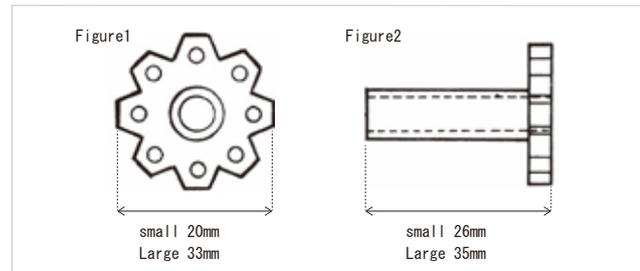


Perineal hernia plate

For Animal General Medical Devices



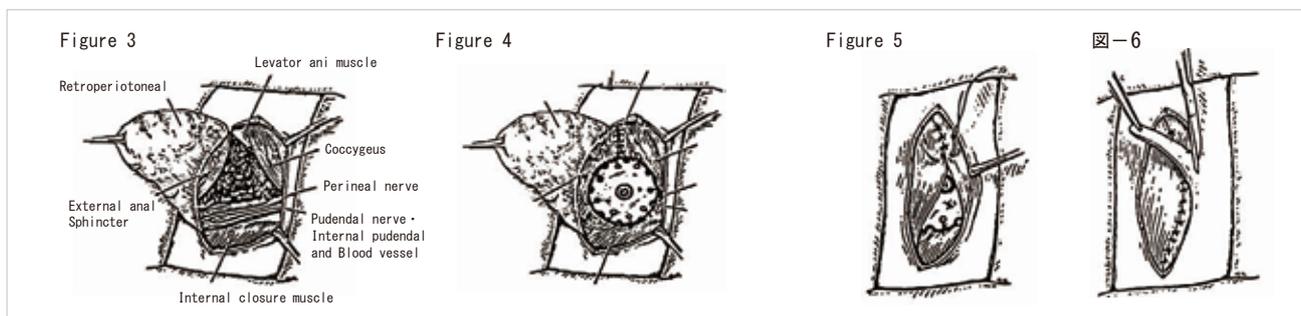
Silicone plate for repair of Perineal hernia.
Reduce the risk, Complication and time of operation.
Make the operation easier even if there is muscle atrophy.



manufactured by : FUJIHIRA INDUSTRY CO.,LTD.

Code No	Spec	Size (mm)	unit	material
20086000	small sterilized	6.5φ×20φ×26	1ea	Silicone rubber
20086500	Large sterilized	12φ×33φ×35		

● Electrobeam Sterilization



■ Silicone Plate:

The plate enables surgery on animal weighing from 7kg up to 16kg. Suture through the holes in the disc of the silicone plate shown in figure.1 with surrounding tissue.

Relieve the pressure on the pudendal nerve and perineal arteriovenous by the groove around the disc and prevent nerve injury and arteriovenous congestion.

By directing the cylindrical part of the silicone plate shown in fig.2 to the abdominal part, re-prolapse of the abdominal organ is suppressed, and the hole made in the cylindrical part is for the purpose of loosening the ingress of the connective tissue and thereby expecting the silicon plate to be firmly fixed.

■ Method of Surgery

There is some surgical repair method of perineal hernia, (1) Suturing surrounding anal sphincter, anal fistula muscle, coccygeus muscle, and internal obturator muscle forming one hernia (2) Inverting the internal obturator muscle to close the hernia part. (3) Closing the hernia part by the mesh fiber (4) Fixing the vas deferens in the abdominal cavity, etc. However, in any case there are some problems such as long procedures for surgery, recurrence, and difficulty in performing of the surgery.

The method using a silicone plate has a very short operation time and can be easily operated even if there is muscle atrophy. The surgical procedure is described below.

1. Acupuncture an anus with purse string suture.
2. Perform castration surgery
3. Open the skin of the hernia area and check the hernia ring
4. Acupuncture the organ that has prolapsed into the hernia area into the abdominal cavity and attach the silicone plate to that area
5. Suture the silicone plate and surrounding coccygeus muscle, anal fistula, anal sphincter, and internal obturator
6. Suture the retroperitoneum
7. Remove excess skin and close skin. For suturing, non-absorbable monofilament sutures are more preferred.