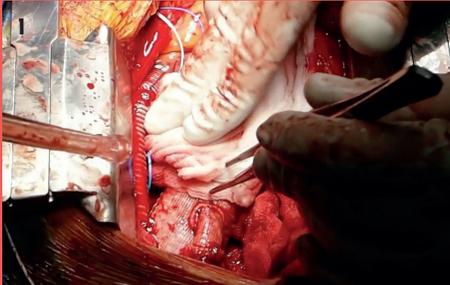


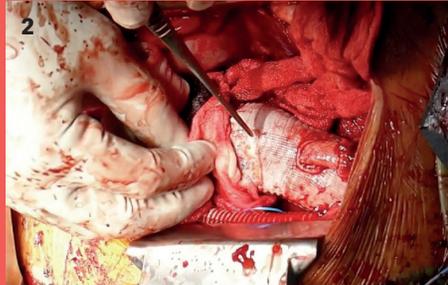
## Case example:

# Application of closed cell collagen matrix after ascending aorta and aortic arch replacement

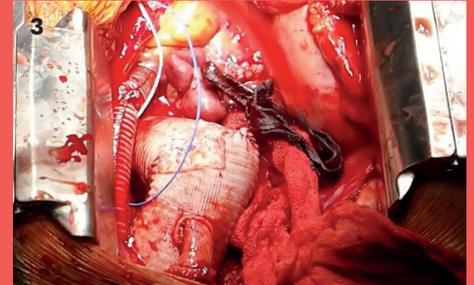
Enhanced hemostasis resulting in air and liquid tight barrier.



1: Application of TachoSil® between the ascending aorta and arch graft.



2: Application of TachoSil® between the ascending aorta and arch graft.



3: Local dry and additionally reinforced conditions after application of TachoSil®.

### Preliminary remarks:

- Extensive pathologies of the aortic arch with involvement of the ascending aorta, aortic arch and descending aorta can be treated in a one-stage procedure using the frozen elephant trunk technique.
- A hybrid graft is inserted, consisting of a conventional graft for arch repair and a stent graft segment for treating distal aortic segments.
- The operation is performed on a stopped heart in hypothermia.
- Because the procedure is performed in deep hypothermia, there is an increased risk of bleeding postoperatively.
- Fibrin sealant patch adhesion is an additional option for sufficient hemostasis.

### Patient history:

- 60-year-old patient with a 55 mm long aneurysm in the ascending aorta and a 50 mm long aneurysm in the aortic arch.
- Indication to insert an arch graft.

### Surgical procedure:

- Elective primary intervention.
- Ascending aorta and aortic arch replacement using the frozen elephant trunk technique.
- Graft suture supported with TachoSil® (4.8 x 4.8 cm).

### Conclusion:

- Very good hemostasis in the region of the graft sutures.
- Time until hemostasis was reduced by 10 minutes.
- The operating time was reduced by 15 minutes.

**Reference:** According to information and estimates from Prof. Dr. Martin Czerny, Freiburg University Heart Centre, Bad Krozingen GmbH, Germany.

**TachoSil® SEALANT MATRIX**  
(human fibrinogen, human thrombin)

**Presentation:** TachoSil® is a topical fibrin sealant patch consisting of human fibrinogen and human thrombin coated onto an equine collagen sponge. The active side of the patch is yellow in color due to the presence of a colorant riboflavin (E101); and the non-active side is off-white in color.

**Indication and Important Safety Information**

**Indications:** TachoSil® is a fibrin sealant patch indicated for use with manual compression in adult and pediatric patients as an adjunct to hemostasis in cardiovascular and hepatic surgery when control of bleeding by standard surgical techniques (such as suture, ligature or cautery) is ineffective or impractical.

**Limitations for Use:** • TachoSil® cannot safely or effectively be used in place of sutures or other form of mechanical ligation for the treatment of major arterial or venous bleeding. • Not for use in children under one month of age.

**Dosage & Administration:** For topical use on cardiovascular or hepatic tissue only • Determine the number of patches to be applied by the size of the bleeding area. • Apply the yellow, active side of the patch to the bleeding area. • When applying TachoSil®, do not exceed the maximum number of patches.

Refer to the Full Prescribing Information for details on

administration and maximum number of patches.

**Contraindications:** • Do not apply TachoSil® intravascularly. Intravascular application of TachoSil® may result in life threatening thromboembolic events. • Do not use TachoSil® in individuals known to have anaphylactic or severe systemic reaction to human blood products or horse proteins.

**Warnings & Precautions:**

**Thrombosis.** Thrombosis can occur if TachoSil® is applied intravascularly. Ensure that TachoSil® is applied to the surface of cardiac, vascular, or hepatic tissue only.

**Hypersensitivity Reactions.** Hypersensitivity or allergic/anaphylactoid reactions may occur in patients receiving TachoSil® for the first time or may increase with repetitive applications.

**Infection.** Avoid application to contaminated or infected areas of the body, or in the presence of active infection.

**Adhesions.** TachoSil® contains collagen, which may adhere to bleeding surfaces. May carry a risk of gastrointestinal obstruction in abdominal surgery due to tissue adhesions. To prevent the development of tissue adhesions at undesired sites, ensure tissue areas outside the desired application area are adequately cleansed before administration of TachoSil®.

**Compression.** Avoid packing in cavities or closed spaces

because this may cause compression of underlying tissue.

**Dislodged Material.** Use only the minimum number of TachoSil® patches necessary to achieve hemostasis. Do not pack. Remove unattached pieces of TachoSil®.

**Transmissible Infectious Agents.** May carry a risk of transmitting infectious agents, such as viruses, and theoretically, the variant Creutzfeldt-Jakob disease (vCJD) agent and the Creutzfeldt-Jakob disease (CJD) agents.

**Use in specific populations: Pediatric Use:** Use of TachoSil® in children under the age of one month may be unsafe or ineffective due to small size and limited ability to apply the patch as recommended.

**Adverse Reactions:** The adverse reactions reported in more than 1% of patients during clinical trials were anemia, nausea and vomiting, fever, abdominal pain, increased white blood cell count, ascites, itching, atrial fibrillation, pleural effusion, gastrointestinal hemorrhage, wound infection, hypophosphatemia, urinary tract infection, and post-procedural bile leakage in hepatic surgery.

Refer to the Full prescribing Information for details on, contraindications, warnings, precautions, and adverse reactions.

**Marketing Authorisation Holder:** Corza Medical GmbH, Speditionstrasse 21, 40221 Düsseldorf, Germany.

US License no. 2294. **Revision date:** 11/2022