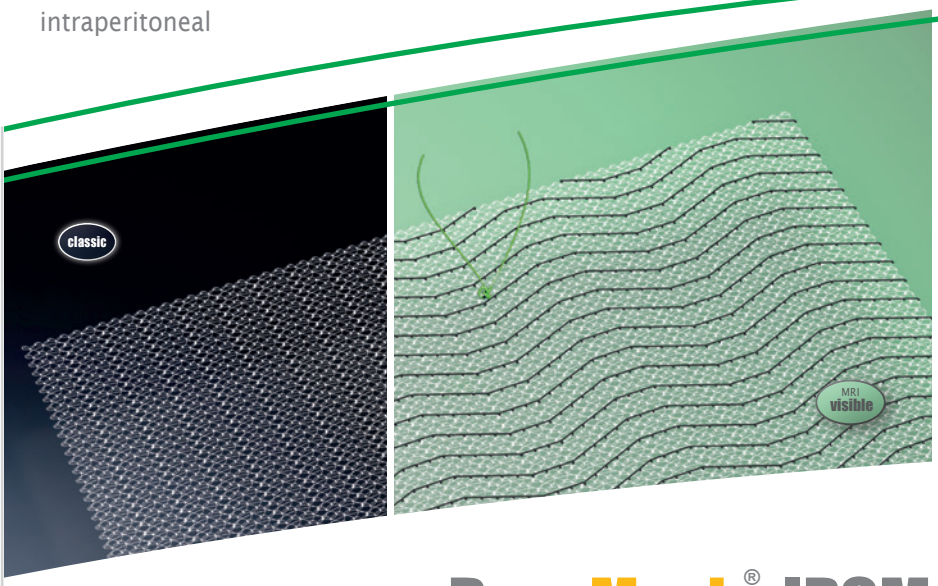
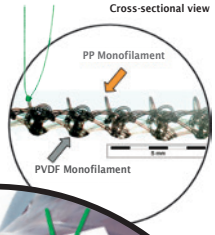


DynaMesh®-IPOM and **DynaMesh®-IPOM visible** implants are intended for the surgical treatment of epigastric hernias, umbilical or incisional hernias, and the treatment of parastomal hernias following ostomy surgery, and permanently bridge and reinforce the soft tissue of the abdominal wall in the area of the abdominal wall defect.

DynaMesh®-IPOM

DynaMesh®-IPOM and **DynaMesh®-IPOM visible** implants are primarily made of polyvinylidene fluoride (PVDF). The mesh implants are warp-knitted using coloured and uncoloured polyvinylidene fluoride (PVDF) monofilaments and uncoloured polypropylene (PP) monofilaments.

Cross-sectional view



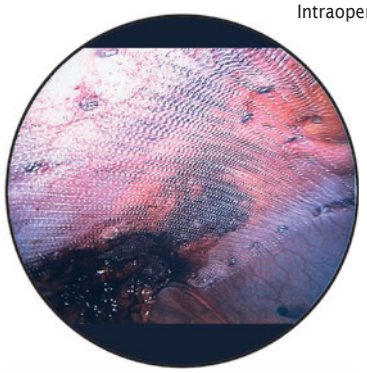
Green Filament Ends
Must be cranial or caudal. For clear identification of the parietal side.

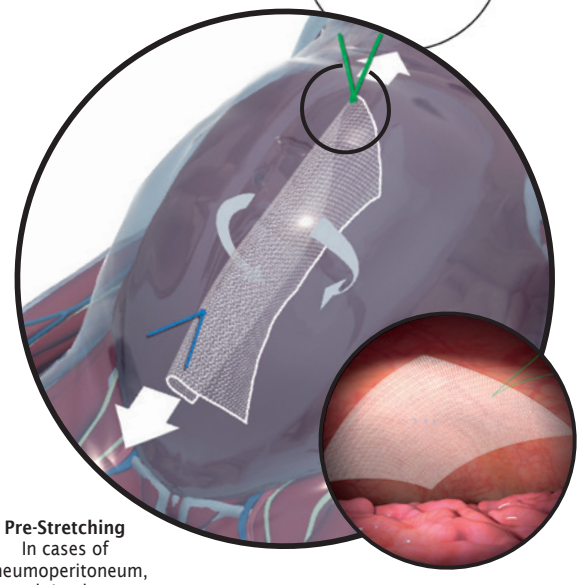
Positioning

DynaMesh®-IPOM and **DynaMesh®-IPOM visible** implants have a parietal side and a visceral side. The parietal side is identified by the **green filament** ends and consists of PVDF on the surface and a small proportion of PP, whereas the visceral side consists of PVDF on the surface.

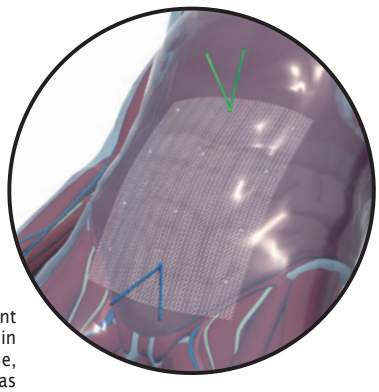
The mesh implant must be placed in such a way that the green filament ends are always oriented **towards the abdominal wall**. At the same time, the mesh implant must be oriented so that the green filament ends are **cranial or caudal**.

Intraoperative view





Pre-Stretching
In cases of pneumoperitoneum, the mesh implant must be positioned with pre-stretching in order to enable as smooth a position as possible on the tissue following desufflation.



The mesh implant must be positioned in contact with the tissue, as flat and smooth as possible.

CA_H1_IPO1_M_001_en001a_240319_d

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Prager Ring 70, 52070 Aachen, Germany · www.dyna-mesh.com

made in Germany

Use and Properties

Product	DynaMesh®-IPOM (1)	DynaMesh®-IPOM visible (2)
Surgical Treatment	Umbilical Hernias / Epigastric Hernias / Incisional Hernias / Parastomal Hernias	
Surgical Approach	Minimally Invasive / Open	
Mesh Position	Intraperitoneal* according to the intraperitoneal onlay mesh technique (IPOM).	
Fixation	Suture / Tacks / No Fibrin Glue	
Green Filament Ends	●	
Visible Technology	○	●
Materials	- Polyvinylidene fluoride (PVDF) (CAS 24937-79-9) > 85% (w/w) (1) (2) - Polypropylene (PP) (CAS 9003-07-0) < 13% (w/w) (1) (2) - Phthalocyanine green (CAS 1328-53-6) < 1% (w/w) (1) (2) - Triiron tetraoxide (CAS 1317-61-9) < 1% (w/w) (2)	
Polymers (Monofilament)	PVDF, PP	
Biocompatibility	● [TR1]	
Ageing Resistance	● [2^{A}, 5^{VIT}, 27^{A}, 52^{VIT}, 93^{A}, 101]	
Tear Propagation Resistance	● [TR62]	
Effective Porosity	● High effective porosity reduces inflammation and the risk of excessive scar formation. [103^{P}, TR64]	
Klinge's Mesh Classification	Class 1a [102^{P}, TR64]	

* In particular cases with an extraperitoneal mesh position in which there is a risk of contact between the mesh implant and the intestine, the device may also be placed extraperitoneally in onlay, sublay and/or preperitoneal mesh position.

DynaMesh®-IPOM and **DynaMesh®-IPOM visible** implants have a parietal side and a visceral side. The parietal side is identified by green filament ends and consists of PVDF on the surface and a small proportion of PP, whereas the visceral side consists of PVDF on the surface.

● Applies to all product sizes
○ Does not apply
[#] Reference "#" (see "References")
[TR#] Internal test report (see "internal test report references")
Limitations "A" animal trial, "B" bench test, "VIT" in-vitro trial, "P" published results based on the analysis of human mesh explants, "PB" published results mainly based on bench tests

More information: https://en.dyna-mesh.com/dynamesh-ipom-gb

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Product Range

Cutting/overlapping
When cutting, care must be taken to ensure that the parietal side of the device can still be identified without any doubt. With epigastric hernias, umbilical and parastomal hernias following ostomy surgery, it is crucial to overlap the hernia orifice, whereas with incisional hernias it is crucial to overlap the scar tissue.
For further information on cutting/overlapping, please refer to the instructions for use.

DynaMesh®-IPOM	○	d 12 cm round	IP070012*F1/F3*
	□	07 cm x 06 cm	IP070706*F1/F5*
		10 cm x 15 cm	IP071015*F1/F3*
		15 cm x 15 cm	IP071515*F1/F3/F5*
		15 cm x 20 cm	IP071520*F1/F3/F5*
		15 cm x 40 cm	IP071540*F1*
		20 cm x 20 cm	IP072020*F1*
		20 cm x 25 cm	IP072025*F1*
		20 cm x 30 cm	IP072030*F1/F3*
		28 cm x 37 cm	IP072837*F1*
		30 cm x 30 cm	IP073030*F1*
		30 cm x 45 cm	IP073045*F1*
DynaMesh®-IPOM visible	○	d 12 cm round	IP080012*F1/F3*
	□	07 cm x 06 cm	IP080706*F5*
		10 cm x 15 cm	IP081015*F1*
		15 cm x 15 cm	IP081515*F1/F3*
		15 cm x 20 cm	IP081520*F1/F3*
		20 cm x 20 cm	IP082020*F1*
		20 cm x 25 cm	IP082025*F1*
		20 cm x 30 cm	IP082030*F1/F3*
		28 cm x 37 cm	IP082837*F1*
		30 cm x 30 cm	IP083030*F1*
		30 cm x 45 cm	IP083045*F1*

FX = X unit(s)/box (e.g. *F3* = 3 unit(s)/box)
size: laterolateral x craniocaudal

DynaMesh®-IPOM - Animation: The 3 Key Aspects for DynaMesh®-IPOM (best practice example) *https://de.dyna-mesh.com/Vi108en*	
DynaMesh®-IPOM visible - Animation: 3D Reconstruction *https://de.dyna-mesh.com/Vi051xx*	
DynaMesh®-IPOM - Animation: Laparoscopic Repair of Incisional Hernia *https://de.dyna-mesh.com/VA_IPO1_001en_240703*	

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