

Meeting the surgical challenge: Chest wall reconstructions



Gore offers **TWO great options** for your chest wall soft tissue deficiency repairs.

The first is the GORE-TEX® Soft Tissue Patch, a specialty biomaterial constructed entirely of expanded polytetrafluoroethylene (ePTFE) designed to meet the needs of the most demanding soft tissue repairs with minimal complications. The second is GORE® DUALMESH® Biomaterial, which is the first dual-surface material constructed entirely of ePTFE that encourages host tissue ingrowth while minimizing tissue attachment in soft tissue reconstruction.

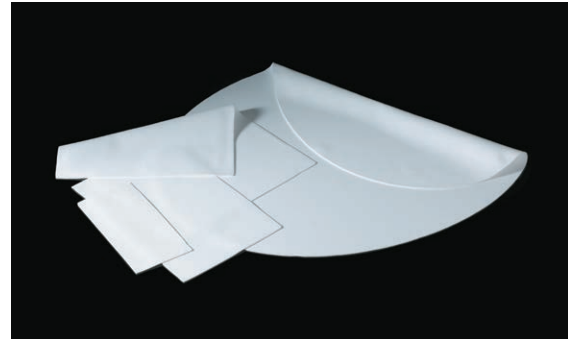
A key advantage of Gore ePTFE devices in chest wall reconstruction are their structures that inhibit the passage of fluid.¹ This helps in re-establishing pulmonary function by restricting air leakage and preventing the transfer of pleural fluid across the chest wall. The material's high, balanced strength:

- Allows the tension needed for a firm reconstruction that minimizes paradoxical wall movement
- Provides dependable suture retention

Yet, the material remains soft and highly conformable, allowing:

- Ease of handling
- Less irritation to surrounding tissues

Tissue ingrowth is encouraged by the structure of this unique material. This results in a significantly lower incidence of adhesion formation.² It combines strength with softness to provide unmatched performance and superior handling.



GORE-TEX® Soft Tissue Patch



GORE® DUALMESH® Biomaterial

GORE-TEX® Soft Tissue Patch

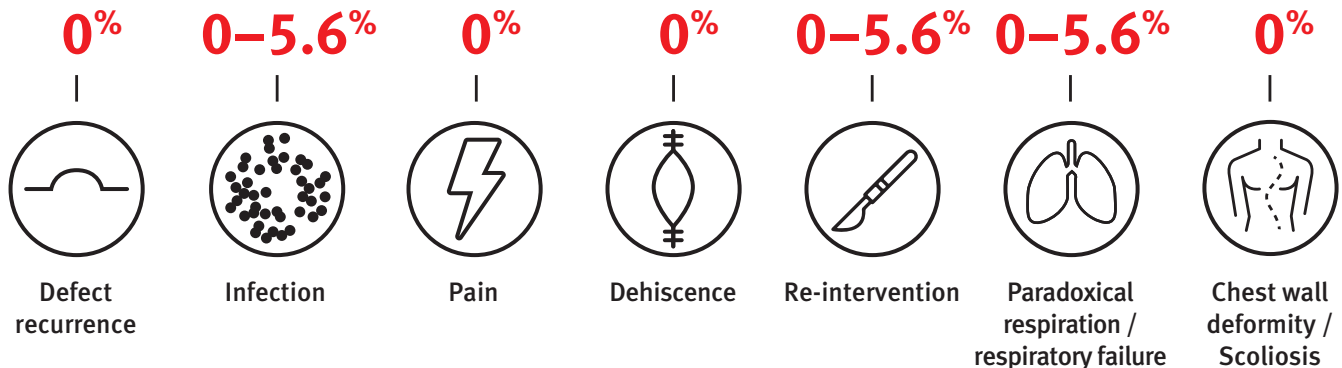
Five key studies demonstrate quality outcomes in chest wall soft tissue deficiencies.*



Literature Summary^{†,3-7}

Follow-up 24–72.7 months | 114 patients, Gore devices

Case series population includes chest wall reconstruction in adults



* Data on file 2020; W. L. Gore & Associates, Inc.; Flagstaff, AZ.

† These papers do not represent direct, head-to-head comparisons and may involve unique protocols, endpoints, enrollment criteria and other material differences.

GORE® DUALMESH® Biomaterial

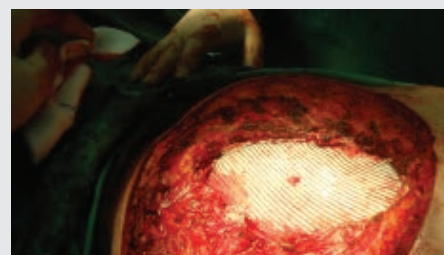
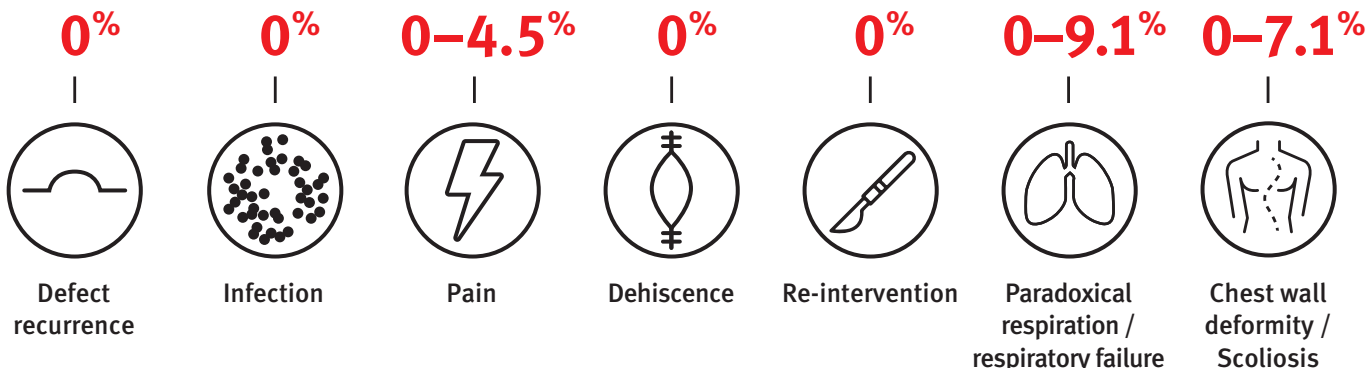
Five key studies demonstrate quality outcomes in chest wall soft tissue deficiencies.*



Literature Summary^{†,8-12}

Follow-up up to 36 months | 52 patients, Gore devices

Case series population includes pectus excavatum and chest wall reconstructions in pediatrics and adults



Procedure: Tumor and sternum resection including preparation of an abdominal flap. GORE® DUALMESH® Biomaterial is used to cover the osseous defect, site of the ribs and sternum. In this case, a 26 cm × 34 cm × 2 mm patch is used. Images courtesy of Vassilios N. Vassiliadis, M.D, Ph.D. © 2020

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- Pairolero PC, Arnold PG. Chest wall tumors. Experience with 100 consecutive patients. *Journal of Thoracic & Cardiovascular Surgery* 1985;90(3):367-372.
- Brown GL, Richardson JD, Malangon MA, Tobin GR, Ackerman D, Polk HC Jr. Comparison of prosthetic materials for abdominal wall reconstruction in the presence of contamination and infection. *Annals of Surgery* 1985;201(6):705-711.
- Halm HH, Hoffmann C, Winkelmann W. The use of a Gore-tex soft-tissue patch to repair large full-thickness defects after subtotal sternectomy. A report of three cases. *Journal of Bone & Joint Surgery – American Volume* 2001;83A(3):420-423.
- Huang H, Kitano K, Nagayama K, et al. Results of bony chest wall reconstruction with expanded polytetrafluoroethylene soft tissue patch. *Annals of Thoracic & Cardiovascular Surgery* 2015;21(2):119-124.
- Kang HJ, Lee SA, Park KS, Yang J, Yoo YB. Simultaneous chest wall reconstruction after sternectomy and modified radical mastectomy in locally advanced breast cancer with solitary sternal metastasis. *Journal of Breast Cancer* 2012;15(4):462-467.
- Tsushima T, Kowatari R, Kimura D, et al. Results of non-rigid prosthetic reconstruction with expanded polytetrafluoro-ethylene (ePTFE) soft tissue patch following chest wall resection for malignant tumors. [in Japanese]. *Kyobu geka. Japanese Journal of Thoracic Surgery* 2014;67(1):49-53.
- Hasegawa S, Kondo N, Matsumoto S, et al. Surgical risk and survival associated with less invasive surgery for malignant pleural mesothelioma. *Seminars in Thoracic & Cardiovascular Surgery* 2020;31(2):301-309.
- Kotoulas C, Papoutsis D, Tsolakis K, Laoutidis G. Surgical repair of pectus excavatum in young adults using the DualMesh 2-mm Gore-Tex®. *Interactive Cardiovascular & Thoracic Surgery* 2003;2(4):565-568.
- Lopez C, Correa A, Vaporciyan A, Austin M, Rice D, Hayes-Jordan A. Outcomes of chest wall resections in pediatric sarcoma patients. *Journal of Pediatric Surgery* 2017;52(1):109-114.
- OPB17 Nagayasu T, Yamasaki N, Tagawa T, et al. Long-term results of chest wall reconstruction with DualMesh. *Interactive Cardiovascular & Thoracic Surgery* 2010;11(5):581-584.
- Akiba T, Marushima H, Nogi H, et al. Chest wall reconstruction using Gore-Tex® dual mesh. *Annals of Thoracic & Cardiovascular Surgery* 2012;18(2):166-169.
- Collins AM, Granahan AM, Healy DG, Lawlor CA, O'Neill SP. Giant desmoid tumour of the thorax following latissimus dorsi and implant breast reconstruction: case report and review of the literature. *Irish Medical Journal* 2017;110(3):534.



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