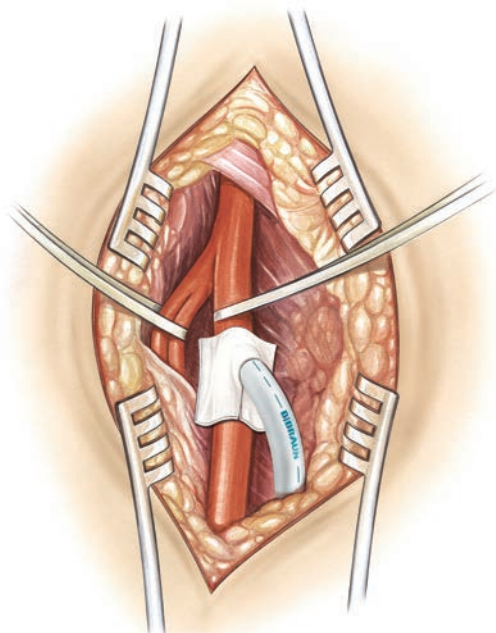




Lyostypt[®]
TIME TO HEMOSTASIS

Lyostypt®

TIME TO HEMOSTASIS



Adaptable

Lyostypt® is used for hemostasis of capillary bleeding, oozing hemorrhages, bleeding of parenchymal organs and as a supportive measure for other hemostasis techniques.

WHAT IS NEEDED

- Efficient Hemostasis (1-3)
- Cost efficient (2)
- Absorbed within 3 weeks (4-6)
- Excellent biocompatibility (6)

Lyostypt®

COLLAGEN: PROVEN EFFICACY

COBBANA TRIAL

COBBANA:

Control of bleeding in arterial bypass anastomosis (7)

- Prospective, randomized clinical trial.
- Comparison of fibrillar collagen (Lyostypt®) versus oxidized regenerated cellulose (Surgicel®) (7).
- Hemostatic effect and handling properties were rated in suture hole bleeding of peripheral arterial bypass anastomosis using PTFE graft prosthesis.
- N = 64 anastomoses (32 Lyostypt®, 32 Surgicel®).

COLLAGEN ADVANTAGES

Summary of Advantages of Lyostypt® vs Oxidized cellulose according COBBANA Trial (2)

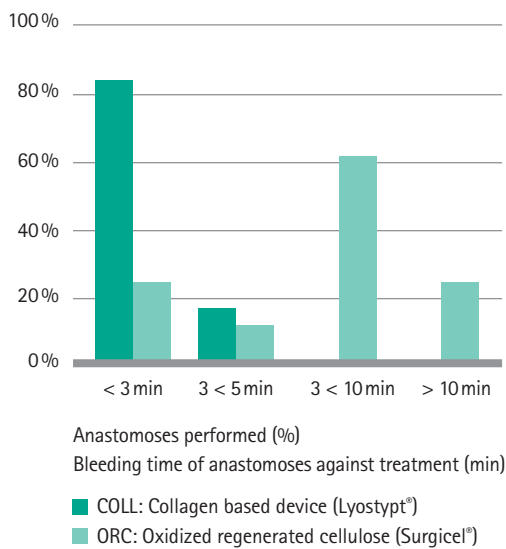
- Faster hemostasis than oxidized cellulose in suture hole bleedings of arterial bypass anastomosis.
- Better adhesion to tissue and surgical handling than oxidized cellulose in suture hole bleedings of arterial bypass anastomosis.
- Lower amount of material needed to stop bleeding in comparison to oxidized cellulose.



FASTER HEMOSTASIS

Bleeding time of the anastomoses

- Fibrillar collagen showed significantly faster hemostasis (124 ± 67 sec) compared to oxidized regenerated cellulose (416 ± 226 sec) in suture hole bleedings of arterial bypass anastomosis (2).

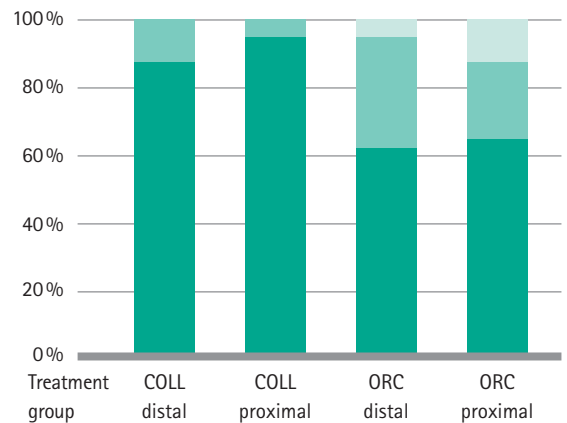


Fibrillar collagen stopped suture hole bleeding of the anastomoses in less than 3 minutes in over 80% of cases. Oxidized cellulose needed more than 5 minutes to stop suture hole bleeding in most of the anastomoses performed (2).

BETTER PERFORMANCE

Intraoperative efficacy rating

- Fibrillar collagen showed better adherence to the tissue and handling properties compared to oxidized regenerated cellulose in suture hole bleeding of arterial bypass anastomoses (2).
- Less fibrillar collagen devices were needed to achieve hemostasis, demonstrating its major cost-effectiveness (2).



Anastomoses performed (%)

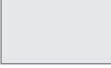
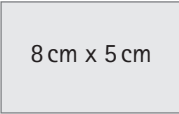

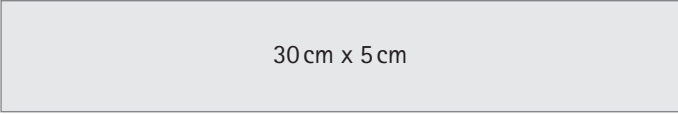
- Easy placement, repositioning needed and not possible
- Easy placement, repositioning needed and possible
- Easy placement, no repositioning needed

COLL: Collagen based device (Lyostypt®)
ORC: Oxidized regenerated cellulose (Surgicel®)

Fibrillar collagen did not need to be repositioned in more than 80% of the anastomoses performed. In cases where needed, collagen could be easily repositioned in all cases (2).

Lyostypt®

ORDERING INFORMATION

Sizes	Art. No.	Contents
 5 cm x 3 cm	1069128	12 pieces
 8 cm x 5 cm	1069152 1069020	6 pieces 12 pieces
 12 cm x 10 cm	1069209 1069039	4 pieces 8 pieces
 30 cm x 5 cm	1069306	4 pieces

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- (7) Baumann P et al. A randomized controlled, prospective trial to evaluate the haemostatic effect of Lyostypt versus Surgicel® in arterial bypass anastomosis: 'Cobbana' Trial. *Trials*. 2009;10:91.

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