The ABRA® Abdominal Wall Closure System restores the primary closure option or full-thickness, retracted mid-line abdominal defects. This dynamic tissue management system pulls muscle planes together under low tension while leaving fascial margins intact and ready to suture, for a sound primary closure.

**Indications**
- Retracted, full-thickness midline abdominal closure after laparotomy for abdominal compartment syndrome (ACS), abdominal hernia, mesh removal, AAA, or abdominal trauma and for retention of abdominal wall closure

**Hallmarks**
- Eliminates the hernia without the need for mesh and re-approximates the skin margins, eliminating the need to graft
- Restores domain
- Restores normal physiology

**Value Proposition**
- In 92% of cases, full thickness primary closure of complex open abdomens was achieved in an average of 7 days¹
  - 50% reduction in abdominal OR procedures (6.8 vs. 13.7)
  - 68% reduction in the number of days to any closure (15.8 vs. 50.1)
  - No skin grafts required when using ABRA vs. 43% of patients without ABRA required skin grafts
  - Estimated cost reduction of $12,370 to $47,070 per patient
- ABRA Abdominal Wall Closure and NPWT is an easy and reproducible option for primary fascial closure following severe Abdominal Compartment Syndrome (ACS)²
- Achieve primary fascial closure following decompressive laparotomy using ABRA Abdominal Wall Closure³
- Using ABRA Abdominal Wall Closure resulted in a 95% reduction in wound area⁴
- ABRA Abdominal Wall Closure can restore lost abdominal domain and achieve complete repair of the musculofascial support of the abdominal wall, achieving primary closure⁵
- ABRA uses significantly fewer OR resources, 70% fewer trips to the OR and 76% less OR time because it is adjusted at bedside and allows bedside dressing changes⁶

1. Early Primary Closure of Open Abdominal Wounds Using the Abdominal Reapproximation Anchor (ABRA®) System. Cinelli SM, et al. University of Nevada School of Medicine, Division of Trauma and Critical Care, University Medical Center of Southern Nevada, Las Vegas, NV. Poster: Southwestern Surgical Congress, Coronado, CA, March 22-25, 2009.