



## Carter-Thomason CloseSure System® From CooperSurgical *Prevent Port-Site Herniation*

The importance of closing port sites has been well established.<sup>1</sup> Laparoscopic port-site hernias have been frequently reported. One source cites that complications related to port site closure after laparoscopic surgery have been reported in .23 to 6.3% of patients.<sup>2</sup> These complications include wound infection, dehiscence, herniation of the small bowel, entrapment of omentum, and incarcerated Richter's hernia.<sup>1,2</sup> Closure of port sites, especially those measuring 10mm or more, has been recommended to prevent this from occurring.<sup>3</sup> The patented **Carter-Thomason CloseSure System®** from **CooperSurgical (Trumbull, CT)**, is designed to prevent port-site herniation and related complications. The system is comprised of two components: the unique Pilot® guides and the Carter-Thomason® suture passer. With the Carter-Thomason CloseSure System®, surgeons can depend upon reproducible full-thickness closure that can be achieved quickly, safely, and accurately, in 90 seconds or less with routine use.<sup>2</sup> The Carter-Thomason® system is the only comprehensive port-site closure system that supports multiple patient anatomies and other applications beyond closing port sites. In a prospective, randomized study comparing multiple port-site closure techniques following laparoscopic surgery, the Carter-Thomason CloseSure System® achieved a 100% success rate.<sup>2\*</sup>

“The most significant complication of inadequate trocar site closure is a port-site hernia,” notes Justin Chura, MD, a Gynecologic Oncologist with Crozer-Chester

Medical Center (Upland, PA). “When the hernia occurs, it is a significant complication for the patient because it usually results in a second surgical procedure to fix the defect. This translates into a significant burden for the patient, because he or she will require a second surgical procedure, miss additional time from work, and possibly be hospitalized. One of the primary benefits of a laparoscopic procedure is a quick and rapid recovery. If you encounter this complication, that potential benefit for the patient is gone. The occurrence of an incisional hernia would also involve extra costs to the hospital for usage of additional resources.”

The easy-to-use, cone-shaped Pilot Guide of the Carter-Thomason System has the necessary length and is angled appropriately



*Carter-Thomason CloseSure System®*

to assure full-thickness closure through all adipose layers, fascia and peritoneum. The suture passer has a hinged jaw to load and pick up a suture, and a sharp needle that glides through tissue for easily reproduced, firm sutures. Dr. Chura says the cones that come with the system significantly simplify the closure process. "You don't have to extend the incision to see the fascia. The cone fits down through the laparoscopic incision and the needle guide is angled in a way that assures you are going to get the fascia in your suture bite. There are other competitors on the market, but none have the cone that actually guides the direction of the needle, which I think is the critical part of the Carter-Thomason CloseSure System®."

Dr. Chura also finds that competitive systems or other methods, such as hand suturing, do not consistently produce the same results as the Carter-Thomason System. "Hand suturing, particularly in an obese patient, can be very difficult if not done under direct visualization, as you don't know if you are always getting the same closure. Additionally, you can close the fascia layer, but there still can be a defect in the peritoneum, where a hernia can then occur, which I've actually seen in practice. Using the Carter-Thomason device, you can close both of those layers, under direct vision."

The Carter-Thomason CloseSure System® XL is designed specifically for port-site closure after laparoscopy performed on obese and bariatric patients. The XL version has additional features, such as

lengthened instruments to achieve full-thickness closure in heavier patients. David B. Galland, MD, an ObGyn with Marin General Hospital (Larkspur, CA), points out, "With a very obese patient, it's almost impossible to get exposure to the critical fascia layer through a smaller trocar site. Without extending the excision just for visualization, you can't often be sure if you have closed the fascia or not. This is where the Carter-Thomason System® XL really helps to close that layer and prevent port-site herniation for this high-risk group." The Carter-Thomason CloseSure System® XL 15mm Pilot® Guide also provides two additional suture holes for reliable results in closing larger wounds on obese and bariatric patients with thick abdominal walls.

Naved A. Jafri, MD, of Obstetrics and Gynecology Associates of Hampton (Hampton, VA), has been using this system now for six years. "I think it is better than the previous systems we have used. We have done over 600 cases now using the Carter-Thomason System and have never seen an incisional hernia. Not only are our results better, but this system has cut down on procedure time." Dr. Jafri has also found that having all of the components integrated into the Carter Thomason System is beneficial during procedures. "One of the biggest delays in the operating room with laparoscopy is having someone run to get an instrument you need, for which there are frequently multiple components involved. When you have a straightforward closure device like the Carter-Thomason, it's much easier."

Dr. Jafri sums it up by saying, "Often times with newer laparoscopic equipment there is fear of a learning curve, or there is a perception that it will be difficult to master the new equipment, but the Carter-Thomason System is a very, very easy system to incorporate into your practice. In medicine often we talk about procedures being 'see one, do one, teach one,' and I believe this system falls into that category."

The Carter-Thomason CloseSure System® is designed for varied patient anatomies with specific pilot guide sizes: 5mm, 10/12mm, and 15mm sizes in Standard and XL. Other applications for the system include ligation of abdominal wall bleeders, hernia mesh tacking, repair of umbilical hernias, and temporarily repositioning of anatomic structures. For more information about the Carter-Thomason CloseSure System® from CooperSurgical, please call XXXX or visit the company's website at [www.coopersurgical.com](http://www.coopersurgical.com). ♦

\* There were no complications or gas leakage, and bleeding was controlled in all of the surgeries.

## References:

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