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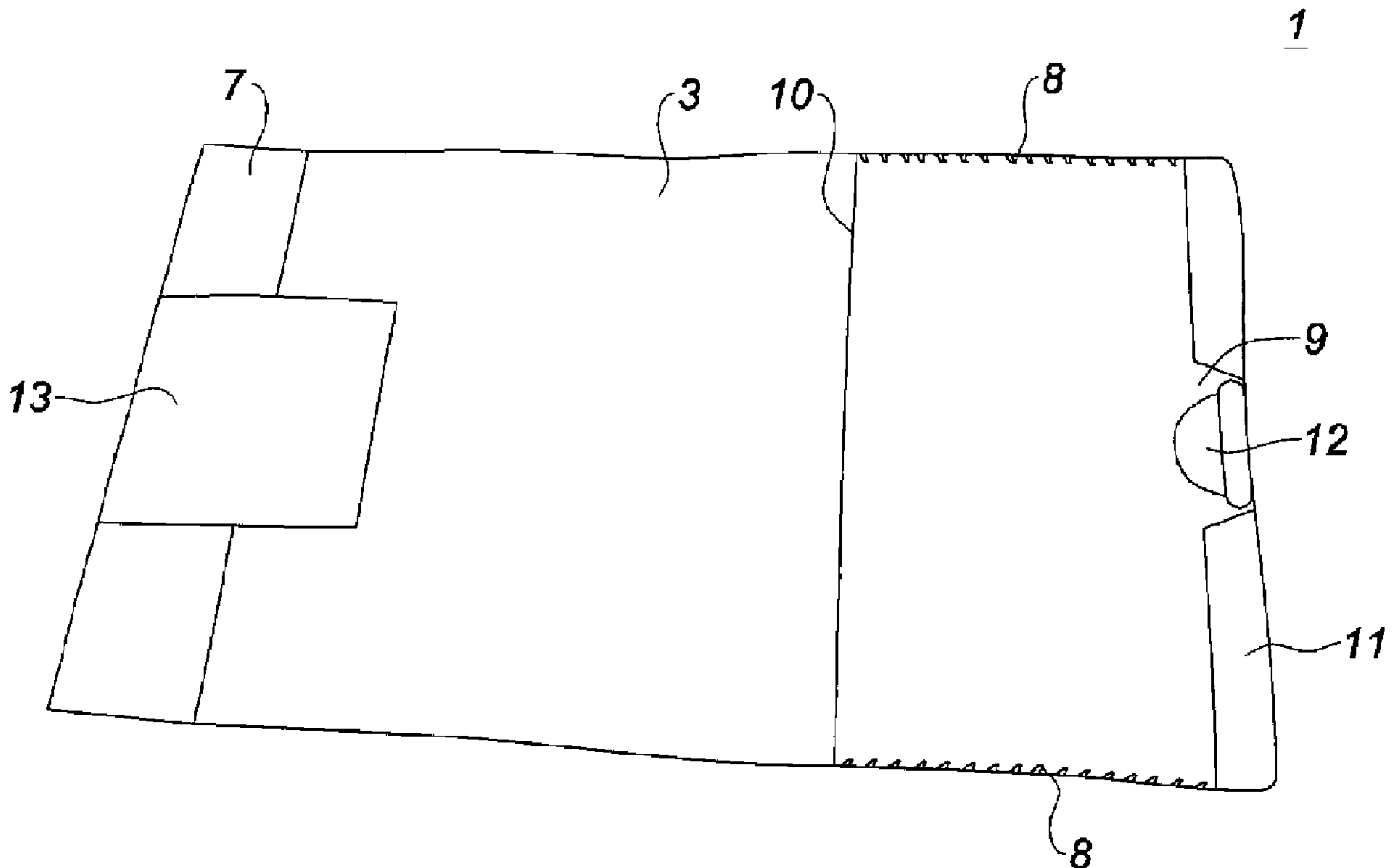
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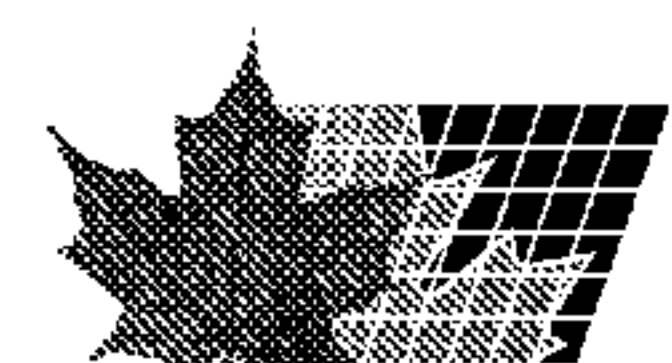
(54) **Titre : UN EMBALLAGE PLAT DESTINE A UNE MAILLE CHIRURGICALE ET UNE METHODE DE CONDITIONNEMENT D'UNE MAILLE CHIRURGICALE DANS LEDIT EMBALLAGE**

(54) **Title: A FLAT PACKAGE FOR A SURGICAL MESH AND A METHOD OF PACKAGING A SURGICAL MESH IN SAID PACKAGE**



(57) **Abrégé/Abstract:**

The invention concerns a flat package for a non sterile protective pouch (16) receiving a sterile surgical mesh; said package includes: an external envelope (2) including a front panel (3) and a complementary back panel (4), the inner face of the front panel (3) and the inner face of the back panel (4) being bonded respectively with a front layer (17) and with a back layer (18) of an internal envelope (15) made of a moisture-imperious material defining a storing compartment configured for receiving the said protective pouch (16), the front panel (3) and the back panel (4) being jointed along the contours of the external envelope and, the package



(57) **Abrégé(suite)/Abstract(continued):**

having an opening end comprising two tearable portions (8) configured to separate the front panel (3) upon which the front layer (17) of the internal envelope (15) is bonded from the back panel (4) upon which the back layer (18) of the internal envelope (15) is attached so as to give access to the protective pouch (16).

ABSTRACT

A flat package for a surgical mesh and a method of packaging a surgical mesh in said package

The invention concerns a flat package for a non sterile protective pouch (16) receiving a sterile surgical mesh; said package includes:

an external envelope (2) including a front panel (3) and a complementary back panel (4),

the inner face of the front panel (3) and the inner face of the back panel (4) being bonded respectively with a front layer (17) and with a back layer (18) of an internal envelope (15) made of a moisture-impervious material defining a storing compartment configured for receiving the said protective pouch (16),

the front panel (3) and the back panel (4) being jointed along the contours of the external envelope and, the package having an opening end comprising two tearable portions (8) configured to separate the front panel (3) upon which the front layer (17) of the internal envelope (15) is bonded from the back panel (4) upon which the back layer (18) of the internal envelope (15) is attached so as to give access to the protective pouch (16).

Figure 4

The present invention relates to a packaging for a surgical mesh and a method of packaging a surgical mesh in said package.

Background of the related art

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Wall reinforcement prostheses, for example for the abdominal wall, are widely used in surgery. These prostheses are intended to treat hernias by temporarily or permanently filling a tissue defect. These prostheses are generally made from a surgical mesh, such as a biocompatible prosthetic textile, and can have a number of
10 shapes, for example rectangular, circular or oval, depending on the anatomical structure to which they are to adapt. A surgical mesh is generally flat and may vary in dimensions, from for example 5 X 10 cm up to 30 X 50 cm, depending on the size of the defect to be treated.

Before being packaged as a commercial product and shipped to hospitals
15 or end-users, surgical meshes have to be sterilized in order to avoid contamination to the patient whom it is intended to be implanted. Gas sterilization is commonly used in the medical field and surgical meshes are usually sterilized by means of ethylene oxide (EtO) gas. The sterilization process generally requires the immersion of the surgical mesh in ethylene oxide for a time sufficient for the gas to sterilize the surgical mesh.
20 In addition, in order to proceed to ethylene oxide sterilization, the surgical mesh must be previously humidified. Moreover, for handling purposes, the surgical mesh is usually inserted into a handling pouch before being submitted to the sterilization process. The handling pouch is preferably made at least partly of a material which is impervious to contamination by microorganisms, bacteria and/or a biologically active
25 substance which may come into contact with the pouch while it is being handled, while at the same time remaining permeable to a sterilization gas such as for example ethylene oxide. Such a material is for example a nonwoven made of filaments of a high density polyethylene bound together by heat and pressure, such as the product sold by the Company Du Pont de Nemours under the trademark "Tyvek®". The
30 surgical mesh to be sterilized is therefore humidified by exposure to water vapor, inserted into a pouch at least partly constructed of "Tyvek®" and submitted to ethylene oxide gas for sterilization. Thereafter the surgical mesh and pouch may be subjected to a drying operation to remove the humidity from the product and pouch.

For purposes of maintaining the sterility of the surgical mesh during its
35 transportation and storage up to the moment of its use, the surgical mesh is kept inside the "Tyvek®" pouch after sterilization.

In order to maintain the surgical mesh and the pouch in a dried state, the surgical mesh and pouch may be further packaged in a moisture-impervious material, e.g. a foil pouch with or without a desiccant.

5 Thereafter, the sterile surgical mesh in the "Tyvek®" pouch sealed with moisture-impervious material is directly packaged in a rigid exterior container, e.g. a cardboard box or envelope to protect and maintain the shape of the surgical mesh during transport.

10 While the surgical mesh stored inside the pouch is indeed sterile, the outside surface of the transportation pouch is not sterile and thus it is important that the pouch does not get into a sterile area in a surgical theater.

Summary of the invention

15 In this technical context, it is desirable to provide a packaging that would be convenient and simple to use for the operating room staff such as non-sterile nurses and sterile nurses intended to open the packaging in view of retrieving therefrom a pouch containing the surgical mesh. In particular, it would be desirable to provide a user such as nurses with a packaging making it clear that the exterior of the pouch itself contained in the packaging is not sterile, so that the non-sterile nurse
20 knows which packaging to open before presenting the sterile contents to the sterile nurse in the sterile surgical field.

 The present invention relates to a flat package for a non sterile protective pouch receiving a sterile surgical mesh, said package having

25 an external envelope including a front panel and a complementary back panel,

 the inner face of the front panel and the inner face of the back panel being bonded respectively with a front layer and with a back layer of an internal envelope made of a moisture-impervious material defining a storing compartment configured for receiving the said protective pouch,

30 the front panel and the back panel being jointed along the contours of the external envelope and, the package having an opening end comprising two tearable portions configured to separate the front panel upon which the front layer of the internal envelope is bonded from the back panel upon which the back layer of the internal envelope is attached so as to give access to the protective pouch.

35 The invention thus makes it possible to simultaneously open the external envelope which provides a general mechanical protection and the internal envelope

made of moisture impervious material which provides a moisture protection. This single step opening sequence is a signal to a user that the pouch to which the user has access is not a sterile material and has to be treated as such. With the package of the invention, the user who opens the package does not have to open a moisture resistant
 5 barrier in addition to a general mechanical barrier, which might leave him/her in doubt as to the material the user is granted access is or not sterile. User error of inadvertently introducing non-sterile materials into the sterile operating field can result in delays in the surgical procedure, waste of contaminated surgical supplies and an increased risk of infection to the patient.

10 In a embodiment, the internal envelope comprises a series of welding line which joins the front layer and the back layer and defining the storing compartment, the bonding strength of the welding line being less than the bonding strength of the envelope front layer with the front panel and the envelope back layer with the back panel.

15 The internal envelope can be formed by a folded strip of moisture-impervious material closed by two longitudinal welding lines and a transversal welding line positioned towards the opening end.

In an embodiment, the front panel and the back panel include respectively a front grabbing tab and a back grabbing tab.

20 Preferably the transversal welding line is located at a distance from the front and back grabbing tab allowing grabbing the front layer with the front panel and grabbing the back layer with the back panel during opening.

In an embodiment, the transversal welding line has a V shape.

25 The back grabbing tab can extend along the width of back panel and/or the front grabbing tabs can be located in the middle of the front panel width.

It is envisaged that the tearable portions include a series of weakening cut made on the longitudinal edges of the external envelope.

Another aspect of the invention concerns a method of packaging a surgical mesh in a flat package comprising the steps of

- 30 - providing a gas permeable pouch enclosing a surgical mesh;
- sterilizing the surgical mesh within the pouch by introducing a sterilizing gas in the gas permeable pouch;
- introducing said pouch into a flat internal envelope including a front layer and a back layer of a moisture-impervious material;
- 35 - sealing the internal envelope by a welding line;

- packaging the flat internal envelope into an external envelope wherein the front layer and the back layer are bonded respectively to a front panel and a back panel of the external envelope.

In an embodiment, the method include the step of packaging the internal envelope into the external includes the step of bonding the front layer and the back layer respectively to a front panel and a back panel of the external envelope with a bonding strength higher than bonding strength of the welding lines sealing the front layer and the back layer of the internal envelope.

10 **Brief description of the drawings**

The foregoing objects and advantages of the present invention will become apparent from the reading of the following description in connection with the accompanying drawings, in which

15 Fig. 1 includes a top view of a package according to an embodiment of the invention;

Fig. 2 includes a view from beneath of the embodiment of Fig. 1;

Fig. 3 to 5 includes perspective views of the embodiment of Fig.1 during opening.

20

Detailed description

Reference will now be made to the drawings.

Turning to Fig.1 and Fig.2, a package 1 according to the invention is shown. The package 1 has a rectangular shape.

Package 1 includes an external envelope 2 having a front panel 3 and a back panel 4.

The external envelope 2 can be made of the single sheet which is folded and closed using a longitudinal closing flap 6 and a transversal closing flap 7.

30 The external envelope 2 is provided with two tearable portions 8 which define an opening A as it will be apparent later. The tearable portions 8 can be made by weakening superficial cuts carried out in the longitudinal edges of the external envelope 2.

At the opening side, the front panel 3 can be provided with a front grabbing tab 9 and a scoring line 10 and the back panel 4 can include a back grabbing tab 11. In the illustrated embodiment, the back grabbing tab 11 extends along the

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width of back panel 4 and the front grabbing tab 9 is located in the middle of the front panel 3 width.

The package 1 can include a tamper proof sticker 12 which is positioned on the front grabbing tab 9 and back grabbing tab 11.

5 At the closing side opposite the above described opening side, the package is closed by the transversal closing flap 7 which is maintained by a sticking band 13.

The external envelope 2 can be made of any suitable cardboard or laminated material.

10 Turning to Fig.3, the package 1 during opening is shown.

The tamper proof sticker 12 is cut which allows a user to take hold of the front grabbing tab 9 and back grabbing tab 11.

The tearable portions 8 are torn by the user action to separate the front panel 3 from the back panel 4, thereby creating an opening A.

15 Fig. 4 shows the package having the front panel 3 folded in an open position along the scoring line 10.

Inside the external envelope 2, is an internal envelope 15 made of moisture-impervious material, such as foil, that forms a moisture barrier. The internal envelope 15 defines a flat storing compartment for a protective pouch 16 for a sterile surgical mesh.

20 The internal envelope 15 has a front layer 17 which is bonded onto the front panel 3 by a suitable adhesive and a back layer 18 which is bonded onto the back panel 4 by a suitable adhesive.

25 The internal envelope 15 is closed by a series of welding lines which joins the front layer 17 and the back layer 18.

The internal envelope 15 is closed by two longitudinal welding lines 19 and by a transversal welding line 20 positioned towards the package opening A.

30 As can be seen on Fig. 4, the transversal welding line 20 is located at a distance from the front and back grabbing tab 11; this allows grabbing the front layer 17 with the front panel 3 and grabbing the back layer 18 with the back panel 4 during opening.

The bonding strength of the welding lines 19,20 is less than the bonding strength of the internal envelope 15 front layer 17 with the front panel 3 and the bonding strength of the internal envelope 15 back layer 18 with the back panel 4.

35 Thus, when opening the package 1; a non sterile user gets hold of the front grabbing tab 9 and of the back grabbing tab 11. This ruptures the tearable

portions 8 but the front layer 17 remains attached onto the front panel 3 and the back layer 18 remains attached onto the back panel 4.

When accessing the storing compartment, the non sterile user pulls with one hand, the front panel 3 and on the front layer 17 and, with the other hand, the
5 back panel 4 and the back layer 18.

Thus, the user is given access to the storing compartment in one single operation, where a protective pouch 16 can be removed from the package. Thereafter, the non-sterile user can open the second barrier of the protective pouch 16 to present the sterile contents of the pouch, the surgical mesh, to the sterile
10 nurse to be placed in the sterile operating field.

This proves to be important because users tend to understand that breaking two barriers are required before accessing a sterile object such as a surgical mesh.

The invention makes it possible to ensure that the opening of the
15 moisture-impervious barrier i.e. opening of the external envelope 2 and of the internal envelope 15 is clearly different from the opening a sterile barrier i.e. opening of the protective pouch 16 -.

It can be noted that the surgical mesh can be package in according to a method having the steps:

- 20 - providing a gas permeable pouch 16 enclosing a surgical mesh;
- sterilizing the surgical mesh within the pouch 16 by introducing a sterilizing gas in the gas permeable pouch 16 ;
- introducing said pouch 16 into a flat internal envelope 15 including a front layer 17 and a back layer 18 of a moisture-impervious material;
- 25 - sealing the internal envelope 15 by a welding line;
- packaging the flat internal envelope 15 into an external envelope 2 wherein the front layer 17 and the back layer 18 are bonded respectively to a front panel 3 and a back panel 4 of the external envelope 2.

Preferably, the step of packaging the internal envelope 15 into the
30 external 2 includes the step of bonding the front layer 17 and the back layer 18 respectively to a front panel 3 and a back panel 4 of the external envelope 2 with a bonding strength higher than bonding strength of the welding lines sealing the front layer 17 and the back layer 18 of the internal envelope 15.

CLAIMS

1. A flat package for a non sterile protective pouch (16) receiving a sterile surgical mesh, said package having
5 an external envelope (2) including a front panel (3) and a complementary back panel (4),
the inner face of the front panel (3) and the inner face of the back panel (4) being bonded respectively with a front layer (17) and with a back layer (18) of an internal envelope (15) made of a moisture-impervious material defining a
10 storing compartment configured for receiving the said protective pouch (16),
the front panel (3) and the back panel (4) being jointed along the contours of the external envelope and, the package having an opening end comprising two tearable portions (8) configured to separate the front panel (3) upon which the front layer (17) of the internal envelope (15) is bonded from the back panel (4) upon
15 which the back layer (18) of the internal envelope (15) is attached so as to give access to the protective pouch (16).
2. The package of claim 1, wherein the internal envelope (15) comprises a series of welding line (19, 20) which joins the front layer (17) and the back layer (18)
20 and define the storing compartment, the bonding strength of the welding lines being less than the bonding strength of the envelope front layer (17) with the front panel (3) and the envelope back layer (18) with the back panel (4).
3. The package of claim 2, wherein that the internal envelope (15) is
25 formed by two layers of moisture-impervious material closed by two longitudinal welding lines (19), a transversal welding line (20) positioned towards the opening end and a transversal welding line positioned opposite the opening end.
4. The package of claims 1 to 3, wherein the front panel (3) and the back
30 panel (4) include respectively a front grabbing tab (9) and a back grabbing tab (11).
5. The package of claims 3 and 4, wherein the transversal welding line (20) is located at a distance from the front and back grabbing tab (11) allowing grabbing the front layer (17) with the front panel (3) and grabbing the back layer (18)
35 with the back panel (4) during opening.

6. The package of claims 5, wherein the transversal welding line (20) has a V shape.

7. The package of claims 3 to 6, wherein the back grabbing tab (11)
5 extends along the width of back panel (4).

8. The package of claims 3 to 7, wherein the front grabbing tabs (9) is located in the middle of the front panel width.

10 9. The package of claims 1 to 8, wherein the tearable portions (8) include a series of weakening cut made on the longitudinal edges of the external envelope (2).

10. A method of packaging a surgical mesh in a flat package of one claims 1 to 9 comprising the steps of

- 15 - providing a gas permeable pouch (16) enclosing a surgical mesh;
 - sterilizing the surgical mesh within the pouch (16) by introducing a sterilizing gas in the gas permeable pouch 16 ;
 - introducing said pouch (16) into a flat internal envelope (15) including a front layer (17) and a back layer (18) of a moisture-impervious material;
20 - sealing the internal envelope (15) by a welding line;
 - packaging the flat internal envelope (15) into an external envelope (2) wherein the front layer (17) and the back layer (18) are bonded respectively to a front panel (3) and a back panel (4) of the external envelope (2).

25 11. The method of claim 10, wherein the step of packaging the internal envelope (15) into the external (2) includes the step of bonding the front layer (17) and the back layer (18) respectively to a front panel (3) and a back panel (4) of the external envelope (2) with a bonding strength higher than bonding strength of the welding lines sealing the front layer (17) and the back layer (18) of the internal
30 envelope (15).

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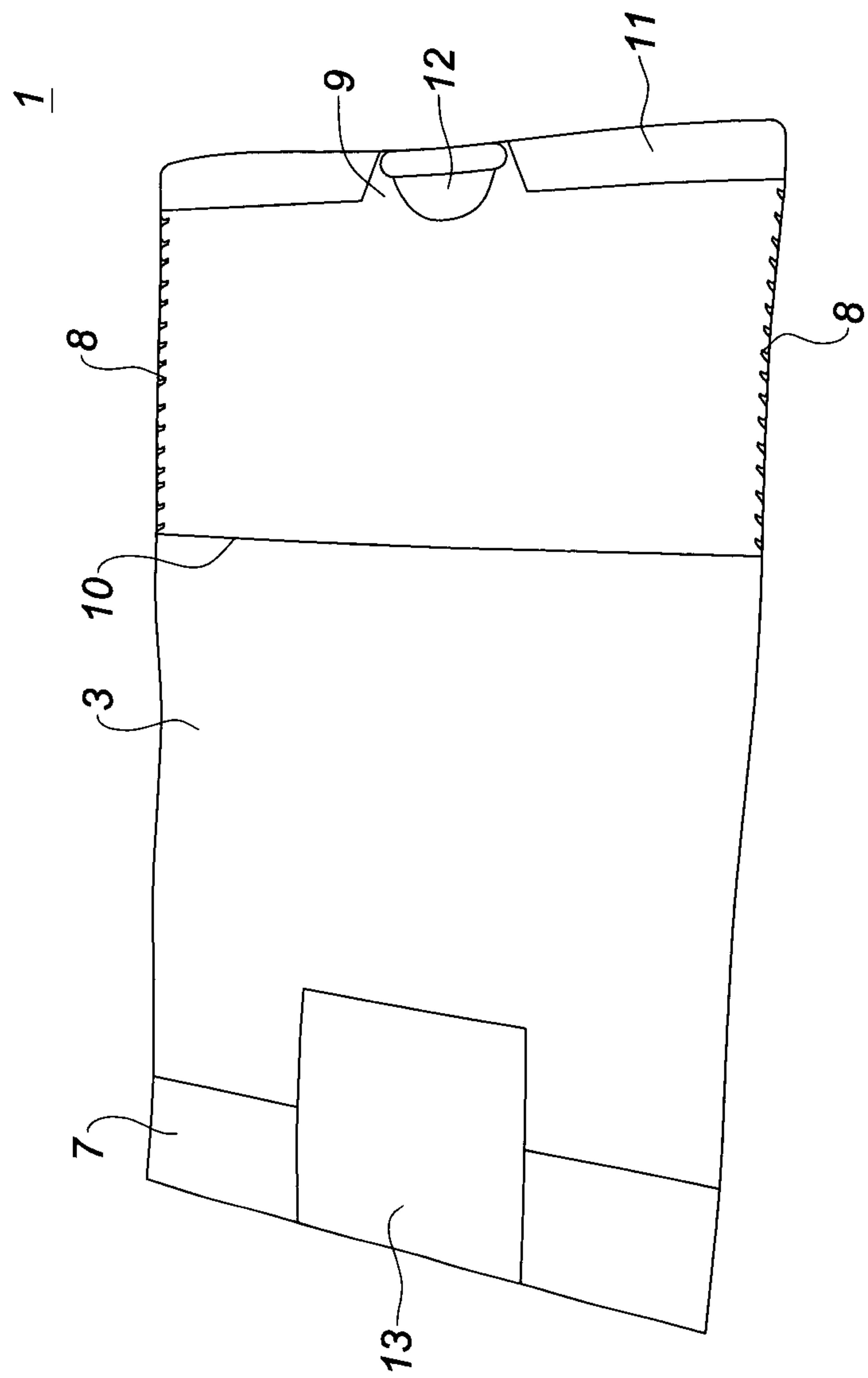


Fig. 1

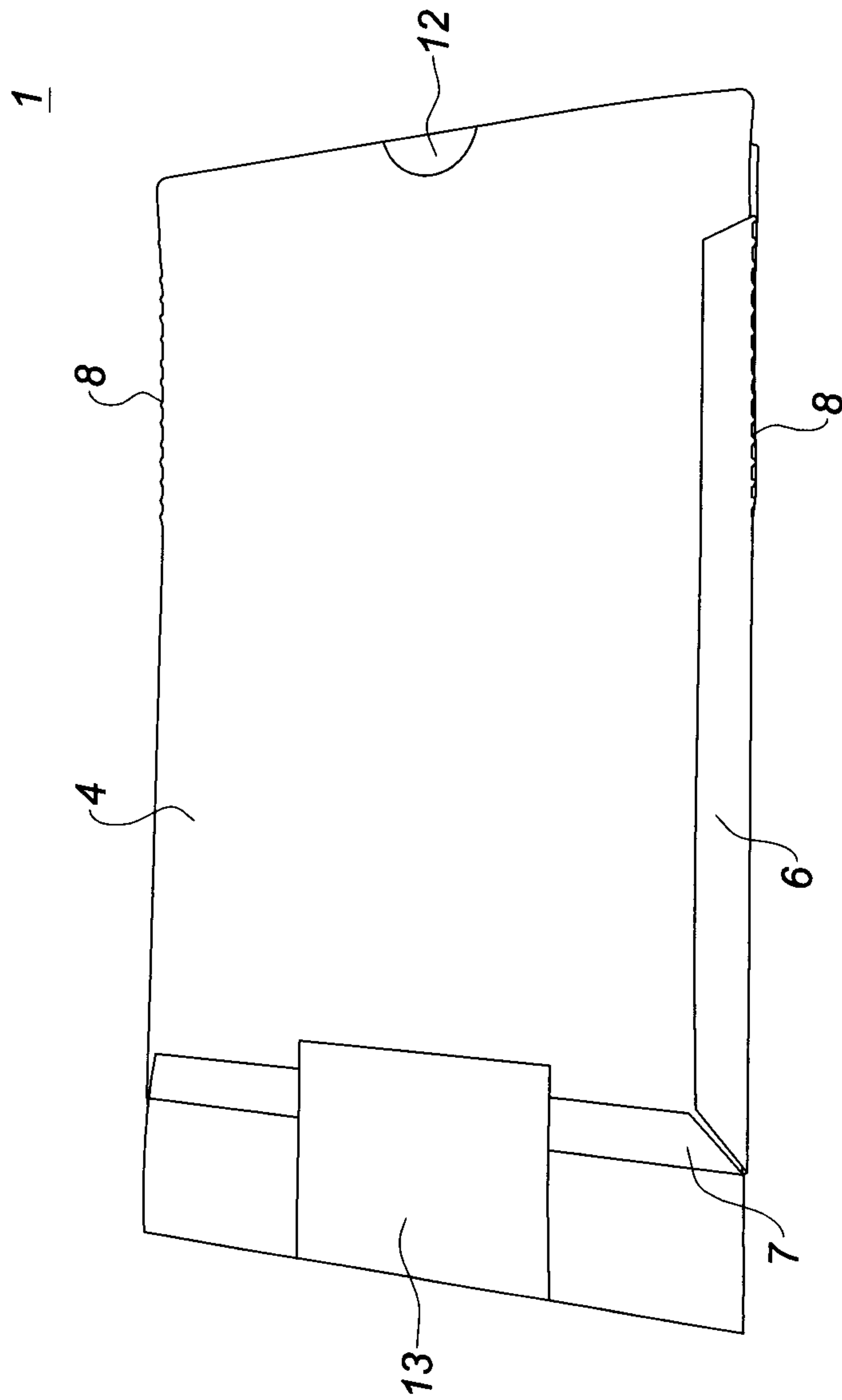


Fig. 2

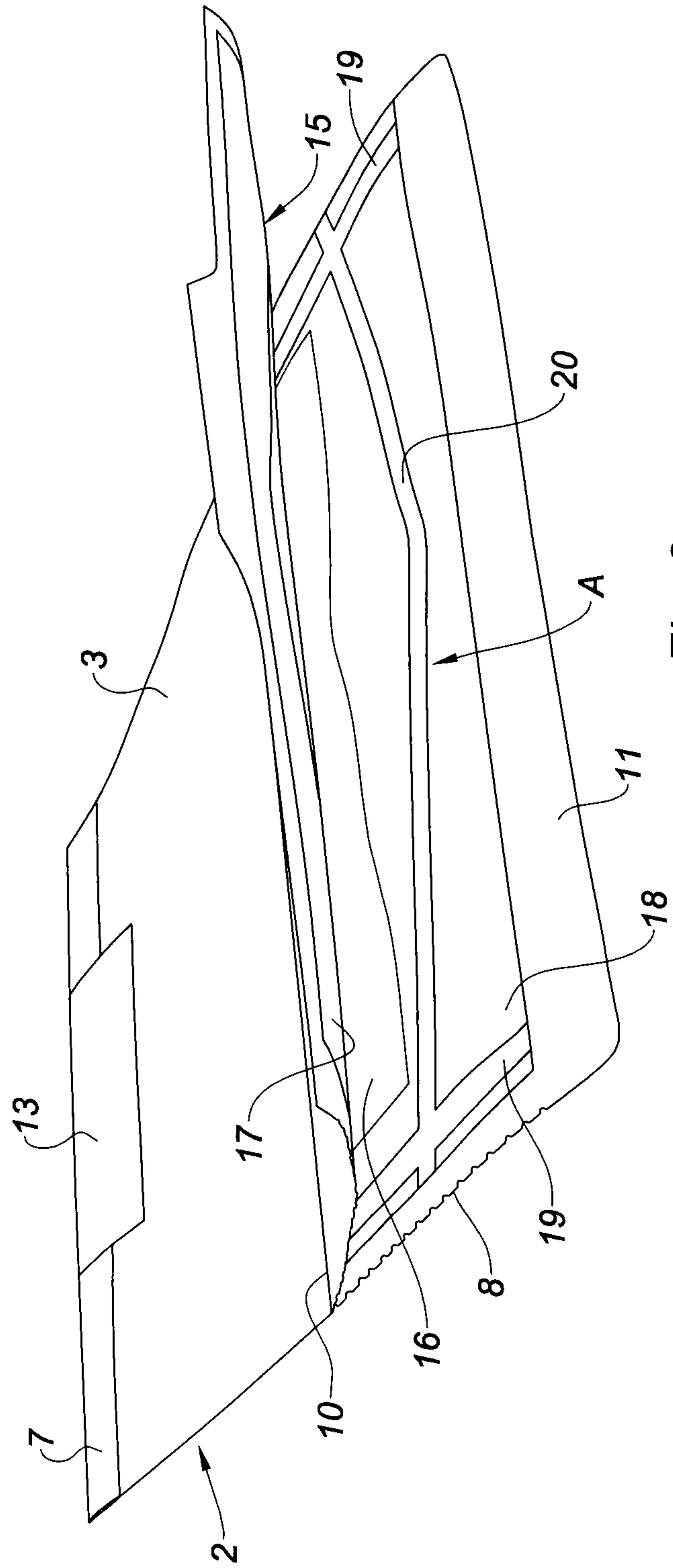


Fig. 3

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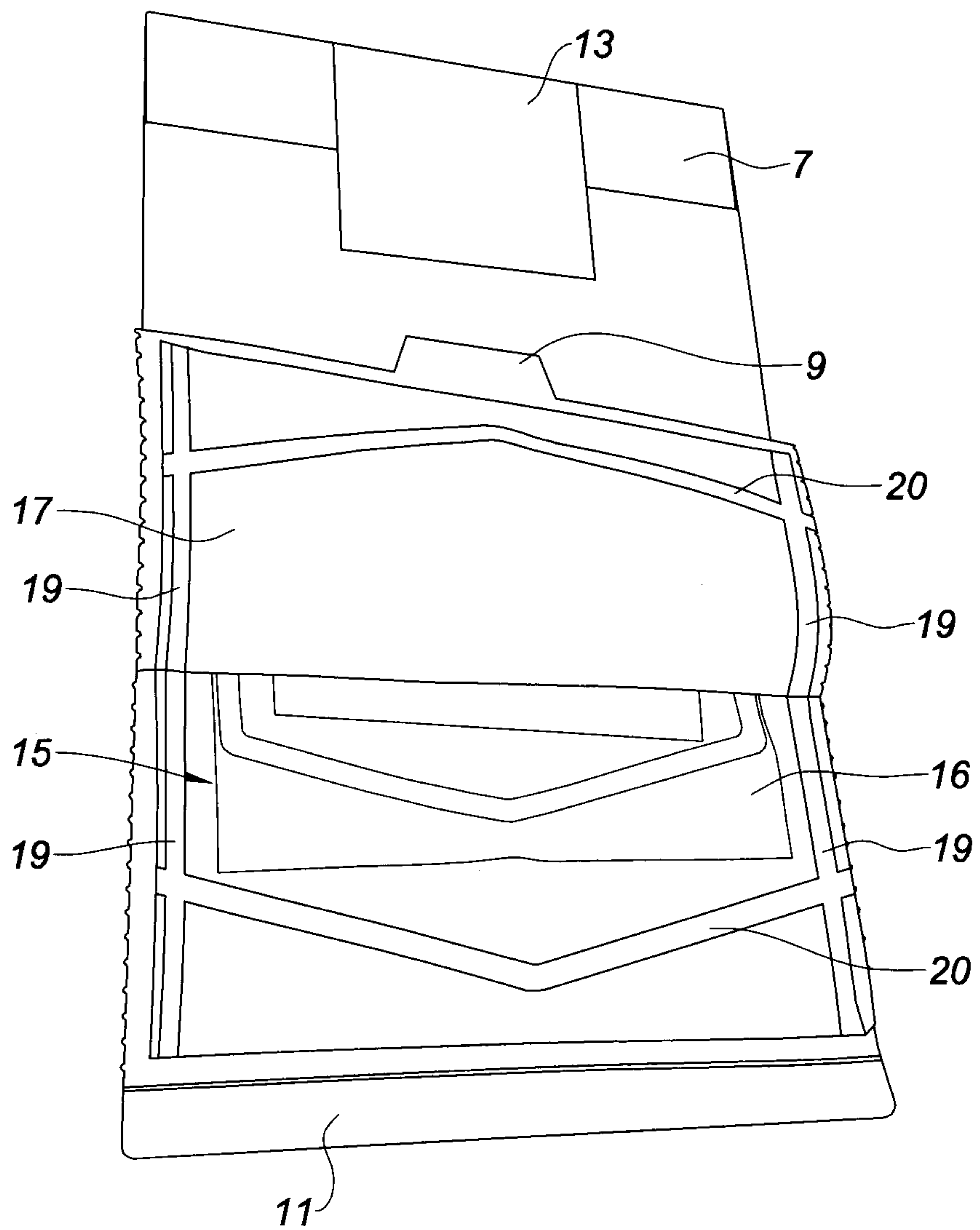


Fig. 4

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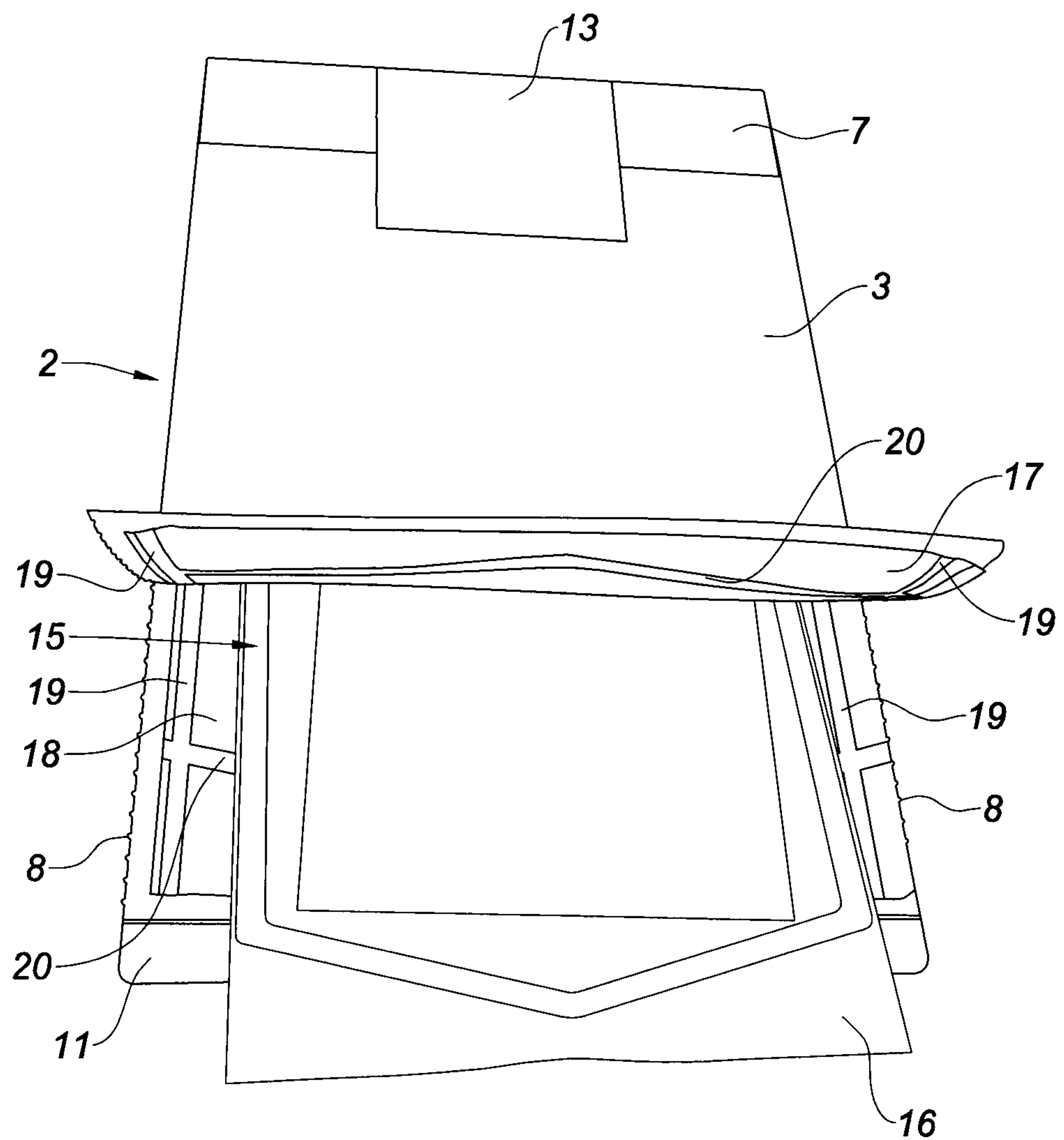


Fig. 5

