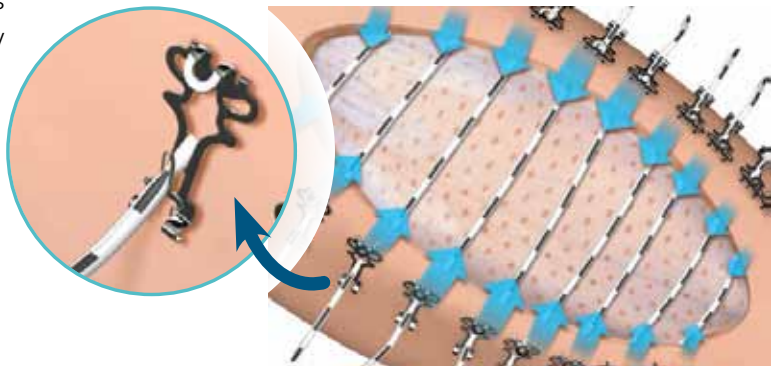
ABRA® Surgical

Managing an open wound means higher healthcare costs

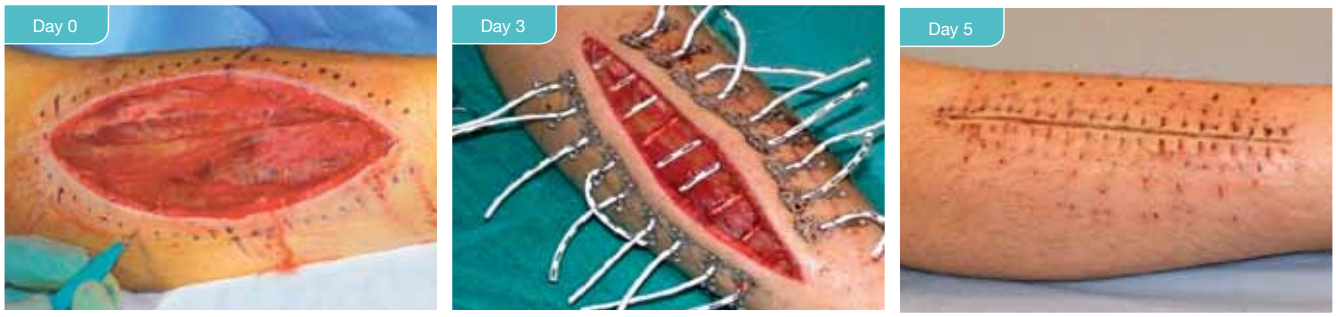
Subcutaneous Traction for Open Wounds

ABRA Surgical closes retracted skin defects through chronic cyclic tension. A sound primary closure replaces skin grafting and the associated rehabilitation, pain, and loss of function.

ABRA Surgical is indicated for use in preventing, controlling, reducing, and closing retracted soft tissue defects.



Results at a Glance



ABRA® Surgical works subcutaneously for added traction, as used for this fasciotomy.

Product	Code/Quantity
ABRA Surgical Skin Closure Set	**CWKO2A**
PACK: 50 cm Silicone Elastomer (1/pack)	10 packs/set
PACK: Skin Anchors (2/pack)	
Loop Cannulators (SWC02)*	2/set
Lancets	3/set

* Can be purchased seperately

A Dynamic Tissue Systems® Solution

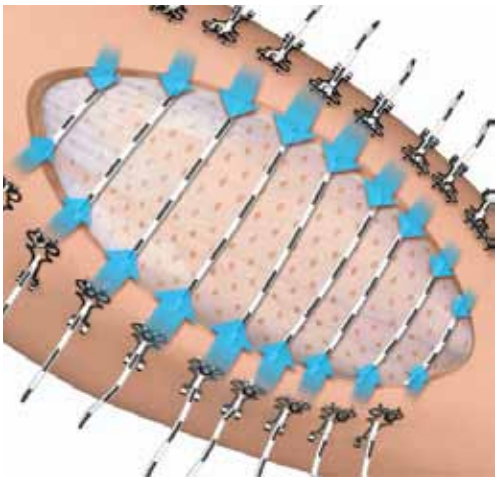
Open wounds impose serious clinical consequences

Dynamic Action

Gentle, unrelenting dynamic appositional forces (cyclic stretching) counters the retracting forces that keep wounds open.

How? Cyclic stretching of tissue facilitates collagen fiber rotation, increasing skin coverage. Chronic cyclic stretching leads to constructive remodeling including tissue generation and adaptation.[1]

Unlike static devices, dynamic therapeutic tension rapidly addresses the challenge of the retracted, stable wound. Therapeutic tension addresses the inertia required to return wound edges back to their original position for delayed primary closure.



Retracted Wounds

Open wounds retract laterally due to the inherent mechanical properties of tissue, increasing the degree of difficulty and time to definitive closure. A long-standing retracted open wound is not necessarily a permanent defect.

ABRA Surgical can return tissue back to its closed system state with normal functional tension.

Dynamic Wound Closure

Retraction Prevention

Tissue Support and Expansion

1. Johnson, TM, Lowe, L, Brown, MD, Sullivan, MJ, & Nelson, BR. Histology and physiology of tissue expansion. The Journal of dermatologic surgery and oncology. 1993; 19(12):1074-1078.

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www.dynamictissuesystems.com contactus@southmedic.com

Southmedic Inc., 50 Alliance Blvd., Barrie, ON Canada L4M 5K3 705-726-9383 1-800-463-7146 Toll free in North America

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