# COVIDIEN<sup>®</sup>

# Polysorb™

Coated Braided Absorbable Suture

PT00079573





### BEFORE USING PRODUCT, READ THE FOLLOWING INFORMATION THOROUGHLY.

DESCRIPTION

Polyords<sup>10</sup> braided sutures are composed of Lactome<sup>10</sup> glycolide-factide copolymer which is a synthetic polyester composed of glycolide and lactide (derived from glycolic and lactic acids), Polysords<sup>10</sup> sutures are prepared by coasting the suture with a mixture of a caprolactone/glycolide copolymer and cakium stearoyl lactylate. Polysords<sup>10</sup> sutures are colored violet to increase vibility and are also available undeed.

Polysoth<sup>144</sup> sutures meet all requirements established by the United States Pharmacopeia (USP) and the European Pharmacopeia (EP) except for minor variations in suture diameter.

Such variations are:

Maximum Suture Oversize in Diameter (mm) from USP		
USP Size	USP Size Designation (mm)	Maximum Overage (mm)
8-0	0.040 - 0.049	0.020
7-0	0.050-0.069	0.030
6-0	0.070-0.099	0.050
5-0	0.10-0.149	0.050
4-0	0.15-0.199	0.050
3-0	0.20-0.249	0.050
2-0	0.30-0.339	0.050
0	0.35-0.399	0.050
1	0.40-0.499	0.050
2	0.50-0.599	0.050

#### INDICATIONS

Polysorb<sup>10</sup> sutures are indicated for use in soft tissue approximation or ligation and ophthalmic surgery, but not in cardiovascular or neural tissue.

#### ACTIONS

Polyooth<sup>24</sup> sutures elicit a minimal acute inflammatory reaction in tissue, which is followed by a gradual encapsulation of the suture by fibrous connective tissue.

Progressive loss of tensile strength and eventual absorption of Polysorb<sup>®</sup> sutures occurs by means of hydralysis, where the Lactomer<sup>®</sup> glycolide/ lacticle copolymer is broken down to glycolic and lactic adds which are subsequently absorbed and metabolized by the body. Absorption begins as a loss of tensile strength without appreciable loss of mass. Studies indicate tensile strength averagets for Polysofb<sup>®</sup> sutures are approximately 140% of USP and E.P. minimum knot strength initially, are approximately 30% at two weeks and in excess of 30% at three weeks post implant. Resorption of Polysor b<sup>®</sup> sutures is essentially complete between the Soft and 70th day.

#### CONTRAINDICATION

Polysorb<sup>144</sup> sutures, being absorbable, should not be used where entended approximation of tissue is required.

#### WARNINGS

Do not resterilize. Sterile unless packaging has been opened or damaged. Discard open, unused sutures. Store at room temperature. Avoid prolonged exposure to elevated temperatures.

In surgery of the urinary or biliary tracts, care should be taken to avoid prolonged contact of this, or any other, suture with salt solutions, as calculus formation may result.

Users should be familiar with surgical procedures and techniques involving absorbable sutures before employing Polysorb<sup>™</sup> sutures for wound closure, as the risk of wound dehiscence may vary with the site of application and the suture material used.

As any foreign material in the presence of bacterial contamination may enhance bacterial infectivity, acceptable surgical practice must be followed with respect to drainage and closure of contaminated or infected wounds.

The use of this suture may be inappropriate in patients with any conditions which, in the opinion of the surgeon, may cause or contribute to delayed wound healing.

As this is an absorbable suture material, the use of supplemental nonabsorbable sutures should be considered by the surgeon in closure of the abdomen, chest, joints or other sites subject to expansion or requiring additional support.

### PRECAUTIONS

In handling this or any other suture material, care should be taken to avoid damage from handling. Avoid crushing or crimping damage due to application of surgical instruments, such as forceps or needle holders. Adequate knot security requires the accepted surgical technique of flat, square ties, with additional throws as warranted by surgical circumstance and the experience of the surgeon.

Skin sutures which must remain in place longer than 7 days may cause irritation and should be snipped off or removed as indicated.

Under some circumstances, notably orthopedic procedures, immobilization by external support may be employed at the discretion of the surgeon.

## ADVERSE REACTIONS

Adverse effects, which may be associated with the use of this product, include: wound dehiscence, failure to provide adequate wound support in sites where expansion, stretching, or distention occur, failure to provide adequate wound support in patients with conditions which may delay wound healing, localized irritation when skin sutures are left in place greater than 7 days, calculi formation when prolonged contact with salt solutions occurs, enhanced bacterial infectivity, minimal acute inflammatory reaction, and transitory local irritation.

#### **HOW SUPPLIED**

Polysorb<sup>10</sup> sutures are available in USP sizes 2 (5 Metric) through 8-0 (0.4 Metric). They are available undyed (natural) or violet colored. The sutures are supplied sterile, in pre-cut lengths and ligating reeks, non-needled or affixed to various needle types using both permanent and removable needle attachment techniques. The sutures are available in box quantities of one, two and three dozen.