Lynx™ Suprapubic Mid-Urethral Sling System

Prescriptive Information

Refer to the device directions for use for complete instructions on device use.

Intended Use/Indications for Use

The mesh implant is intended as a suburethral sling for the treatment of stress urinary incontinence resulting from hypermobility and/or intrinsic sphincter deficiency.

Contraindications

A mesh suburethral sling implant is contraindicated in the following patients:

- Pregnant patients, patients with potential for future growth or patients that are considering future pregnancies.
- Any patients with soft tissue pathology into which the implant is to be placed.
- Patients with any pathology which would compromise implant placement.
- Patients with any pathology, such as blood supply limitations or infections that would compromise healing.

Warnings

For single use only. Do not reuse, reprocess or resterilize.

After use, dispose of product and packaging in accordance with hospital, administrative and/or local government policy.

General Warnings

The risks and benefits of performing a suburethral sling procedure in the following patients should be carefully considered:

- Women planning future pregnancies.
- Overweight women (weight parameters to be determined by the physician).
- Patients with blood coagulation disorder.
- Patients with a compromised immune system or any other condition that would compromise healing.
- Patients with renal insufficiency or upper urinary tract obstruction.
- Take special care in cases of bladder prolapse because of anatomical distortion. If the patient requires a cystocele repair, it should be done prior to the suburethral sling procedure.
- Vaginal and urinary tract infection should be treated prior to a suburethral sling implantation procedure.
- User should be familiar with surgical procedures and techniques involving nonabsorbable meshes before using the device.
- This product is intended for use only by clinicians with adequate training and experience in treatment of female stress urinary incontinence (SUI). The physician is advised to consult the medical literature regarding techniques, complications and hazards associated with the intended procedures.
- User should note the importance of placing the mesh without tension under mid-urethra.
- Good surgical practices should be followed for management of contamination or infected wounds.
Potential Complications

The following have been reported due to the suburethral sling placement, but are not limited to:

- As with all implants, local irritation at the wound site and/or foreign body response may occur.
- Tissue responses to the implant could include vaginal erosion/extrusion, erosion through the urethra or other surrounding tissue, migration of the device from the desired location, fistula formulation and inflammation. The occurrence of these responses may require removal of the entire mesh.
- Like all foreign bodies, the mesh may potentiate an existing infection.
- Excess tension may cause temporary or permanent lower urinary tract obstruction and retention.
- Known risks of surgical procedures for the treatment of incontinence include pain, infection, erosion of the vaginal or urethral mucosa or bladder wall, device migration, complete failure of the procedure resulting in incontinence and mild to moderate incontinence due to incomplete support or overactive bladder.
- In addition to the above listed potential complications, allergic reaction, fistula, abscess, detrusor instability, pelvic and vaginal pain, dyspareunia, vaginal bleeding, vaginal discharge, dehiscence of vaginal incision, bruising/hematoma, edema and erythema at the wound site, have been reported due to suburethral sling procedures.

Cautions

Cautions and Pre-Cautions can be found in the product labeling supplied with each device.

CAUTION: Federal (USA) Law restricts this device to sale by or on the order of a physician trained in use of surgical mesh for repair of stress urinary incontinence.