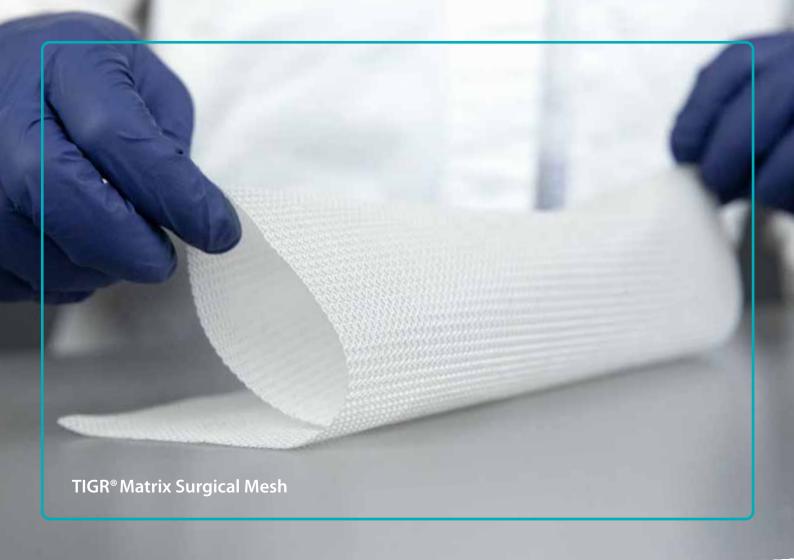
**BREAST** 

# TIGR® matrix





## STRONG WHEN YOU NEED IT GONE WHEN YOU DON'T

The ideal matrix for Breast Reconstruction with implant





#### The Design

TIGR® Matrix Surgical Mesh is a resorbable surgical implant. It is made from two different synthetic polymer fibers that are knitted together to form a matrix.

TIGR Matrix is characterized by long-term resorption and a dual stage degradation design that follows the natural wound healing and remodeling stages. Designed to allow the body to withstand the stresses after the matrix has been absorbed. The new connective tissue can then offer a long-term support.

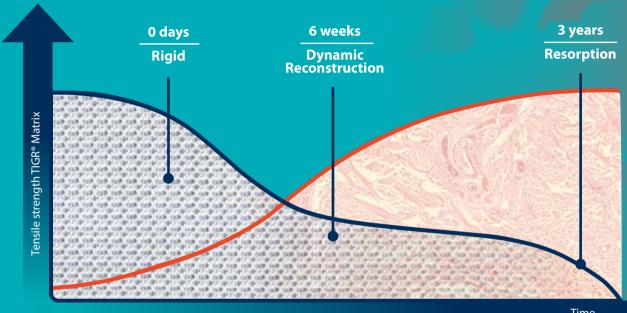
The result is a surgical mesh that is easy to use for a variety of reconstructive surgery applications where a balance between mechanical support and degradation time is needed.

TIGR Matrix is made from materials that have been in clinical use since the 1970's and the product is supported by a growing body of peer-reviewed clinical evidence.

#### **Degradation and Healing stages**







Time

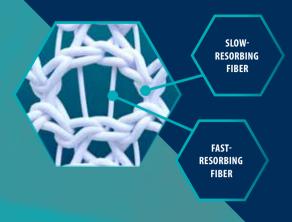
Wound healing phases

**INFLAMMATION** 

**PROLIFERATION** 

REMODELLING

**ANGIOGENISIS** 



### THE MECHANISM TIGR® Matrix

#### **Dynamic Reconstruction**

TIGR Matrix is designed with a multistage resorbable mechanism, defined by two fibers having different degradation characteristics.

The warp-knitted untwisted multifilaments give a unique structure which together with a macroporosity design allow for good tissue integration. As the different fibers degrade, a gradual transfer of loads, from the mesh to the remodeling tissue occurs.

The result of this dynamic reconstruction is a more structured and hence stronger, connective tissue.

The fast-resorbing fiber, making up approximately 40% of the matrix by weight, is a copolymer of glycolide, lactide, and trimethylene carbonate. It loses its mechanical strength after 2 weeks and is fully absorbed after 4 months.

The slow-resorbing fiber, making up approximately 60% of the matrix by weight, is a copolymer of lactide and trimethylene carbonate. This fiber maintains its mechanical strength for 6 months and is absorbed after approximately 36 months.

#### Why Multifilament

TIGR Matrix is a multifilament mesh making it more pliable and flexible with a greater tensile strength when compared with monofilament meshes, which have a less complex fabric structure.

These multifilament properties are transferred to TIGR Matrix giving it superior handling characteristics enabling it to adapt willingly to underlying structures.

#### Non-twisted Multifilament and integration

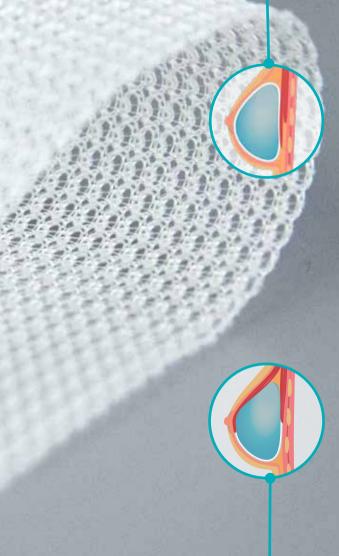
Untwisted allow integration of tissue not only through the open pores in the mesh but also in-between each fiber of the matrix.

#### Porosity in warp-knitted fabrics

TIGR Matrix is made of warp-knitted multifilament fibers giving it its unique structure. The small space between fibers will rapidly absorb blood due to capillary forces and later widen to give place to new tissue and blood vessels.





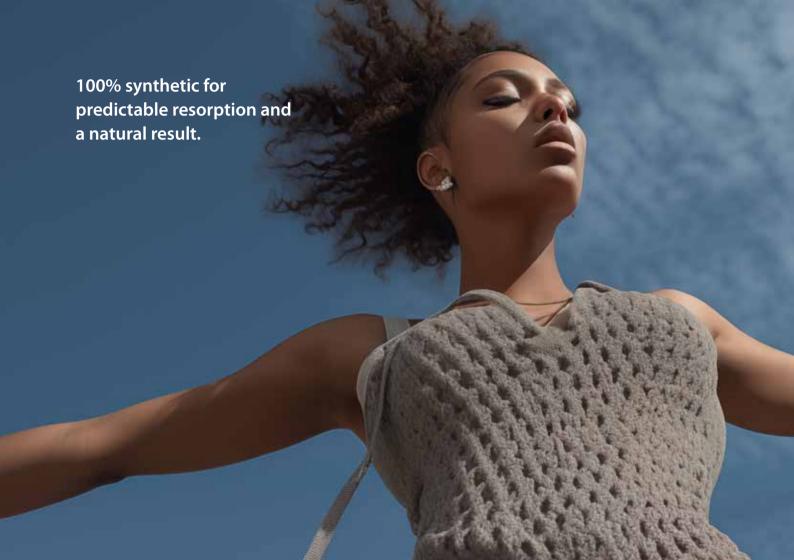


#### **Prepectoral**

- An implant is placed above the pectoralis major muscle and TIGR Matrix supports and stabilizes the implant. TIGR Matrix promotes soft tissue repair and long-term support.
- Complete coverage or anterior coverage of the implant with TIGR Matrix is possible.
- The prepectoral procedure allows for better quality of life for the patient with less postoperative pain.
- Immediate reconstruction after a mastectomy is possible, allowing the patient to recover faster, have a better body image as well as obtaining satisfying aesthetic outcome.

#### Submuscular

• Sub-pectoral breast reconstruction with TIGR matrix is also possible. Here the implant is placed partially under the pectoralis chest muscle. This method has the advantage of additional muscular protection against implant exposure or rippling. The lower and outer part of the implant is covered by the mesh to hold the implant in place. The upper pole of the implant is covered by the muscle. This type of reconstruction is often done in two stages with the use of a tissue expander to reach the desired volume. Subpectoral reconstructions have become less common in recent years. It is a more invasive procedure and patients may experience more discomfort.





## Comparing Complications of Biologic and Synthetic Mesh in Breast Reconstruction: A Systematic Review and Network Meta-Analysis

YOUNG-SOO CHOI, MD1 ET AL.

<sup>1</sup>Department of Plastic and Reconstructive Surgery, Korea University Ansan Hospital, Ansan, Republic of Korea, Arch Plast Surg 2023;50:3–9.

Seroma, Hematoma, Infection, Necrosis, Implant loss and Capsular Contracture were measured during this study with the following comments:

- "In this study, compared with ADMs, synthetic meshes had low infection and seroma rates."
- "Considering the low cost and satisfactory surgery results in retrospective and animal studies, absorbable synthetic meshes might be considered the gold standard method for the immediate breast reconstruction technique."

#### **EVIDENCE WITH**

TIGR® Matrix

#### **Clinical data Using TIGR® Matrix**

Clinical data using		Pompei 49 pat.	Sharma 105 pat.	Becker 62 pat.	Quinn* 121 pat. (2020)	Marthan** 195 pat. (2019)		Houvenaeghel (2022)		Wow
TIGR® Matrix	(2018)	(2017)	(2016)	(2013)		145 sub-pec.	78 pre-pec.	218 sub-pec.	98 pre-pec.	170 pat. (2022)
Average follow-up	17 Months	12 Months	18 Months	16 Months	23,6 Months	32 Months		12 Months		20 Months
Seroma	3.1%	3.3%	0%	1.8%	N/A <sup>a)</sup>	0.4%	3%	N/A <sup>a)</sup>	N/A <sup>a)</sup>	N/A***
Hematoma	1.5%	6.7%	0%	N/A	1%	5%	4%	3.7%	7%	1.7%
Infection	1.5%	1.7%	10.8%	3.6%	11%	7.6%	4%	2.2%	2%	4.3%
Flap necrosis	1.5%	5.0%	0%	1.8%	2%	1.4%	2.6%	0.5%	2.5%	3.3%
Implant loss	3.1%	None	6.7%	N/A	6%	10%	5%	6.4%	9.2%	8.1%

Capsular Contracture	Hallberg 49 pat.	Quinn* 121 pat.	Marthan** 195 pat.		
No adjuvant radiotherapy	4.9%	6%	9% (154 breasts)		
Adjuvant radiotherapy	N/A	N/A	51% (69 breasts)		

Synthetic and ADM in the same patient	Seroma		Hematoma		Infection		Flap necrosis		TE/ Implant loss
Hansson 47 pat. (2020)	Stage 1	Stage 2	Stage 1	Stage 2	Stage 1	Stage 2	Stage 1	Stage 2	Stage 1 & 2
Synthetic 24/23 pat.	8.3%	0%	4.2%	0%	0%	0%	0%	0%	2%
Biological 24/23 pat.	38%	0%	0%	0%	12.5%	4.3%	0%	0%	8.5%

<sup>\*</sup> In the skin-sparing mastectomy group

Please check www.novusscientific.com for the latest publications on TIGR Matrix.

<sup>\*\*</sup> No exclusion criteria, high risk cancer

<sup>\*\*\*</sup> The level of seroma was two times higher in the subpectoral group

<sup>&</sup>lt;sup>a)</sup> Seroma was not included in the results

### **TIGR**® matrix

- 100% synthetic
- Non animal based
- Long-term resorbable
- Biocompatible
- Dual stage degradation
- Strong
- Multifilament
- Warp-knitted

- Untwisted fibers
- Macro-porosity design
- No preparation needed, no rinsing
- Pliable and easy to cut
- Cost effective







SIZE	REF. NO.
SIZE	NET. NO.

10 x 15 cm	NSTM1015E

