

A novel advanced bipolar tissue sealer provides **improved hemostasis** and **less thermal damage**

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Article Summary: Advanced bipolar devices intended for use in open surgery to divide and seal vessels, and cut, grasp and dissect tissue during surgery are shown to be reliable in sealing vessels over a range of sizes and vessel types. The ENSEAL® X1 Large Jaw advanced bipolar device was compared to the LigaSure Impact™ Open Instrument ex vivo for jaw temperature and burst pressure for sealed vessels. In vivo acute and survival studies in porcine models evaluated hemostasis, tissue sticking, thermal damage, adhesions and hemostasis at the distal tip of the end effector. In these ex

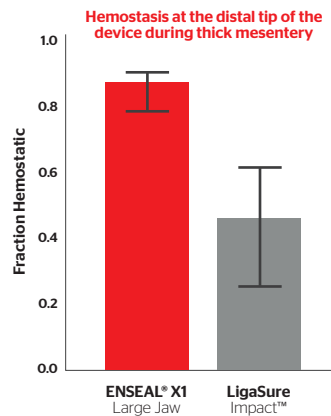
vivo and in vivo tests, advanced bipolar devices were shown to be reliable in sealing vessels over a range of sizes and vessel types. The novel design of X1 showed improved temperature control, thermal damage and hemostasis under difficult-to-access conditions. Clinical studies are needed to confirm these results.

Download the complete study

<http://oatext.com/pdf/GOS-3-167.pdf>

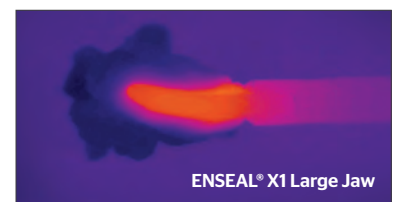
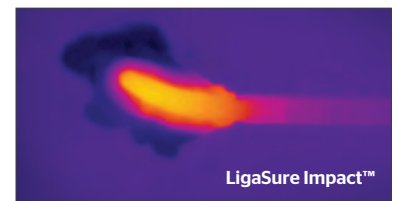
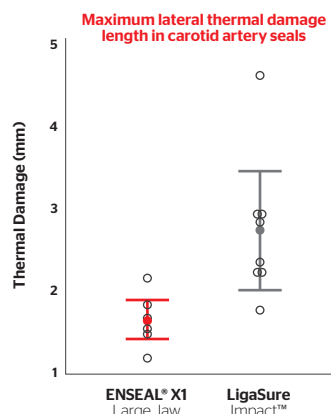
Better Hemostasis¹

In sealing and transecting the base of porcine mesentery, adjacent to the lymph nodes, the ENSEAL® X1 Large Jaw was **significantly more hemostatic** at the distal tip than LigaSure Impact™ in thick tissue.¹



Better Tissue Management²

Using transected porcine carotid artery seals, maximum lateral thermal damage was measured via histology. ENSEAL® X1 Large Jaw had **significantly less lateral thermal spread** than LigaSure Impact™.²



¹ Preclinical test of distal tip bleeding (ENSEAL® vs. Impact-LF4318) in thick porcine mesentery base (p<0.001). (C2170).

² Preclinical testing on porcine carotids (ENSEAL® vs. Impact-LF4318) that measured mean max lateral thermal damage via histology showed ENSEAL at 41% less thermal spread than Ligasure (p=0.005). (C2155).

For complete product details, see Instructions for Use.