

Meril Endo Surgery Private Limited Artwork approval

IFU - MITSU FST (62 X 300) mm

INSTRUCTIONS FOR USE

MITSU FST™

MANUFACTURED BY



MERIL ENDO SURGERY PVT. LTD.

E-mail: enquiry.endosurgery@merillife.com

Meril Park, F3 (E1-E3), Survey No.1575 and Meril Park 2, F0, F1, F2 & F4, Survey No. 879, Muktanand Marg, Chala, Vapi, Valsad 396191, Gujarat, India. Customer Care No.: 18004194433.

 ϵ 0297 Web: www.merillife.com EC REP **OBELIS S.A**

Bd. Général Wahis, 53, 1030 Brussels, Belgium T: +32 2 732 59 54 F.: +32 2 732 60 03 E: mail@obelis.net W.: www.obelis.net

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MITSU FST™

ABSORBABLE POLY(GLYCOLIDE/L-LACTIDE) SURGICAL SUTURE U.S.P

DESCRIPTION MITSU FST^TM is a braided coated synthetic absorbable sterile poly(glycolide/l-lactide) surgical suture. It is composed of a copolymer made from 90% glycolide and 10% L-lactide.

MITSUFST™ sutures are coated with a mixture containing equal parts of

copolymer of glycolide and lactide and calcium stearate. The empirical formula of the copolymer is $(C_2H_2O_2)_m$ $(C_3H_4O_2)_n$ and calcium stearate is $C_{\rm ag}H_{\rm 70}O_4Ca.$ The rapid loss of strength is achieved by using polymer material with

lower molecular weight than that of regular MITSU $^{\text{TM}}$ suture. Poly(glycolide/I-lactide) copolymer and poly(glycolide/I-lactide) with

calcium stearate exhibit non-pyrogenic properties and elicit only slight tissue reaction during absorption. MITSU FST™ sutures are available in

Available in a broad range of suture sizes and lengths, MITSU FSTT comes with standard stainless steel needles of varying types and sizes. MITSU FST™ complies with the "Absorbable Surgical Suture" requirements as per the United States Pharmacopeia (U.S.P) and "Sterile Synthetic Absorbable Braided Strands" requirements as per the European pharmacopeia (E.P.). However, there may be occasional minimum oversize in diameter to U.S.P. requirement for some suture sizes. U.S.P. except for diameter.

MITSU FST^M sutures are used only where short term wound support is required and also where the rapid absorption of the suture is desirable. The rapid absorption profile is particularly useful for applications such

INTENDED USER GROUP
MITSU FSTTM sutures are intended to be used by Healthcare
professionals, general physicians and surgeons who are well-trained in
performing soft tissue approximation and ligation.

MITSU FST™ sutures are intended to be used in both men and women

including adults and elderly age groups.

MITSU FST^M sutures are used for soft tissue approximation and/or ligation where only short term wound support is required and also where the rapid absorption of the suture is desirable.

INTENDED PURPOSE

SELECTION CRITERIA
The selection of suture for implantation in the surgery depends upon patient condition, surgical technique, wound size, tissue characteristics and surgeon's preference. The device is used by professional

PERFORMANCE
MITSU FST™ leads to ingrowth of fibrous connective tissue due to minimal initial inflammatory tissue reaction. MITSU FST™ gradually loses tensile strength and is finally absorbed by hydrolytic process During hydrolysis, the copolymer degrades to glycolic and lactic acids which are then absorbed and metabolized in the body. Significant tensile strength i.e. 50% of the original is retained until initial 5 days. However, by approximately 10-14 days post implantation, the original tensile strength is completely lost. Complete absorption of MITSU FSTT suture usually takes place by 42 days

Due to rapid loss of tensile strength, MITSU FST™ suture should not be used where extended approximation of tissue under stress is required or wound support beyond 7 days is essential. These sutures are not to suture is not recommended to be used in children, infants and pregnant or breastfeeding women.

WARNINGS

Surgeons should consider the in vivo performance (under 'PERFORMANCE' section) and should be familiar with surgical procedures and techniques involving absorbable sutures before employing MITSU FST™ suture for wound closure, as the risk of wound dehiscence may vary with the site of application and the suture material

In surgery of the urinary or biliary tracts, care should be taken to avoid prolonged contact of MITSU FST™ suture with salt solutions, to prevent

calculus formation

This suture may be inappropriate in patients suffering from conditions which may delay wound healing e.g. patients that are elder, malnourished or debilitated. As this is an absorbable suture, the use of supplemental non-absorbable sutures should be considered by the surgeons in the closure of the abdomen, chest, joints or other sites subject to expansion or requiring additional support.

Date: 13.03.2025

PRECAUTIONS
Acceptable surgical practice should be followed for the management of

contaminated or infected wounds. Skin sutures which remain in place longer than 7 days may cause localised irritation and should be snipped off or removed

In some cases, particularly orthopedic procedures, immobilization of joints by external support may be employed at surgeon's discretion. In tissue with poor blood supply, care should be taken while using absorbable suture as suture extrusion and delayed absorption ma occur. Subcuticular sutures should be placed as deeply as possible to minimize the erythema and induration normally associated with the

absorption process. In handling MITSU $FST^{\text{\tiny{IM}}}$ or any other suture material, care should be taken to avoid damage. Avoid crushing or crimping due to the application of surgical instruments such as forceps or needle holders. Adequate knot security requires the acceptable surgical technique of flat and square ties with additional throws as indicated by surgical circumstances and the experience of the surgeon.

Care should be taken to avoid damage while handling surgical needles. Grasp the needle in an area one third (1/3) to one half (1/2) of the distance from the attachment end to the sharp opini. Grasping in the

distance from the attachment end to the sharp point. Grasping in the sharp point area could impair the penetration performance and cause sharp point area could impair the penetration performance and cause fracture of the needle. Grasping at the butt or attachment end could cause needle-suture detachment, bend or breakage. Reshaping needles may cause them to lose strength and be less resistant to bending and breaking.

Users should exercise caution while handling surgical needles to avoid inadvertent needle stick injury. Discard the used needles appropriately.

ADVERSE REACTIONS

Adverse reactions associated with the use of MITSU FST™ include

STERILITY
MITSU FST™ sutures are sterilized by irradiation as indicated on the package. Do not re-sterilize! If re-sterilized, product may degrade and not perform as intended. Do not use if package is opened or damaged Discard opened remaining unused sutures as per the local area discard

 $\begin{tabular}{ll} \textbf{STORAGE} \\ \textbf{Recommended storage conditions: Between 15°C and 30°C, away from moisture and direct heat. Do not use after expiry date.} \\ \end{tabular}$

The product is instructed to be used single time only. If used multiple times it may lead to cross contamination / infection

DISPOSAL OF PRODUCTDisposal of the unused/used product and packaging should be carried out in accordance with hospital, administrative and/or local government

SSCPSUMMARY

A summary of safety and clinical performance for MITSU FST™ Suture can be found at the following link (once the EUDAMED will be

https://ec.europa.eu/tools/eudamed

"Contact Meril Endo Surgery Pvt. Ltd. and Competent authority of the member state in case of any serious incident occur with the

SYMBOLS USED ON LABELLING



= Do not reuse

= Date of Manufacture **™**

= Use by

STERILE R

(Use until Year & Month) Sterilized using Irradiation

= Batch Code (Number)

i

= Consult electronic instructions for use



= Do not resterilize = Upper limit of Temperature



(Store between 15°C and 30°C)



= Keep away from Sunlight



= Keep Dry



= Do not use if Package is Damaged

Manufacturer



= Caution

EC REP

Authorised Representative in the **European Community**



= Undyed / Braided Coated / Absorbable



= CF mark and Identification number of Notified Body



= Medical Device



= Single sterile barrier system with protective packaging outside



= Unique Device Identifier



= MR Safe

ARTWORK No.	REV.
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PANTONE SHADE
PANTONE 271 C
PANTONE 361 C
BLACK