

*Staying ahead
of the curve*

Open Ventral
Incisional Hernia
Fixation



Reducing the risk of
post-op complications
in open ventral
incisional hernia
repair



LIQUIBANDFIX8®
OPEN HERNIA MESH FIXATION DEVICE

1.5g

Sutures, non-absorbable tacks, and absorbable tacks are some of the more penetrative techniques of hernia mesh fixation which were correlated with:

- Acute Post-Operative Pain¹
- Chronic Pain¹
- Colonic & Small Bowel Fistula Formation¹

Atraumatic mesh fixation with LIQUIBANDFIX8[®] offers significant patient advantages in terms of reduction in nerve injuries and chronic pain associated with penetrative open hernia repair.

“The **LIQUIBANDFIX8** Open device was simple to prime and use in open ventral hernia repair. Mesh fixation was easy and allowed fixation at multiple angles. One device was enough to complete the procedure. There was a significant reduction in operative time compared to mechanical mesh fixation technique.”²

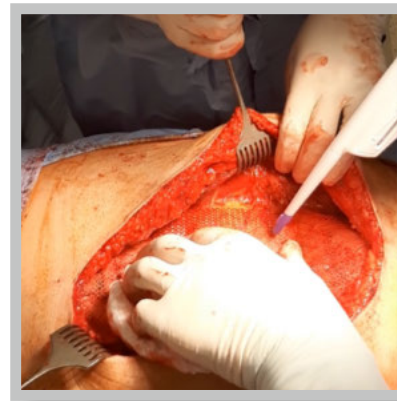


Fig (1) demonstrating LIQUIBANDFIX8[®] device in use

LIQUIBANDFIX8[®], using cyanoacrylate glue, offers atraumatic and safe mesh fixation and is associated with a low risk of post operative complications.



INNOVATIVE TIP DESIGN ³

- Removable tip for topical wound closure and mesh fixation
- Designed to project liquid anchors drop by drop
- Allows topical wound closure

SIMPLIFIED PRIMING ⁴

- Simple priming process
- Pre assembled
- Easy tip removal for topical wound closure

N-BUTYL 2 CYANOACRYLATE ADHESIVE

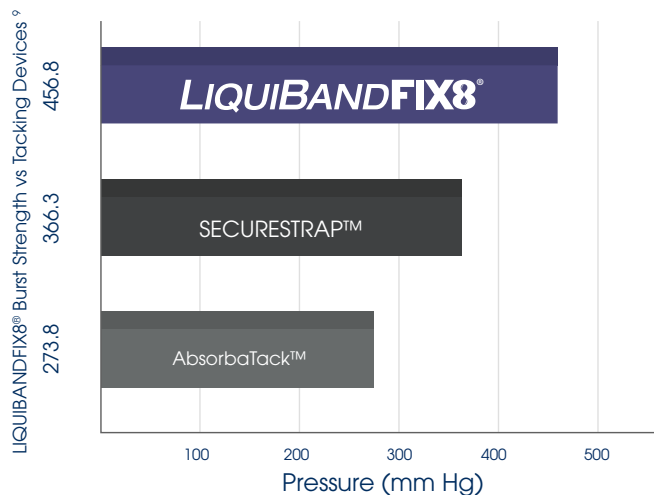
- Mesh fixation in 10 sec ⁵
- Reduced risk of trauma & post-operative complications ⁶
- Low exothermic reaction ⁷

PRECISE & ERGONOMIC ⁸

- Easy handling
- Delivers at least 45 liquid anchors
- Each trigger pull dispenses 12.5mg of adhesive

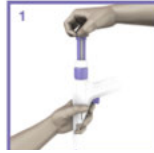
STRONG FIXATION

In correlation with mechanical mesh fixation devices, **LIQUIBANDFIX8[®]** demonstrated greater wound burst strength.



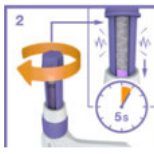
PRIMING STEPS

01



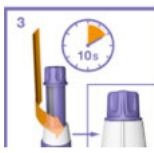
Remove the device from its packaging. Hold the device with the distal tip of the cannula pointing downwards throughout stages 1-5.

02



Rotate the purple proximal plunger clockwise until a cracking sound of the glass ampoule breaking is heard. **The plunger incorporates a visualisation window where the complete transfer of the adhesive into the device should be confirmed before proceeding.** Adhesive transfer is typically achieved within 5 seconds.

03



Slowly push the plunger into the device handle, rotate plunger anticlockwise at the final portion of the travel to completely align indicators and lock it into the device body.

04



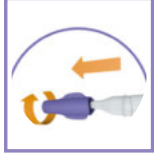
Rotate the purple dial clockwise fully until it comes to a complete stop.

05



Prime the device by actuating the trigger until a drop of adhesive freely emerges. Wipe any excess adhesive from the tip of the cannula onto an appropriate receptacle or on a sterile wipe. **The device is now ready for use as hernia repair device.**

06



Preparing the device for subsequent topical wound closure
Rotate the purple cannula tip in either direction to allow its removal. Dispose of removed tip.

References:

1. P. Wilson
- 2-9. Data on AMS file.



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