STRATTICE™
RECONSTRUCTIVE TISSUE MATRIX

EXTRA THICK

The **PROVEN** benefits of the **leading biological mesh**[1]

NOW AVAILABLE IN **EXTRA THICK**

LifeCell™
An Acelity Company

Acelity™

The **STRONGEST** STRATTICE™ Tissue Matrix Yet*

Thicker**

- Made over **50% THICKER**
- Final out-of-package **thickness averages 2.5mm***

Stronger**

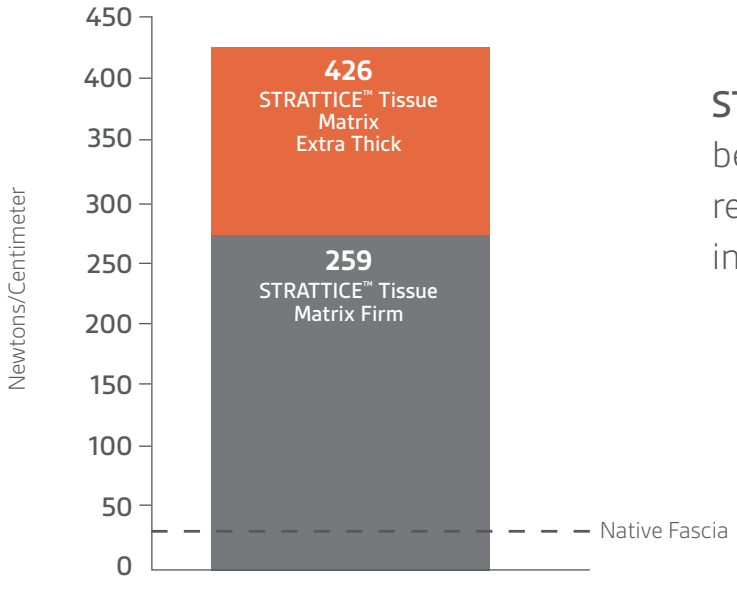
- **64% GREATER** out-of-package tensile strength*
- **51% GREATER** suture retention strength*

Proven

- The regenerative performance you expect from the market-leading biological mesh[1]

**As compared to original STRATTICE™ Tissue Matrix

Out-of-Package Tensile Strength*

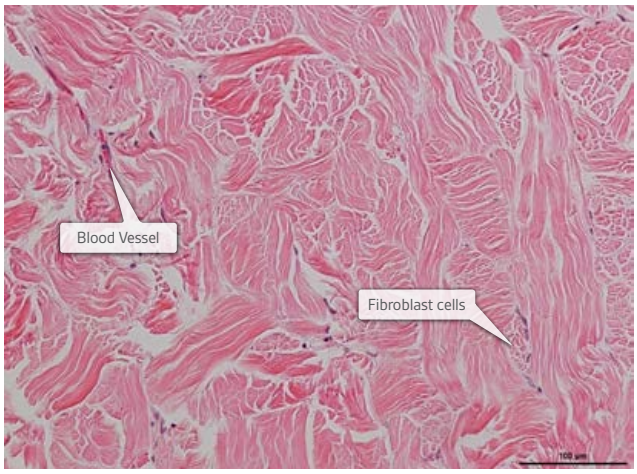


STRATTICE™ Tissue Matrix Extra Thick may be appropriate in complex abdominal wall reconstruction cases where surgeons desire increased thickness and tensile strength.

*Data on file; LifeCell Corporation

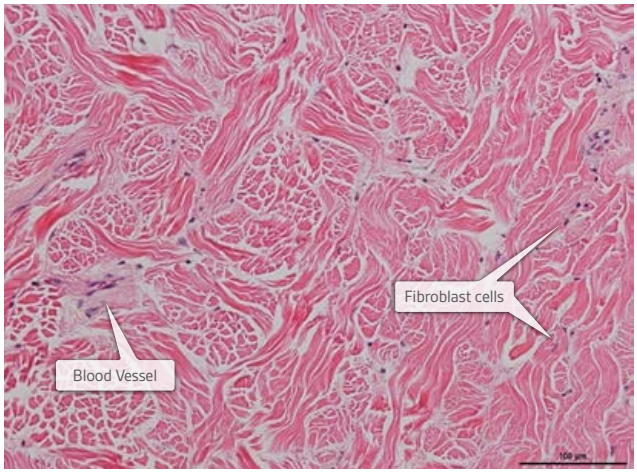
STRATTICE™ Tissue Matrix Extra Thick has the same biologic response as STRATTICE™ Tissue Matrix, as shown in an animal study.*,†

Histology Photo of
STRATTICE™ Tissue Matrix



H&E Stain 200x. One month explant in animal model.

Histology Photo of
STRATTICE™ Tissue Matrix **Extra Thick**



H&E Stain 200x. One month explant in animal model.

†Correlation of these results to results in humans has not been established.

*Data on file; LifeCell Corporation

STRATTICE™ Tissue Matrix is a proven product in VHR

STRATTICE™ Reconstructive Tissue Matrix is the industry leader for biological meshes in Complex Abdominal Wall Reconstruction.

Clinical experience

90+

peer-reviewed articles[2]

Studied in more than

2,000

patients[2]

<0.3%

Average explantation rate reported[3]

Ordering Information

Product Size	Product Code	Coverage (sq cm)
10x16	1016002ET	160
16x20	1620002ET	320
15x25	1525002ET	375
20x20	2020002ET	400
20x25	2025002ET	500
15x35	1535002ET	525
20x30	2030002ET	600
20x40	2040002ET	800
30x30	3030002ET	900
25x40	2540002ET	1000

STRATTICE™ RECONSTRUCTIVE TISSUE MATRIX REPLACEMENT GUARANTEE

The STRATTICE™ Replacement Guarantee program offers a replacement of any piece of STRATTICE™ Reconstructive Tissue Matrix when it has been used specifically for abdominal wall reconstructive applications at participating facilities.

Subject to certain terms and conditions, Acelity will replace STRATTICE™ Tissue Matrix Extra Thick purchased by the participating facility where it is explanted.

Essential Prescribing Information for STRATTICE™ Tissue Matrix Extra Thick

Device Description

STRATTICE™ Reconstructive Tissue Matrix Extra Thick (referred to herein as "STRATTICE™ Matrix Extra Thick" or "the surgical mesh") is a surgical mesh that is derived from porcine skin and is processed and preserved in a patented phosphate buffered aqueous solution containing matrix stabilizers. This device is designed to perform as a surgical mesh for soft tissue repair while presenting a scaffold to the patient. The structural properties minimize tissue attachment to the mesh. STRATTICE™ Matrix Extra Thick consists of a terminally sterilized sheet of processed porcine dermal matrix. This device is provided in prescribed geometric configurations and packaged in a double pouch configuration.

Use of STRATTICE™ Matrix Extra Thick provides for an implant which is strong, biocompatible and will incorporate into the recipient tissue with associated cell and microvascular ingrowth. Animal studies show a low incidence in adhesion to the STRATTICE™ Matrix Extra Thick surgical mesh based on observation of minimal visceral tissue attachment.

Indications for Use

STRATTICE™ Matrix Extra Thick is intended for use as a soft tissue patch to reinforce soft tissue where weakness exists and for the surgical repair of damaged or ruptured soft tissue membranes. Indications for use include the repair of hernias and/or body wall defects which require the use of reinforcing or bridging material to obtain the desired surgical outcome. STRATTICE™ Matrix Extra Thick is intended for single patient one-time use only.

Contraindications

- STRATTICE™ Matrix Extra Thick is derived from a porcine source and should not be used in patients with known sensitivity to porcine material.
- Polysorbate 20 is a component of the aqueous phosphate buffered solution and therefore the surgical mesh should not be used in patients with a known sensitivity to this material.

Contraindications

- Federal (USA) law restricts this device to sale by or on the order of a physician. Rx Only

WARNING

- Do not resterilize. Discard all open and unused portions of the device.
- Do not use if the package is opened or damaged.
- Do not use if seal is broken or compromised.
- Do not use if the temperature monitoring device does not display "OK".
- Do not reuse once the surgical mesh has been removed from the packaging and/or is in contact with a patient. This increases risk of patient-to-patient contamination and subsequent infection.
- After use, handle and dispose of all unused product and packaging in accordance with accepted medical practice and applicable local, state and federal laws and regulations.

Precautions

- Discard the surgical mesh if mishandling has caused possible damage or contamination.
- Discard if the surgical mesh is past its expiration date.
- Ensure that the surgical mesh is placed in a sterile basin and covered with room temperature sterile saline or room temperature sterile lactated Ringer's solution for a minimum of 2 minutes prior to implantation in the body.
- Place the surgical mesh in maximum possible contact with healthy, well-vascularized tissue to promote cell ingrowth and tissue remodeling.
- The surgical mesh should be hydrated and moist when the package is opened. If the surgical mesh is dry, do not use.
- Certain considerations should be used when performing surgical procedures using a surgical mesh product:
  - Consider the risk/benefit balance of use in patients with significant comorbidities; including but not limited to, obesity, smoking, diabetes, immunosuppression, malnourishment, poor tissue oxygenation (such as COPD), and pre- or postoperative radiation.
  - As standard practice, bioburden-reducing techniques should be utilized in significantly contaminated or infected cases to minimize contamination levels at the surgical site, including, but not limited to, appropriate drainage, debridement, negative pressure therapy, and/or antimicrobial therapy prior and in addition to implantation of the surgical mesh.
  - In large abdominal wall defect cases where midline fascial closure cannot be obtained, with or without separation of components techniques, utilization of the surgical mesh in a bridged fashion is associated with a higher risk of hernia recurrence than when used to reinforce fascial closure.

For more information, please call LifeCell Customer Solutions at **800-367-5737** or visit **acelity.com**.

References

1. Total Procedure Volumes of Biologics as reported by IMS CDM for Ventral/Incisional Procedures. December, 2015.
2. Searches performed on PubMed, Google, Google Scholar and Science Direct in June 2016.
3. Each study was considered independent during calculation. Studies may contain overlapping populations. Percentage based on weighted average.

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