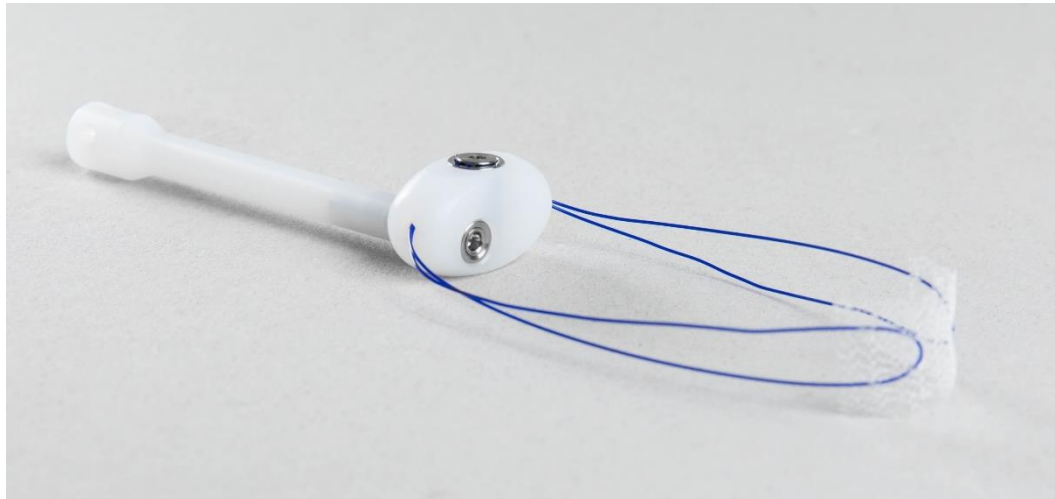


REMEEEX[®]

FEMALE

The Lifetime Readjustable System

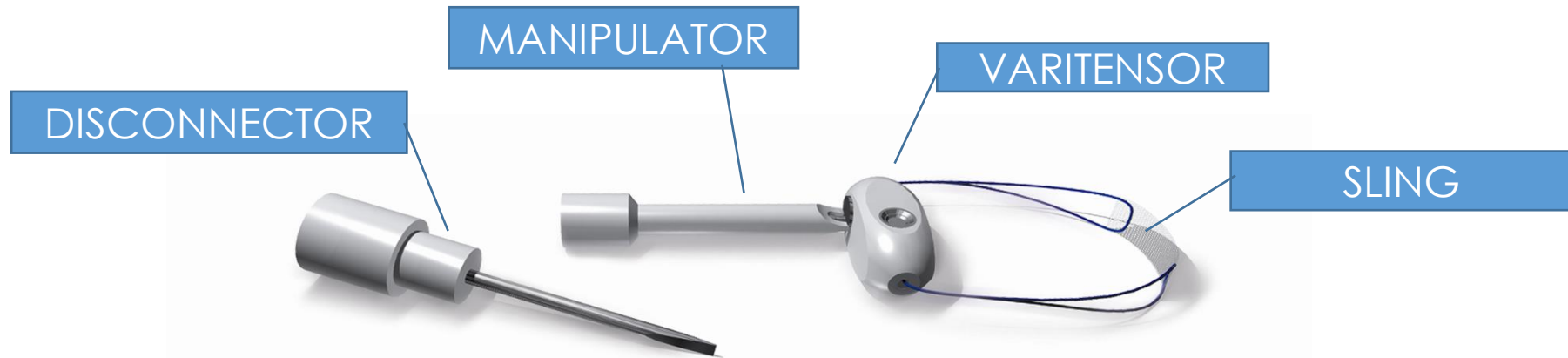


WHAT IS IT?

- The only lifetime readjustable sling to treat female stress urinary incontinence
- A very small mesh is placed under the urethra and is connected to a varitensor placed over the rectus abdominal fascia.
- The varitensor allows to adjust the sling support level to the urethra to prevent urine leakage.
- REMEEX is an active pressure transmission system, providing extra support to the urethra under stress.
- Indicated to treat SUI grade III (severe): Fixed urethra, intrinsic sphincter deficiency (ISD) and reinterventions.



COMPLETE SYSTEM



SINGLE USE
NEEDLES

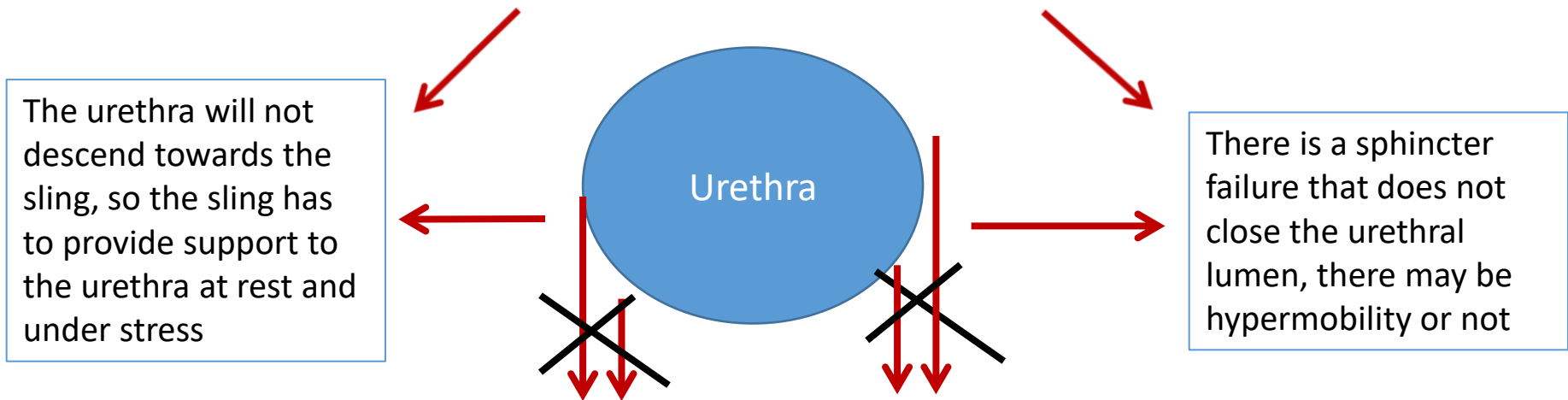
COMPLETE SYSTEM

- **SLING:** 1.25 x 3 cm polypropylene monofilament macroporous sling, with two monofilament traction suture threads
- **VARITENSOR:** Regulation device that will remain implanted over the rectus fascia. Allows to adjust the level of the sling.
- **MANIPULATOR:** Connected to the varitensor, by rotating clockwise (increasing) or counterclockwise (decreasing), it will activate the varitensor mechanism to elevate or lower the sling level.
- **DISCONNECTOR:** To connect or disconnect the manipulator from the varitensor.



What is the physiological mechanism of stress UI in severe cases?

In cases of fixed urethra or intrinsic sphincter deficiency:

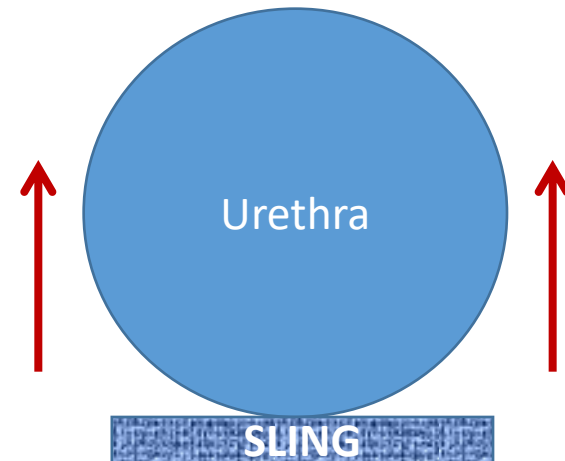


In cases of severe incontinence there will be a sphincter failure (anatomical, denervated ...). The urethral pressure will be low, so placing a tension-free sling may not be enough. In these cases we need a sling that provides urethral support at rest avoiding retention and also extra urethral support under stress (when intra abdominal pressure increases).

What are we looking for?

Reach the CONTINENCE point with NO retention and NO erosion

So the question is: How much tension should I apply?



The sling should reach the urethra providing continence and avoiding retention

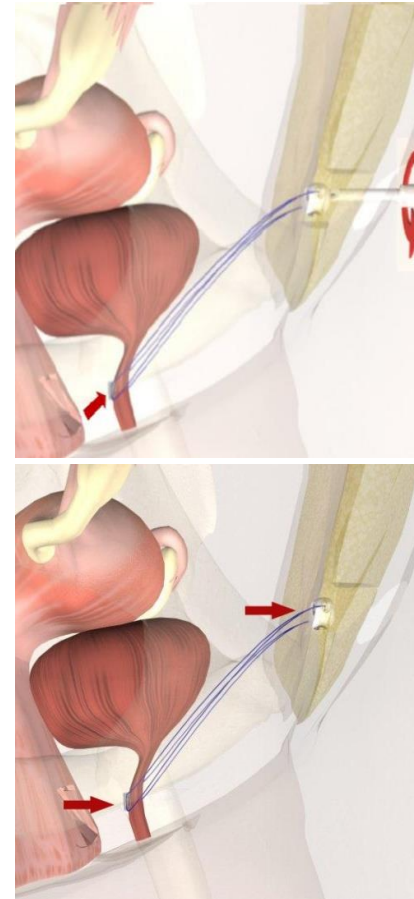


How does Remeex work?

Remeex is placed as a TVT.
The sling will rest under the urethra.

The sling is connected to the varitensor with two monofilament traction threads that will lay over the rectus fascia.

By manipulating the varitensor we can adjust the tension of the sling at any time during the patient's life.



What is Remeex offering?

DYNAMIC PRESSURE TRANSMISION SYSTEM

Provides extra urethral support when needed (when intra abdominal pressure increases) and not at rest, avoiding erosion and urine retention.

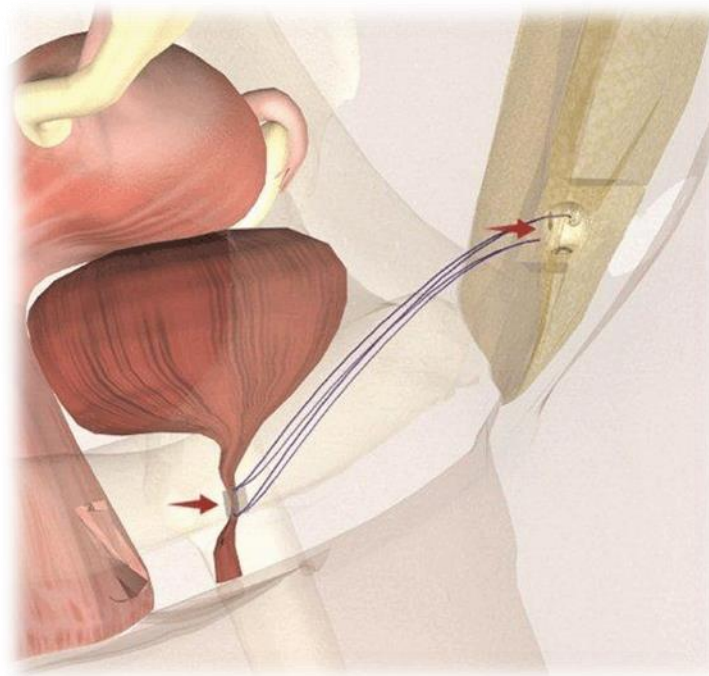
SLING ADJUSTABILITY AFTER INTERVENTION AND LIFETIME

Allows to adjust the sling urethral support level to each patient in standing up position, while caughing, or doing the efforts that drive her to incontinence. The adjustment is done one or two days after the intervention and can be repeated lifetime as many times as needed with local anesthesia procedure.

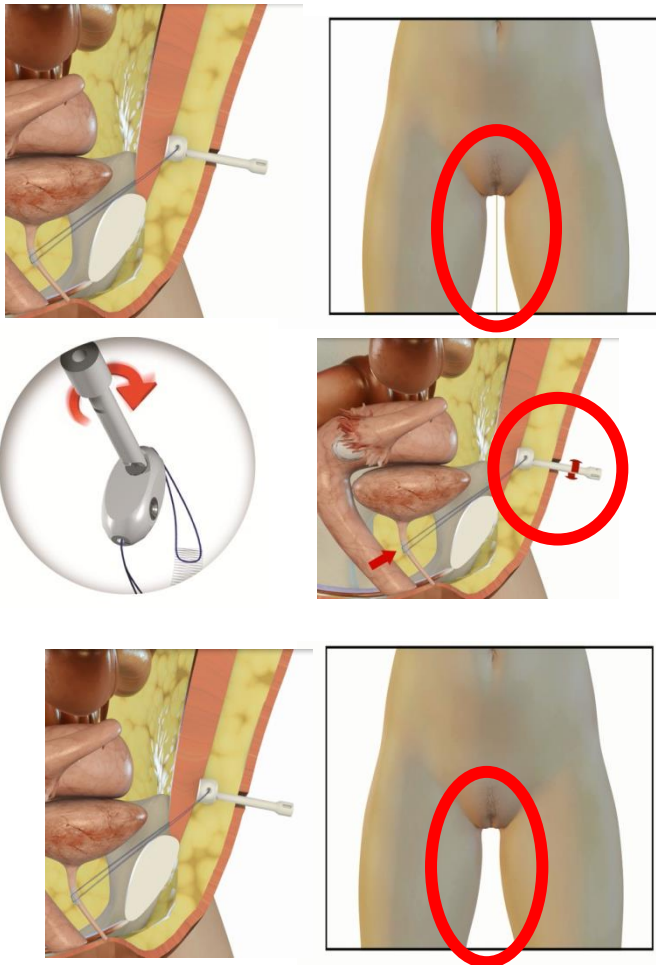


Dynamic pressure transmission system

Remeex has a unique DYNAMIC PRESSURE TRANSMISSION SYSTEM. This means that we will ONLY have an extra urethral support if necessary (under an increase in intra-abdominal pressure: coughing, laughing, etc.) not at rest. This allows to apply the minimum necessary support to the urethra and no more, prevents from having retention and / or erosion.



Sling adjustability after surgery and lifetime



1. Incontinence.



2. Adjust.

24h/48h

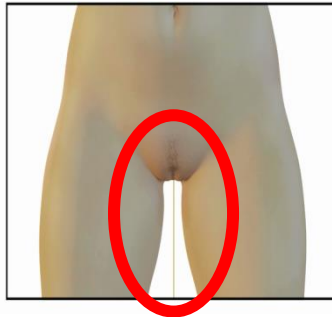
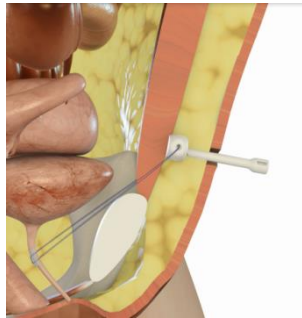
When necessary
throughout the
patient's life



3. Continence.

Sling adjustability after surgery and lifetime

The adjustment is done under stress conditions with the patient standing up

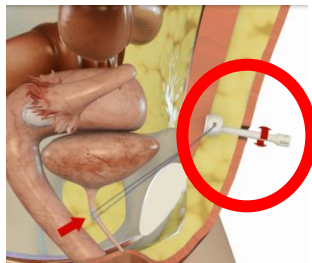


1. Incontinence

After filling the bladder with saline solution, the patient is asked to stand up and perform Valsalva manouvers (laughing, coughing ...)

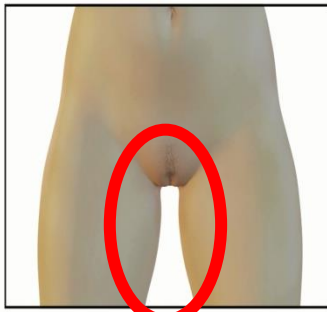
2. Adjust

Adjust by rotating the manipulator clockwise (check continence every three complete turns) until continence is reached under stress conditions. This is a precise system that elevates the urethra 1mm each complete turn.



3. Continence

Continence is achieved when there is no loss of urine under stress conditions. This is the minimum level of support that each patient needs



Adjust 24/48h after surgery and whenever is necessary (lifetime)

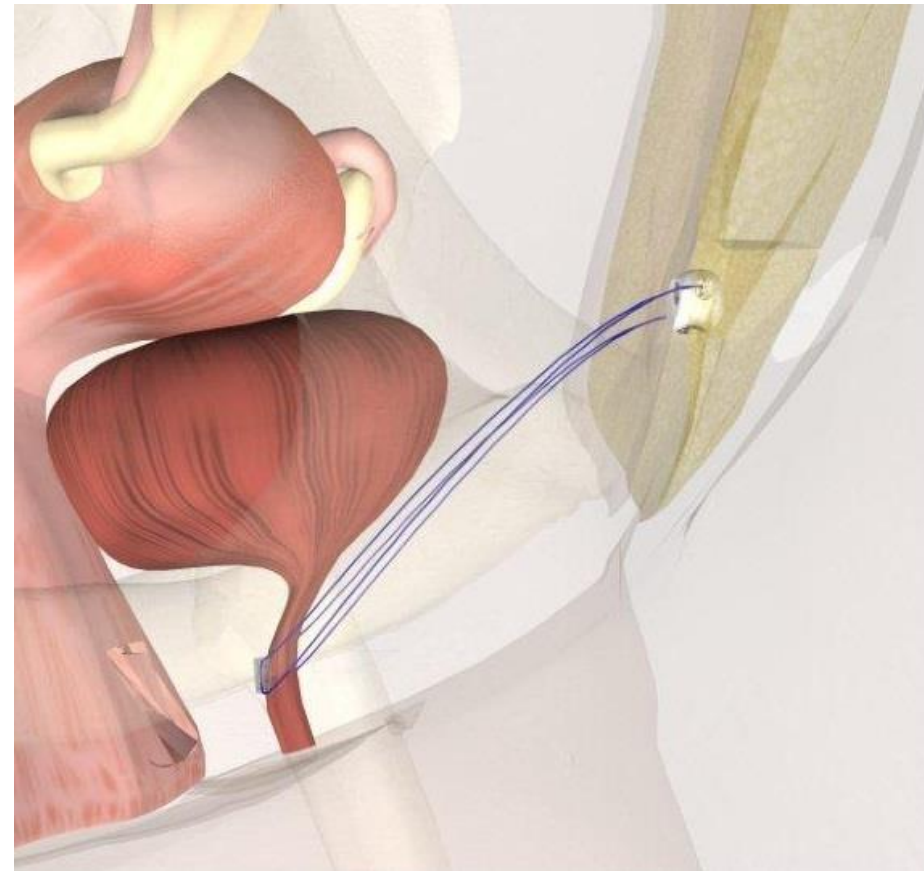
The first adjustment is done the day after surgery with the patient standing up.



VIDEO ADJUSTMENT

ADVANTAGES AND BENEFITS

- Dynamic pressure transmission system: extra support to the urethra only when necessary, not at rest
- Readjustable for life
- Customizable: tailored tension to every patient's need
- Long term efficacy over 90% in non easy patients



Remeex Indications

The only solution with good results in non easy patients with:

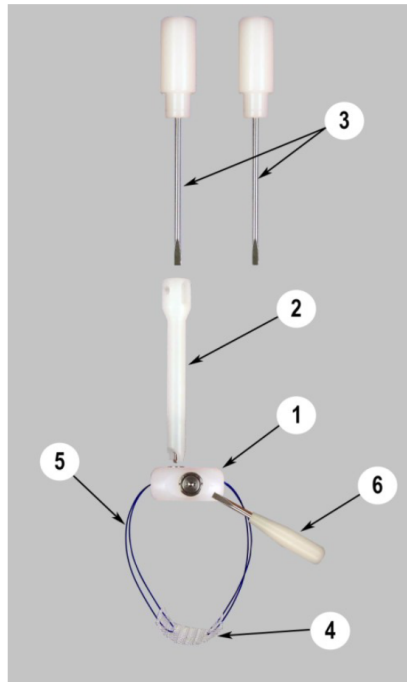
- ✓ ISD (Intrinsic Sphincter Deficiency)
- ✓ FIX URETHRA
- ✓ REDOES

Successful readjustments made after 16 years.
Excelent long term results in all publications

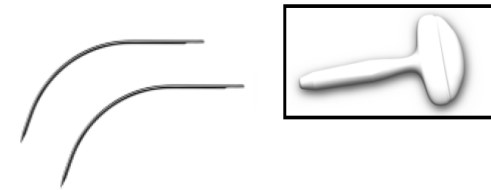


MATERIAL NEEDED IN THE OR

SREM-01: Remeex female Kit that contains



- 1—Varitensor
- 2—Manipulator
- 3—Disconnectors
- 4—Sling
- 5—Traction Threads
- 6—Screwdriver



- 7—Single-use, retro pubic, Remeex Passers



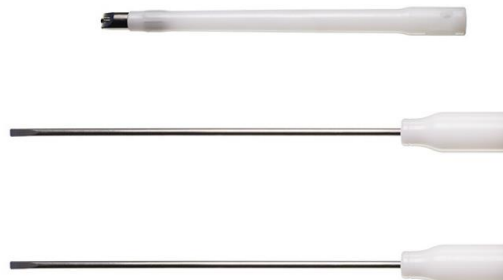
MATERIAL NEEDED IN THE OR

In the event that long-term readjustments have to be made, there are readjustment kits:

- **AR – 01:** Readjustment Kit (manipulator + disconnecter)



- **AR-01L:** Readjustment Kit Long (long manipulator + long disconnecter) for obese patients



SURGICAL TECHNIQUE

- Insert surgical video

OPERATING ROOM REMINDERS

- Perform abdominal transversal incision 2cm over the pubis and dissect until the rectus fascia
- Perform a 2.5cm longitudinal incision at the anterior vaginal wall
- Perform cystoscopy to check bladder integrity after passing the needles
- Change gloves after closing vaginal incision and returning to abdominal site
- Clean the traction threads with antibiotic solution before connecting the threads to the varitensor and also the varitensor itself and sling.
- Leave the varitensor 3cm away from rectus fascia. No tension has to be applied at surgery.



COMPETITORS

1. RETROPUBIC SLINGS (TVT)

With TVT or TOT the final tension on the urethra will depend on the tension applied in the operating room plus the retraction that the mesh may suffer (approximately 20-30%).

There is no possibility to readjust the tension after the intervention, nor at the long term since the sling will be completely integrated into the tissue.

Success rates are around 70%.

2. FASCIAL SLINGS (PUBOVAGINAL SLINGS)

With Fascial slings they have the same issues, the tension will be applied at surgery and there won't be second chance.

25% of the patients will have virgino disfunctions and success rate no higher than 75%.

3. BULKING AGENTS

They are not a permanent solution, good for patients that won't or cannot go through surgery process.



BENEFITS FOR THE HEALTHCARE PROFESSIONAL

BENEFITS AGAINST TOT / TVT

- It's lifetime readjustable. A recurrent patient it's not a failure anymore, it's a readjustment that can be done in the office with local anesthesia in 10 minutes with great reimbursement policy.
- Provides a dynamic pressure transmission system.
- Customized urethral support to each patient, applied after surgery with patient standing up.
- Intuitive way to adjust all patients avoiding the need to guess tension.
- Proven long term efficacy above 90% in ISD, fixed urethra and recurrences / failures.



BENEFITS FOR THE PATIENT

- Lifetime readjustable
- Long term success rate above 90%



KEY MESSAGES

Efficacy over 90%

Customizable accordingly to patient needs

Easy to place and Readjustable for life

Dynamic pressure transmission system

THANK YOU



The Continence Company



Robina
Group Companies