The DERMABOND® Family of Topical Skin Adhesives (TSAs)

A unique and proven portfolio of products for optimized skin closure outcomes*

- #1 Best selling brand of topical skin adhesives†
- Studied in 51 randomized clinical trials (>5700 patients) designed specifically for the DERMABOND family of products*

**DERMABOND®**

**TOPICAL SKIN ADHESIVE**

Strength plus protection‡

**DERMABOND® Mini Topical Skin Adhesive**

Ideal for:
- Minimally invasive procedures
- Small lacerations

**DERMABOND® ADVANCED® Topical Skin Adhesive**

Ideal for:
- Open hemia repair
- Medium to large lacerations

**DERMABOND® PRINEO® Skin Closure System 22 cm**

Ideal for:
- Orthopedic surgeries, including
  - Total knee arthroplasty
  - Total hip arthroplasty
  - Spine surgeries

**DERMABOND® PRINEO® Skin Closure System 60 cm**

Ideal for:
- Abdominoplasty
- Breast reconstruction
- Sternotomy
- Brachoplasty

DERMABOND® Portfolio

More clinical experience, outcomes data, and publications than any other TSA with >300 publications, including preclinical and clinical data.  

DERMABOND ADVANCED® adhesive is proven to provide strength, protection, and consistent performance.

Strengthens

- When used in addition to sutures, DERMABOND ADVANCED Adhesive was shown ex vivo to add 75% more strength to the wound closure than sutures alone.1

Inhibits bacteria and provides a microbial barrier

- Demonstrated in vitro inhibition of gram-positive bacteria (MRSA and MRSE) and gram-negative bacteria (E coli).2
- Provides a flexible microbial barrier with 99% protection in vitro for 72 hours against organisms commonly responsible for surgical site infections.3
- Provides wound healing strength to maintain barrier and wound closure integrity through in vivo studies.4

For complete indications, contraindications, warnings, precautions, and adverse reactions, please reference full package insert.

*Clinical significance is unknown.

**Based on published literature in PubMed as of March 7, 2017, using only RCTs that evaluated the use of the product in a manner consistent with intended indication.

†Staphylococcus epidermidis, Staphylococcus aureus, Escherichia coli, Enterococcus faecium, Pseudomonas aeruginosa.

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References