity and to suck up any waste. It should only be used by qualified practitioners having gained due experience.

ASI (Advanced Suction Irrigator)12

INDICATIONS

The suction/irrigation kit is indicated for use in laparoscopy surgery to suction residual fluids and for irrigation during a procedure.

Incut Scissors^{1c}

INDICATIONS

Single-use laparoscopic instruments are solely designed for laparoscopic surgery. The Incut monopolar scissors are designed for mechanical cutting and dissection, incision and monopolar coagulation with high frequency current.

Endohook Monopolar Hook^{1c}

INDICATIONS

Single-use laparoscopic instruments are solely designed for laparoscopic surgery. ENDOHOOK hooks are designed for mechanical dissection, monopolar incision and monopolar coagulation with high frequency current.

$\textbf{Endogrip\,Monopolar\,dissector\,\&\,grasping\,forceps}^{\mathtt{lc}}$

INDICATIONS

Single-use laparoscopic instruments are solely designed for laparoscopic surgery. ENDOGRIP Monopolar dissector are designed for mechanical dissection, atraumatic prehension of tissues and monopolar coagulation via high-frequency current. ENDOGRIP grasping forceps are designed for mechanical dissection, traumatic or atraumatic prehension of tissues and monopolar coagulation via high-frequency current (expect for ref. ECS5330).

Kali® Bipolar Forceps¹c

INDICATIONS

The bipolar forceps is solely designed for endoscopic surgery. It should only be used by qualified practitioners having gained due experience thereof. The bipolar forceps is designed to grasp, dissect and coagulate skin tissues.

Adapter²¹: Only skilled medical personnel are permitted to use the electrosurgical cables/ adapters. Electrosurgical cables/adapters are used to connect electrosurgical accessories for bipolar application to an electrosurgical generator. Follow the instructions for use of the corresponding electrosurgical accessory and of the generator used.

SUTURE PassOR Pro™10

INDICATIONS

The Suture PassOR PRO is indicated to be used during endoscopic and laparoscopic surgery to keep trocar valves free of debris and facilitate the placement of sutures for secure closure to trocar sites as determined by a licensed physician familiar with the possible side effects, typical finding, limitations, indications or contraindications of performing such procedure.

Port ClosOR Pro™10

INDICATIONS

The Port ClosOR PRO $^{\mathbf{m}}$ is indicated to be used during endoscopic and laparoscopic surgery to keep trocar valves free of debris and to facilitate the placement of sutures for secure closure to trocar sites as determined by a licensed physician familiar with the possible side effects, typical finding, limitations, indications or contraindications of performing such procedure.

- Medical Device Class III CE 0459
 Manufacturer: Peters Surgical.
- 1b. Medical Device Class IIa CE 0459 Manufacturer: Peters Surgical.
- 1c. Medical Device Class Ilb CE 0459 Manufacturer: Peters Surgical.
- 3. Medical Device Class IIb & III CE 1639 Manufacturer: Cousin Biotech SAS.
- 4. Medical Device Class IIb CE 1014.
- 10. Medical Device Class IIa CE 2797 Manufacturer: The OR Company.
- 11. Medical Device Class IIa CE 0459 Manufacturer: PROMEPLA
- 12. Medical Device Class IIa CE 2460 Manufacturer: Advanced Medical Design Co.
- 21. Dispositif Medical Classe I
 CE
 Fabricant : MED-CONTACT GmbH

Read carefully the instructions of the devices before use.

Peters Surgical Headquarters & French Affiliate

Immeuble AURELIUM, 1 cours de l'Île Seguin, 92100 Boulogne-Billancourt, France +33 (0)1 48 10 62 62 peters@peters-surgical.com

Peters Surgical Polska

01-756 Warszawa, ul. Przasnyska 6B, Poland +48 22 462 42 52

Peters Surgical India Pvt.ltd.

Emaar Digital Greens, Unit No. 508-511 5th Floor, Tower-A, Sector-61 Golf Course Extension Road Balarampur Naya, Gurgaon 122102 Haryana India +91-11-46564700

Peters Surgical Benelux

Beelerstrooss, 2 (entrée B) L-9991 - Weiswampach Grand Duché du Luxembourg +352 26 90 80 13

Peters Surgical USA - Vitalitec Inc

10 Cordage Park Circle, Suite 100 Plymouth, MA 02360 USA +1 508-747-6033

Read the instructions carefully before using the products.

Presentation to Peters Surgical employees and distributors as well as health care professionals.





peters-surgical.com