

Covidien Introduces New Surgical Device for Meniscal Repair

The Associated Press

NEW HAVEN, Conn.--(BUSINESS WIRE)--Dec 4, 2012--Covidien (NYSE: COV), a leading global provider of healthcare products, today announced the launch of the AS Meniscal™ Repair Device. The newest addition to the Company's line of sports surgery devices, the AS Meniscal Repair Device enables orthopedic surgeons to perform "all-inside," minimally invasive arthroscopic surgery to repair a torn meniscus in the knee using the gold standard "all-suture" method of fixation.

"Any meniscal repair system needs to deliver high-strength fixation in order to optimize the biologic healing potential," said Bryan M. Huber, MD, Board Certified Orthopedic Surgeon at Mansfield Orthopaedics in Stowe, Vermont. "The AS Meniscal Repair Device enables surgeons to leverage the value of using the gold standard all-suture approach in a less invasive arthroscopic fashion." Bench-top tests conducted by Covidien confirm that the AS Meniscal Repair Device deploys sutures with strong holding power consistently and reliably without the need for any anchors 1.

Dr. Huber added, "In my practice, I have experienced a consistently high rate of firing success when using the AS Meniscal Repair Device, in stark comparison to other products on the market where I've experienced a significant misfire rate. With an all-suture method of fixation, the AS Meniscal Repair Device eliminates any migration risk of broken tacks or anchors which could cause damage inside the knee and may lead to increased operative time during removal. The AS Meniscal Repair Device has improved my operative efficiency by delivering a high level of reliability and success." The new device, designed for intuitive use, works with only one thumb slide actuation and no complex components. It also features clear, laser-etched depth markings on the specially coated needles, allowing for precision in depth of penetration. Needles are available in two configurations, curved and straight, to meet surgeons' diverse repair needs.

"Covidien is setting new standards for consistency and reliability with this innovative, new design," said Peter Marshall, Director of R&D, Covidien. "The innovation seen in the design of the AS Meniscal Repair Device provides orthopedic surgeons with the confidence and security of an all-suture repair without the concern of rigid implant placement in soft tissue. Using feedback from our surgeon customers, we designed the AS Meniscal Repair Device to deliver optimal performance to address one of the fastest-growing orthopedic procedures performed today." A torn meniscus is one of the most common injuries to the knee. According to a recent market analysis conducted by Millennium Research Group 2, in 2010 more than 840,000 procedures relating to meniscal injuries were performed in the United States. Millennium's research indicates that in the U.S., meniscus repair procedures utilizing fixation devices are expected to increase at an eight percent compound annual growth rate through 2015.

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ABOUT COVIDIEN Covidien is a leading global healthcare products company that creates innovative medical solutions for better patient outcomes and delivers value through clinical leadership and excellence. Covidien manufactures, distributes and services a diverse range of industry-leading product lines in three segments: Medical Devices, Pharmaceuticals and Medical Supplies. With 2012 revenue of \$11.9 billion, Covidien has 43,000 employees worldwide in 70 countries, and its products are sold in over 140 countries. Please visit www.covidien.com to learn more about our business.

1 Bench top evaluation comparing the holding strength of the AS Meniscal Repair Device pre-tied knot with high strength suture to a leading competitive device (Covidien Test Report MRD-045 dated April 5, 2009); Bench top evaluation measuring the fatigue strength of the AS Meniscal Repair Device (Covidien Test Report MRD-024 dated May 14, 2009).

2US Markets for Orthopedic Soft Tissue Solutions 2011, Millennium Research Group Inc. April 2011 at p. 133.

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