

Lynx™

Suprapubic Mid-urethral Sling System

Lynx Blue Sling System shown

Lynx™ Suprapubic Mid-urethral 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: 0.66mm
- Pore size: 1182µm
- Fiber size (diameter): 0.15mm
- Weight: 100g/m²

Non-skid handle

Non-skid grip is designed to prevent hand from slipping during intra-operative manipulation

Centering tab

Allows for proper alignment of the center of the mesh under the urethra. It also allows the physician to apply counter tension to the sling while preserving the mesh integrity



Suprapubic approach

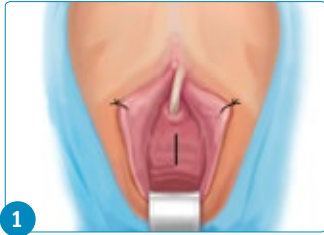
Needle

- Designed to facilitate suprapubic device passage
- Needle is colored to enhance visibility during cystoscopy

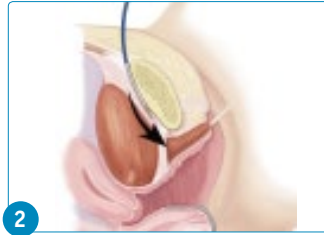
Association loop

- Facilitates needle and mesh engagement and removal
- Smooth transition from loop to mesh allows for minimal tissue disruption

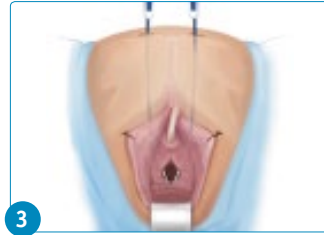
Lynx™ Suprapubic Mid-urethral Sling System Procedure²



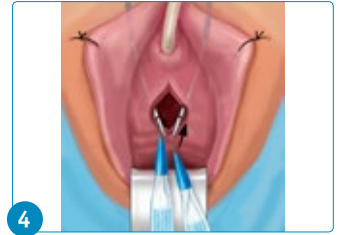
- 1
- Prepare the lower abdominal and vaginal operative sites
 - Create two small transverse abdominal incisions approximately 0.5 cm to 1 cm on each side of the midline just above the symphysis
 - Incise the anterior vaginal wall and dissect bilaterally in standard fashion



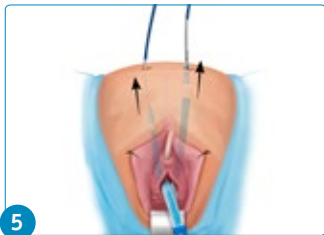
- 2
- Insert one needle through the abdominal incision, moving the needle downward in a vertical motion
 - Pierce through the rectus fascia into the Space of Retzius
 - Guide the distal end of the needle down along the posterior surface of the pubic bone through the vaginal incision
 - Repeat on the contralateral side with the second needle



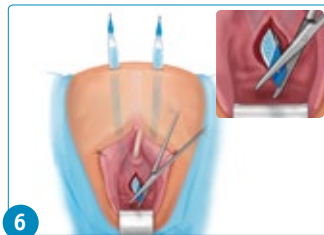
- 3
- With both needles in place, cystoscopy should be performed to confirm bladder integrity
 - If a needle is seen in the bladder, remove the needle. Visually inspect the needle for integrity. Empty the bladder and repeat Step 2 on the side that the bladder perforation occurred.



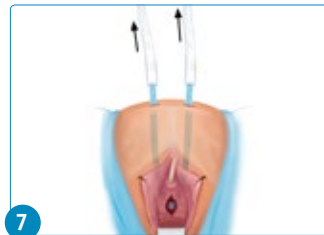
- 4
- Once it is determined that the bladder is intact, engage one association loop to the distal end of each needle protruding through the vaginal incision



- 5
- Pull the needles up through the abdominal incisions making sure the mesh assembly is not twisted and lies flat under the urethra
 - Remove the association loops from the needles



- 6
- Adjust the mesh assembly by pulling upwards on the dilators so that the blue centering tab is centered below the urethra
 - Appropriately tension the mesh sleeve assembly according to physician preference
 - Grasp the blue centering tab and cut the tab through the center of the punch hole ensuring that both halves of the blue centering tab are removed from the vaginal canal



- 7
- Pull upwards on the dilators to remove the sleeve leaving the mesh in place
 - Verify the tension of the mesh and adjust as necessary



- 8
- Gently push downward on the abdomen, cut the distal ends of the mesh and confirm that the ends retract into the abdominal incisions
 - Close all incisions according to usual methods

Ordering Information

Product code	Description	Quantity
M0068503010	Lynx™ Blue Sling System	2 Delivery Devices and 1 Mesh Assembly
M0068503000	Lynx™ Sling System	2 Delivery Devices and 1 Mesh Assembly

1. Moalli PA, Papas N, Menefee S, et al. Tensile properties of five commonly used mid-urethral slings relative to theTVT. *Int Urogynecol J Pelvic Floor Dysfunct.* 2008 May;19(5):655-63.
 2. Lynx 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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