

**Solyx™**

Single Incision Sling System

*Solyx Blue Sling System shown*

# Solyx™

## Single Incision Sling System

How can we continue to innovate our family of mid-urethral slings that have already been the products of choice for nearly 800,000 patients? By creating the same reliable mesh in an easy-to-see, optical blue color. So whatever your preferred surgical approach, Advantage™ Blue mesh provides improved visibility so you can treat your patients with greater confidence.

A smooth, de-tanged suburethral portion designed to maintain its integrity during tensioning and potentially reduce irritation to the urethral wall

Tanged edges outside of the suburethral portion may help to minimize mesh migration

### Improved visibility. Evidence based.

- The same mesh properties as our patented Advantage mesh, which is documented in more than 35 publications to date.
- The easy-to-see, optical blue color helps to improve your visibility for more accurate intra-operative sling tensioning and makes it easier to locate post-operatively.

### Trusted polypropylene mesh¹

- Mesh thickness: 0.66 mm
- Pore size: 1182 µm
- Fiber size (diameter): 0.15 mm
- Weight: 100 g/m²

### The Single Incision Sling System designed with Micro-Adjustability

- Ability to tighten and loosen as needed
- Carrier snap-fit on delivery device tip is designed to facilitate control during placement
- Sling is tensioned by delivery device advancement and retraction
- Mesh assembly is designed to be placed away from critical structures, such as the obturator bundle

Note: Once the carrier is deposited in tissue, it is not designed to be reconnected onto the shaft tip for additional tension/adjustment



Single incision approach

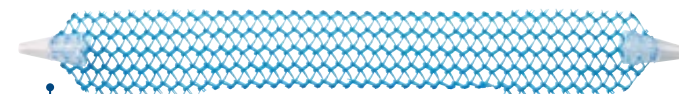


### Mid-line marker

Designed to facilitate guidance for accurate placement

### Delivery device

- Designed to seat carrier where placed
- Ergonomic handle



### Mesh carrier

- The barb design is intended to track smoothly through tissue
- Snap-fit to delivery device tip is designed to prevent premature carrier slip-off

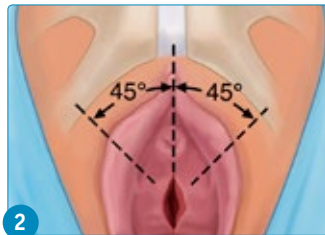
## Ordering Information

Product code	Description	Quantity
M0068507010	Solyx™ Blue Single Incision Sling System	1 Delivery Device and 1 Mesh Assembly
M0068507000	Solyx™ Single Incision Sling System	1 Delivery Device and 1 Mesh Assembly

# Solyx™ Incision Mid-urethral Sling System Procedure<sup>2</sup>



1 • Prepare and drape the patient using standard surgical practice. Ensure the bladder is empty. Incise the anterior vaginal wall at the level of the mid-urethra approximately 1.0 to 1.5 cm in length.



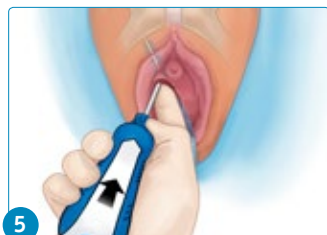
2 • Dissect bilaterally to the interior portion of the inferior pubic ramus at a 45 degree angle off the midline creating a pathway for delivery device placement.



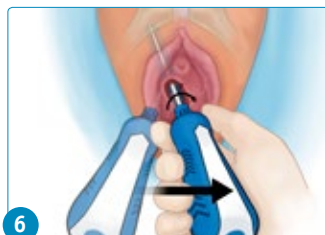
3 • Place the mesh assembly onto the delivery device by placing the delivery device tip into the mesh carrier. NOTE: The mesh carrier should be pushed onto the delivery device tip until it is flush with the end of the delivery device shoulder. While placing the mesh carrier onto the delivery device, make sure that the mesh is oriented so that it lies on the outside curve of the delivery device. The mesh is now ready for placement.



4 • Insert delivery device with mesh assembly attached through incision with handle at 30 degree angle from midline, in vertical position, and parallel to floor. • Place an index finger at the midline marker of the delivery device and push to penetrate through endopelvic fascia. You should feel a change in resistance as trocar tip penetrates through endopelvic fascia. Stop advancement.



5 • Insert delivery device cephalad 0.5 cm away from inferior pubic ramus.



6 • Shift handle toward patient's contralateral side then rotate handle clockwise 45 degrees, aiming for superior medial aspect of obturator foramen. This positions the trocar tip for perpendicular penetration into obturator internus muscle.



7 • Place finger behind midline mark of delivery device and drive mesh carrier into obturator internus muscle. Midline mark should be aligned approximately at the midline position under the urethra.



8 • Deposit the carrier by gripping the deployment mechanism with one hand and pulling the delivery device handle back with the other hand. This action will deposit the carrier into the surrounding obturator internus muscle tissue releasing it from the delivery device. Gently tug on mesh assembly to ensure proper placement. • Repeat all steps on patient's contralateral side.



9 • Ensure proper tensioning of the mesh assembly is achieved before deploying from the delivery device handle. Proper tension requires sling to be placed snugly against the urethra.



10 • Deposit the carrier by gripping the deployment mechanism with one hand and pulling the delivery device handle back with the other hand. This action will deposit the carrier into the surrounding obturator internus muscle tissue releasing it from the delivery device. NOTE: Once the carrier is deposited in tissue, it is not designed to be reconnected onto the shaft tip for additional tension/adjustment. Cystoscopy may be performed at the physician's discretion. • Close incision according to usual methods.

1. Moali, Pamela, et al. Tensile properties of five commonly used mid-urethral slings relative to the TVT™ *Int Urogynecol J* (2008) 19:655–663 DOI 10.1007/s00192-007-0499-1  
2. Solyx Blue Sling System shown

Caution: For Female Mid-Urethral Slings: Federal (US) 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.

CAUTION: The law restricts these devices to sale by or on the order of a physician. Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device. Information for use only in countries with applicable health authority registrations. Material not intended for use in France.

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