A comprehensive review of bench testing, preclinical and clinical data.

Possible complications include seroma, adhesions, hematomas, inflammation, extrusion, fistula formation, infection, allergic reaction and recurrence of the hernia or soft tissue defect. Adverse reactions and potential complications associated with fixation devices such as the SorbaFix™ Absorbable Fixation System may include, but are not limited to, the following: hemorrhage, pain, edema, and erythema at wound site; allergic reaction to Poly (D, L)-lactide; septicemia/infection; hernia recurrence/wound dehiscence. Care should be given to underlying structures such as nerves, vessels, viscera or bone. Please consult product labels and inserts for any indications, contraindications, hazards, warnings, precautions and instructions for use.
Success is in our system.

VENTRALIGHT™ ST Absorbable Barrier Mesh and the SORBAFix™ Absorbable Fixation System.

Mesh and Fastener Design:
• Lightweight low profile mesh design which facilitates trocar deployment.
• Consistent thread diameter from head to tip for maximum tissue engagement.

Strong Tissue Ingrowth:
• Bare monofilament polypropylene allows for fast tissue ingrowth and a strong, long-term repair.
• Hollow core fastener design allows tissue ingrowth through interior of fastener.*

Minimizes Tissue Attachment:
• Based on the technology used in Seprafilm™.
• Swells to minimize tissue attachment to the visceral side of the mesh.*
• Smooth flat head of SORBAFix™ fastener may reduce adhesion development and tenacity.*

VENTRALIGHT™ ST and SORBAFix™ devices work together to deliver strong tissue ingrowth throughout the critical first two week post-operative time frame. Then this unique system continues to create a strong, long-term repair.

* Preclinical data on file at C. R. Bard. Results may not correlate to performance in humans.

Proof is in our data.

At Bard, we believe success is measured in every step of the repair. We utilize proven materials, designed to work together, along with proven surgical techniques. Our goal is to help you achieve a strong, long-term repair for you and your patients.

As part of our ongoing commitment to share data, we have undertaken a comprehensive preclinical study, along with bench testing, to demonstrate the differences and advantages that the Bard® system of VENTRALIGHT™ ST Absorbable Barrier Mesh and SORBAFix™ Absorbable Fixation System presents when compared to the Ethicon® system of Physiomesh™ and SecureStrap.”
Mesh Findings

Innovative Mesh Construction:
Open pore design and unique hydrogel barrier

- Sepra® Technology has over 14 years of proven clinical success.
- Publication references on back page.

As of Mar 2012, no peer reviewed clinical or preclinical published data available on Monocryl’s effectiveness as a barrier.

* Per Ethicon brochure PHYSM-232-10-6/12

Allows for fast tissue ingrowth:
For a strong, long-term repair

- Ventralight™ ST Mesh demonstrated 37% greater tissue ingrowth compared to lateral sections of Physiomesh™ and 86% greater tissue ingrowth than the Physiomesh™ center point, marked by its PDS orientation marker.¹

Uncoated polypropylene allows for the majority of tissue ingrowth and strength to occur in the first two weeks after placement of a composite hernia prosthesis.²

¹ Preclinical data on file at C. R. Bard. Results may not correlate to performance in humans.
Secure Fixation at Angles: A significant difference at 45°

Bench Testing Results

SORBAFix™ with VENTRALIGHT™ ST vs. SecureStrap™ with Physiomesh™

All tacks were delivered using a clinically relevant opposition force for SORBAFix™ as per the SORBAFix™ instructions for use and for SecureStrap™ as per the SecureStrap™ instructions for use.

- The SORBAFix™ fastener average shear force is 43% higher than the SecureStrap™ when deployed at a 45° angle (p < 0.006).
- At 90°, there is no statistical difference between the devices.

Clinically Relevant Opposition Force: Put control back in your hands— at any angle.
Fastener Findings*

- Fastener site hemorrhage occurred with SecureStrap™ fasteners 14% of the time vs. 0.7% with SorbaFix™.
- The unique design of the SorbaFix™ fastener allows it to be removed to address hemostasis vs. the design of the SecureStrap™ which does not allow for removal.†

† Percentages were calculated based on the number of fasteners used for each implanted mesh per system, n=10.
†† Per individual products’ instructions for use. Ethicon SecureStrap™ IFU#389901R01.

Results*

Representative preclinical results via laparoscopic viewing at day 14.

- **Ventralight™ ST and SorbaFix™**
  - Uniform Integration

- **Physiomesh™ and SecureStrap™**
  - Irregular Integration

- Ventralight™ ST Mesh/SorbaFix™ Absorbable Fixation System demonstrated uniform anterior surface tissue integration and visceral surface reperitonealization, whereas Physiomesh™/SecureStrap™ demonstrated delayed/irregular anterior surface tissue integration and irregular visceral surface reperitonealization.
- Serous fluid was also observed between the anterior mesh surface of the abdominal wall with Physiomesh™/SecureStrap™.

**BARD Ventralight™ ST and SorbaFix™ Absorbable Fixation System.**
Unique design. Exceptional performance. Proven results.

For more information, call 1.800.556.6275 and speak to a representative. Or visit www.davol.com/LapVentSystem.

*Preclinical data on file at C. R. Bard. Results may not correlate to performance in humans.*
The proof is in OUR data.
We'll be glad to furnish you copies of the following publications.

Sepra® Technology


Scott, Jeffrey R, PhD., et al. VENTRALIGHT™ ST Hernia Patch: Characterization of Adhesion, Contracture and Histological Properties Following In Vivo Implantation, as Compared to an Oxidized Regenerated Cellulose Barrier Device in a Porcine Model. Bard, Inc. – Davol, Warwick, RI.


SORBAFix™ Absorbable Fixation


Archer, Andrew, DO., et al. A Single-Arm, Single-Center, Retrospective Study with Prospective Follow-Up of Laparoscopic Ventral Hernia Repair Utilizing the Bard Sepramesh™ IP Composite. September 2011 ACOS Meeting. Grandview Medical Center, Department of Surgery, Dayton, OH.

* System designed to eliminate the time and effort involved with placing and pulling up of orientation sutures.

Please consult product labels and inserts for any indications, contraindications, hazards, warnings, precautions and instructions for use.

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