ADHERENCE CONCEPTS FOR NON-WOVEN ABSORBABLE FELT BUTTRESSES

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ABSTRACT

A loading unit for use with a surgical stapling apparatus including a tool assembly and a surgical buttress. The tool assembly includes: a cartridge assembly including a staple cartridge having a tissue facing surface, staple retaining pockets having a plurality of surgical fasteners therein, and a knife slot; and an anvil assembly including an anvil plate having a tissue facing surface defining staple forming pockets and a knife slot. The surgical buttress is attached to the tissue facing surface of at least one of the cartridge assembly or the anvil assembly, and conforms to the tissue facing surface such that the surgical buttress is deformed locally into the staple retaining pockets and the knife slot of the cartridge assembly or the staple forming pockets and the knife slot of the anvil assembly to which the surgical buttress is attached.
FIG. 21
ADHERENCE CONCEPTS FOR NON-WOVEN ABSORBABLE FELT BUTTRESSES

CROSS-REFERENCE TO RELATED APPLICATION

[0001] The present application claims the benefit of, and priority to, U.S. Provisional Application No. 61/770,855, filed on Feb. 28, 2013 the entire disclosure of which is incorporated by reference herein.

[0002] The present application relates to U.S. patent application Ser. No. 13/729,144, filed on Dec. 28, 2012, now U.S. Pat. No. 8,631,989, which is a Continuation Application which claims the benefit of and priority to U.S. application Ser. No. 13/097,194, filed on Apr. 29, 2011, now U.S. Pat. No. 8,365,972, which is a Continuation-In-Part Application which claims the benefit of and priority to U.S. application Ser. No. 12/414,943, filed on Mar. 31, 2009, now U.S. Pat. No. 8,011,550, the entire content of which is incorporated herein by reference.

BACKGROUND


[0004] The present disclosure relates to a surgical apparatus having a buttress material incorporated therewith. More particularly, the present disclosure relates to a surgical stapling apparatus including a detachable surgical buttress and/or an endoscopic surgical stapling apparatus that includes a detachable surgical buttress.

[0005] 2. Background of Related Art

[0006] Surgical devices for grasping or clamping tissue between opposing jaw structure and then joining tissue by surgical fasteners are well known in the art. In some instruments a knife is provided to cut the tissue which has been joined by the fasteners. The fasteners are typically in the form of surgical staples but two-part polymeric fasteners can also be utilized.

[0007] Instruments for this purpose can include two elongated jaw members which are respectively used to capture or clamp tissue. In certain surgical staplers, one of the jaw members carries a staple cartridge which houses a plurality of staples arranged in at least two lateral rows while the other jaw member has an anvil that defines a surface for forming the staple legs as the staples are driven from the staple cartridge. The stapling operation is effected by cam members that travel longitudinally through the staple cartridge, with the cam members acting upon staple pushers to sequentially eject the staples from the staple cartridge. A knife can travel between the staple rows to longitudinally cut and/or open the stapled tissue between the rows of staples. Such instruments are disclosed, for example, in U.S. Pat. No. 3,079,606 and U.S. Pat. No. 3,490,675.

[0008] Another staple disclosed in U.S. Pat. No. 3,490,591 also applies a double row of staples on each side of the incision. This patent discloses a surgical stapler that has a disposable loading unit in which a cam member moves through an elongate guide path between two sets of staggered staple carrying grooves. Staple drive members are located within the grooves and are positioned in such a manner so as to be contacted by the longitudinally moving cam member to effect ejection of the staples from the staple cartridge of the disposable loading unit. Other examples of such staplers are disclosed in U.S. Pat. Nos. 4,429,035 and 5,065,929.

[0009] Each of the instruments described above is designed for use in surgical procedures in which surgeons have direct manual access to the operative site. However, in endoscopic or laparoscopic procedures, surgery is performed through a small incision or through a narrow cannula inserted through small entrance wounds in the skin. In order to address the specific needs of endoscopic and/or laparoscopic surgical procedures, endoscopic surgical stapling devices have been developed and are disclosed, such as, for example, U.S. Pat. No. 5,040,715 (Green, et al.); U.S. Pat. No. 5,307,976 (Olson, et al.); U.S. Pat. No. 5,312,023 (Green, et al.); U.S. Pat. No. 5,318,221 (Green, et al.); U.S. Pat. No. 5,326,013 (Green, et al.); U.S. Pat. No. 5,332,142 (Robinson, et al.); and U.S. Pat. No. 6,241,139 (Millman, et al.), the entire contents of each of which are hereby incorporated herein by reference.

[0010] Tyco Healthcare Group, L.P., the assignee of the present application, has manufactured and marketed endoscopic stapling instruments, such as the Multifire ENDO GIATM, 30 and Multifire ENDO GIATM, 60 instruments, for a number of years. These instruments include a surgical stapling apparatus and a loading unit. Typically, the loading unit is attached to the apparatus immediately prior to surgery. After use, the loading unit can be removed from the apparatus and a new loading unit can be fastened to the apparatus to perform additional stapling and/or cutting operations. These instruments have provided significant clinical benefits. Nonetheless, improvements to these instruments are still desirable.

[0011] When stapling relatively thin or fragile tissues, it is important to effectively seal the staple line against air or fluid leakage. Additionally, it is often necessary to reinforce the staple line against the tissue to prevent tears in the tissue or pulling of the staples through the tissue. One method of preventing tears or pull through involves the placement of a biocompatible fabric reinforcing material, or "buttress" material, between the staple and the underlying tissue. In this method, a layer of buttress material is placed against the tissue and the tissue is stapled in conventional manner. In another method, the buttress material is positioned on the stapling instrument itself prior to stapling the tissue. An exemplary example of this is disclosed in U.S. Pat. No. 5,542,594 to McKean et al., the entire content of which is incorporated herein by reference. In McKean et al., a tube of buttress material is slipped over the jaw of the stapler. The stapler is then actuated to staple the subject tissue and secure the buttress material between the tissue and staple line to reinforce the tissue and staple line.

[0012] Buttress materials which are either pre-loaded or are an after-market add-on, for endomechanical or open mechanical surgical stapling apparatus, may shift in position relative to a stapler load cartridge assembly and anvil assembly to which they are attached during grasping and manipulation of tissue by the surgical stapling apparatus. If the shifting of the buttress material is pronounced and is not corrected by the surgeon before firing the surgical stapling apparatus, then staples may form outside the perimeter or width of the buttress material thereby reducing the benefits of having the entire staple line reinforced by the buttress material.

[0013] Accordingly, a need exists to systems and methods for securing a buttress material to the tissue contacting/faceing surface of a cartridge assembly and/or anvil assembly of a surgical stapling apparatus, whereby the buttress material remains secured in place over top of the staple retaining slots and/or staple forming pockets, along an entire length thereof.
Additionally, a need exists to design or modify the mechanical and physical properties of the buttress material to reduce the impact of material shifting on the stapler reload cartridge assembly and anvil assembly.

SUMMARY

In accordance with the present disclosure, a surgical stapling apparatus is provided including a housing; a handle supported by the housing; an elongated body extending distally from the housing; and a tool assembly at the distal end of the elongated body. The tool assembly has a cartridge assembly including a staple cartridge having a tissue facing surface, a plurality of staple retaining pockets and a knife slot formed in the tissue facing surface thereof. The tool assembly also has a plurality of surgical fasteners loaded on each in the staple retaining pockets. The tool assembly additionally has an anvil assembly in juxtaposed relation to the cartridge assembly, the anvil assembly including an anvil plate having a tissue facing surface defining a plurality of staple forming pockets and a knife slot therein, at least one of the cartridge assembly or the anvil assembly being movable in relation to the other of the cartridge assembly and the anvil assembly.

The surgical stapling apparatus further includes a surgical buttress releasably secured to a tissue contacting surface of at least one of the anvil plate and the staple cartridge, wherein each surgical buttress is secured to the at least one of the anvil assembly and the cartridge assembly by at least one anchor; a release assembly associated with the at least one of the anvil assembly and the cartridge assembly; and a drive assembly slidably translatable through the tool assembly from a proximal position to a distal position, wherein the drive assembly actuates the release assembly to thereby release the anchor and to free the surgical buttress from the at least one of the anvil assembly and cartridge assembly.

The release assembly may grip the at least one anchor prior to an actuation of the drive assembly.

The at least one of the anvil assembly and the cartridge assembly may define a side slot for receiving an end of the at least oneanchor therein.

The release assembly may include a first bar extending across the longitudinal slot prior to an actuation of the drive assembly; and a second bar, connected to and actuable by the first bar, having an end extending at least partially into the side slot, prior to an actuation of the drive assembly.

In use, as the drive assembly is advanced to the distal position, the drive assembly may actuate the first bar of the release assembly which in turn may actuate the second bar of the release assembly to release the anchor disposed within the side slot.

Each of the anvil assembly and the cartridge assembly may include a release assembly. Each of the anvil assembly and the cartridge assembly may define a side slot for receiving the anchor of each surgical buttress.

Each release assembly may include a first bar extending across the longitudinal slot prior to an actuation of the drive assembly; and a second bar, connected to and actuable by the first bar, having an end extending at least partially into the side slot, prior to an actuation of the drive assembly. In use, as the drive assembly is advanced to the distal position, the drive assembly may actuate the first bar of each release assembly which in turn may actuate the second bar of each release assembly to release the anchor disposed within the side slot.

At least one of the anvil assembly and the cartridge assembly may include a constricting, open-ended, side slot configured to grip an end of the anchor, and wherein the release assembly may push the end of the anchor out of the side slot, upon a distal advancement of the drive assembly.

The release assembly may include a pusher that is in operative association with the side slot retaining the end of the anchor. The pusher may be actuated by a distally advancing drive member to push the end of the anchor out of the side slot.

The pusher of the release assembly may be one of pivotally connected to and slidably supported in at least one of the anvil assembly and the cartridge assembly.

The anchor may be a suture engaging the surgical buttress and the at least one of the cartridge assembly and the anvil assembly. The anchor may be an extension of the surgical buttress and engages the at least one of the cartridge assembly and the anvil assembly.

According to another aspect of the present disclosure, a loading unit for use with a surgical stapling apparatus is provided and includes a tool assembly having a cartridge assembly including a cartridge having a plurality of surgical fasteners therein, and an anvil assembly, at least one of the cartridge assembly and the anvil assembly being movable in relation to the other of the cartridge assembly and anvil assembly, wherein the anvil assembly includes an anvil plate and, wherein each of the anvil plate and the staple cartridge define an elongate longitudinal slot; a surgical buttress releasably secured to a tissue contacting surface of at least one of the anvil plate and the staple cartridge, wherein each surgical buttress is secured to the at least one of the anvil assembly and the cartridge assembly by at least one anchor; a release assembly associated with the at least one of the anvil assembly and the cartridge assembly; and a drive assembly slidably translatable through the tool assembly from a proximal position to a distal position, the drive assembly actuating the release assembly to thereby release the anchor to free the surgical buttress from the at least one of the anvil assembly and cartridge assembly.

The release assembly may grip the at least one anchor prior to an actuation of the drive assembly.

At least one of the anvil assembly and the cartridge assembly may define a side slot for receiving an end of the at least one anchor therein.

The release assembly may include a first bar extending across the longitudinal slot prior to an actuation of the drive assembly; and a second bar, connected to and actuable by the first bar, having an end extending at least partially into the side slot, prior to an actuation of the drive assembly.

In use, as the drive assembly is advanced to the distal position, drive assembly actuates the first bar of the release assembly which in turn actuates the second bar of the release assembly to release the grip on the end of the at least one anchor disposed within the side slot.

Each of the anvil assembly and the cartridge assembly may include a release assembly.

At least one of the anvil assembly and the cartridge assembly may include a constricting, open-ended, side slot configured to grip an end of the anchor disposed therein, and wherein the release assembly may push the end of the anchor out of the side slot, upon a distal advancement of the drive assembly.

According to a further aspect of the present disclosure, a surgical stapling apparatus is provided and includes a housing; a handle supported by the housing; an elongated
body extending distally from the housing; and a tool assembly at the distal end of the elongated body. The tool assembly includes a cartridge assembly including a cartridge having a plurality of surgical fasteners therein, and an anvil assembly in juxtaposed relation to the cartridge assembly, at least one of the cartridge assembly and anvil assembly being movable in relation to the other of the cartridge assembly and anvil assembly. The tool assembly includes an anvil plate defining a pair of opposed distal side slots for receiving an end of an anchor and a pair of opposed proximal side slots for receiving an end of an anchor. The anvil plate includes at least one of the following: at least one of the pair of distal side slots is keyhole-shaped; and at least one of the pair of proximal side slots is keyhole-shaped. The surgical stapling apparatus further includes a surgical buttress releasably secured to a tissue contacting surface of at least one of the anvil plate and the staple cartridge, wherein each surgical buttress is secured to the at least one of the anvil assembly and the cartridge assembly by at least one anchor; a release assembly associated with the at least one of the anvil assembly and the cartridge assembly; and a drive assembly slidably translatable through the tool assembly from a proximal position to a distal position, the drive assembly actuating the release assembly to thereby release the anchor and to free the surgical buttress from the at least one of the anvil assembly and cartridge assembly.

[0036] Each of the anvil plate and the staple cartridge may define an elongate longitudinal slot.

[0037] The cartridge assembly may define at least one side slot for receiving an end of the at least one anchor therein.

[0038] Each of the anvil assembly and the cartridge assembly may include a release assembly.

[0039] Each of the anvil assembly and the cartridge assembly may define a side slot for receiving the anchor associated with each surgical buttress.

[0040] At least one of the anvil assembly and the cartridge assembly may include a keyhole-shaped side slot.

[0041] The anchor may be a suture that is in engagement with the surgical buttress and the at least one of the cartridge assembly and the anvil assembly.

[0042] Additional advantages will become apparent from the description which follows, taken in conjunction with the accompanying drawings.

BRIEF DESCRIPTION OF THE DRAWINGS

[0043] The present disclosure will be further described with reference to the accompanying drawings, wherein like reference numerals refer to like parts in the several views, and wherein:

[0044] FIG. 1 is a perspective view of a surgical stapling apparatus according to an embodiment of the present disclosure;

[0045] FIG. 2 is a top, perspective view, with parts separated, of a distal end of a loading unit of the surgical stapling apparatus of FIG. 1;

[0046] FIG. 2A is an enlarged perspective view of a distal end of an anvil assembly of the loading unit illustrating a surgical anvil buttress operatively secured to a tissue contacting surface thereof;

[0047] FIG. 2B is an enlarged perspective view of a cartridge assembly of the loading unit illustrating a surgical cartridge buttress secured to a tissue contacting surface thereof;

[0048] FIG. 3 is a top, perspective view of a distal end of an anvil assembly of the loading unit including a suture release assembly according to an embodiment of the present disclosure, shown in an open configuration;

[0049] FIG. 4 is a top, perspective view of the anvil assembly of FIG. 3, illustrating the parts of the suture release assembly thereof separated;

[0050] FIG. 5 is a bottom, perspective view of the anvil assembly of FIGS. 3 and 4;

[0051] FIG. 6 is a top, plan view of the anvil assembly of FIGS. 3-5, illustrating the suture release assembly thereof in the closed configuration;

[0052] FIG. 7 is a top, plan view of the anvil assembly of FIG. 6, with a retainer removed therefrom;

[0053] FIG. 8 is a top, plan view of the anvil assembly of FIGS. 3-7, illustrating the suture release assembly thereof in the open configuration;

[0054] FIG. 9 is a top, plan view of the anvil assembly of FIG. 8, with a retainer removed therefrom;

[0055] FIG. 10 is a top, perspective view of a distal end of a cartridge assembly of the DLU including a suture release assembly according to an embodiment of the present disclosure;

[0056] FIG. 11 is a top, perspective view of the cartridge assembly of FIG. 10, illustrating the parts of the suture release assembly thereof separated;

[0057] FIG. 12 is a bottom, perspective view of a distal end of the cartridge assembly of FIGS. 10 and 11;

[0058] FIG. 13 is a top, plan view of the cartridge assembly of FIGS. 10-12, illustrating the suture release assembly thereof in the closed configuration;

[0059] FIG. 14 is a top, plan view of the cartridge assembly of FIGS. 10-13, illustrating the suture release assembly thereof in the open configuration;

[0060] FIG. 15 is a perspective view of a distal end of a loading unit including suture release assemblies according to another embodiment of the present disclosure;
FIG. 16 is an enlarged view of the indicated area of detail of FIG. 15; FIG. 17 is a top, perspective view of a distal end of an anvil assembly (with an anvil cover removed), illustrating a suture release assembly thereof in an actuated configuration; FIG. 18 is a top, perspective view of the distal end of the anvil assembly of FIG. 17, illustrating the parts of the suture release assembly thereof separated; FIG. 19 is a top, plan view of the anvil assembly of FIGS. 17 and 18, illustrating the suture release assembly thereof in an unactuated configuration; FIG. 20 is a top, plan view of the anvil assembly of FIGS. 17-19, illustrating the suture release assembly thereof in an actuated configuration; FIG. 21 is a bottom, perspective view of a distal end of a cartridge assembly of the DLU of FIG. 15, illustrating a suture release assembly thereof separated therefrom; FIG. 22 is a top, perspective view of the suture release assembly of FIG. 21; FIG. 23 is a bottom, perspective view, with parts separated, of the suture release assembly of FIGS. 21 and 22; FIG. 24 is a top, plan view of the suture release assembly of FIGS. 21-23, illustrating the suture release assembly thereof in an unactuated configuration; FIG. 25 is a top, plan view of the suture release assembly of FIGS. 21-24, illustrating the suture release assembly thereof in an actuated configuration; FIG. 26 is a top, plan view of a distal end of an anvil assembly of a loading unit including a suture release assembly according to yet another embodiment of the present disclosure; FIG. 27 is a top, perspective view, with parts separated, of the distal end of the anvil assembly of FIG. 26; FIG. 28 is a top, plan view of the distal end of the anvil assembly of FIGS. 26 and 27, illustrating the suture release assembly thereof in an unactuated configuration; FIG. 29 is a top, plan view of the distal end of the anvil assembly of FIGS. 26-28, illustrating the suture release assembly thereof in an actuated configuration; FIG. 30 is a top, plan view of a distal end of an anvil assembly of a loading unit including a suture release assembly according to still another embodiment of the present disclosure, illustrating the suture release assembly thereof in an unactuated configuration; FIG. 31 is a top, plan view of the distal end of the anvil assembly of FIG. 30, illustrating the suture release assembly thereof in an actuated configuration; FIG. 32 is a top, perspective view of a distal end of a cartridge assembly of a loading unit including a suture release assembly according to a further embodiment of the present disclosure; FIG. 33 is a top, perspective view of the suture release assembly of FIG. 32; FIG. 34 is a bottom, perspective view of the suture release assembly of FIGS. 32 and 33; FIG. 35 is a bottom, perspective view, with parts separated, of the suture release assembly of FIGS. 32-34; FIG. 36 is a top, perspective view, with parts separated, of the suture release assembly of FIGS. 32-35; FIG. 37 is a top, plan view of the suture release assembly of FIGS. 32-36, illustrating the suture release assembly in an unactuated configuration; FIG. 38 is a top, plan view of the suture release assembly of FIGS. 32-37, illustrating the suture release assembly in an actuated configuration; FIG. 39 is a rear, perspective view, with parts separated, of an anvil assembly according to another embodiment of the present disclosure; FIG. 40 is a top, plan view of a distal end of the anvil assembly of FIG. 39 (with an anvil cover removed therefrom), illustrating a suture release assembly according to another embodiment of the present disclosure; FIG. 41 is a bottom, plan view of an anvil plate of the anvil assembly of FIG. 39; FIG. 42 is a top, plan view of the anvil plate of FIG. 41; FIG. 43 is an enlarged view of the indicated area of detail of FIG. 42; FIG. 44 is an enlarged view of the indicated area of detail of FIG. 42; FIG. 45 is a top, plan view of an anvil cover of the anvil assembly of FIG. 39; FIG. 46 is an enlarged view of the indicated area of detail of FIG. 45; FIG. 47 is an enlarged view of the indicated area of detail of FIG. 45 showing a different embodiment of a suture receiving slot; FIG. 48 is an enlarged view of the indicated area of detail of FIG. 45 showing a different embodiment of a suture receiving slot; FIG. 49 is an enlarged view of the indicated area of detail of FIG. 45 showing a different embodiment of a suture receiving slot; FIG. 50 is a cross-sectional view of the indicated area of detail of FIG. 45, as taken through line 50-50 of FIG. 49; FIG. 51 is a transverse, cross-sectional schematic illustration of a cartridge assembly including a surgical buttress overlying a tissue contacting/facing surface thereof; and FIG. 52 is a transverse, cross-sectional schematic illustration of an anvil assembly including a surgical buttress overlying a tissue contacting/facing surface thereof.

DETAILED DESCRIPTION OF EMBODIMENTS

Embodiments of the presently disclosed surgical stapling apparatus and loading unit will now be described in detail with reference to the drawings, in which like reference numerals designate identical or corresponding elements in each of the several views. In the drawings and in the description that follows, the term “proximal”, as is traditional, will refer to the end of the stapling apparatus which is closest to the operator, while the term “distal” will refer to the end of the apparatus which is furthest from the operator. FIG. 1 shows a surgical apparatus, e.g., surgical stapling apparatus, generally referred to as 10. In the interest of brevity, this disclosure will focus primarily on the tool assembly of the surgical stapling apparatus 10. A detailed discussion of the remaining components and method of use of surgical stapling apparatus 10 is disclosed in U.S. Pat. No. 6,241,139, the disclosure of which is hereby incorporated by reference herein.

Surgical stapling apparatus 10 is an endoscopic apparatus and includes a handle assembly 12 and an elongated body 14 extending from handle assembly 12. A loading unit 16 is releasably secured to the distal end of elongated
body 14. Furthermore, the present disclosure contemplates surgical stapling apparatus that have a replaceable cartridge that is received in the jaws of the apparatus.

Loading unit 16 includes a tool assembly 17 having a cartridge assembly 18 housing a plurality of surgical fasteners or staples 84 (see FIG. 2) and an anvil assembly 20 secured in juxtaposed relation relative to cartridge assembly 18, wherein anvil assembly 20 and cartridge assembly 18 are moveable to or away from one another to close or open tool assembly 17. As shown herein, loading unit 16 is configured to apply six (6) linear rows of staples, in loading units measuring from about 30 mm to about 60 mm in length. Loading units for applying any number of rows of staples, having staple pockets arranged in various patterns and/or loading units and end effectors having any other lengths, e.g., 45 mm, are also envisioned. Handle assembly 12 includes a stationary handle member 22, a movable handle member 24, and a barrel portion 26.

A rotatable member 28 is mounted on the forward end of barrel portion 26 to facilitate rotation of elongated body 14 and attached loading unit 16 with respect to handle assembly 12. An articulation lever 30 is also mounted on the forward end of barrel portion 26 adjacent rotatable member 28 to facilitate articulation of tool assembly 17. Preferably, a pair of knobs 32 are movably positioned along barrel portion 26. Knobs 32 are advanced distally to approximate or close cartridge and/or anvil assembly 18, 20, and retracted proximally to unapproximately or open cartridge and/or anvil assembly 18, 20.

Loading unit 16 is desirably selectively removable couplable to elongated body 14. Loading unit 16 includes a housing portion 36 having a proximal end adapted to releasably engage the distal end of elongated body 14. A mounting assembly 38 is pivotally secured at “P” to the distal end of housing portion 36, and is configured to receive the proximal end of tool assembly 17 such that pivotal movement of tool assembly 17 about an axis at “P”, perpendicular to the longitudinal axis of housing portion 36, effects articulation of tool assembly 17.

With general reference to FIG. 2, loading unit 16 includes a mounting assembly 40. Mounting assembly 40 includes an upper and a lower mounting portion 40a, 40b, respectively. An axial drive assembly 50 is operatively associated within and disposed between cartridge and/or anvil assembly 18, 20. With reference to FIG. 2, axial drive assembly 50 includes an elongated drive beam 52 having a distal end 54 and a proximal end 56. Drive beam 52 may be constructed from a single sheet of material or, preferably, multiple stacked sheets.

Proximal end 56 of drive beam 52 of drive assembly 50 includes a pair of resilient engagement fingers that receive a pusher. The pusher is dimensioned and configured to mountingly engage a drive member, e.g., a drive rod or control rod (not shown) when the proximal end of loading unit 16 is engaged with elongated body 14 of surgical stapling apparatus 10. The control rod functions to impart axial movement of drive assembly 50 from handle assembly 12.

Distal end 54 of drive beam 52 of drive assembly 50 includes a head 60 with a laterally extending upper portion 64a, a laterally extending lower portion 64b, and a central wall portion 62. A distal edge of central wall portion 62 defines a knife blade or the like 66.

As seen in FIG. 2, anvil assembly 20 includes an anvil plate 70 having a plurality of staple deforming pockets/ cavities (not shown) and a cover plate 72 secured to a top surface of anvil plate 70, having a cavity (not shown) is defined therebetween. The cavity defined between the anvil plate 70 and cover plate 72 is dimensioned to receive the upper portion 64a of head 60 therein. A longitudinal slot 70b extends through anvil plate 70 to facilitate passage of central wall portion 62 of head 60 therethrough. Additionally, cover plate 72 defines a pair of opposed recesses 72a formed therein which align with the proximal pair of recesses 70d formed in anvil plate 70 when cover plate 72 is assembled with anvil plate 70.

With continued reference to FIG. 2, anvil plate 70 defines a proximal pair of recesses 70d formed near a proximal end of anvil plate 70 and disposed, one each, on opposed sides of longitudinal slot 70b. Anvil plate 70 defines a distal pair of recesses 70e formed near a distal end of anvil plate 70 and disposed, one each, on opposed sides of longitudinal slot 70b. In one embodiment, at least one of the recesses of each of the proximal pair of recesses 70d and the distal pair of recesses 70e is preferably non-circular and constricting, or has a reduced width dimension, so as to frictionally engage and/or pinch an anchor “S”.

As used herein the term anchor is understood to include and is not limited to sutures, threads, tethers, straps, bands, lines, wires, cables, fasteners, tacks or any other material suitable for the intended purpose disclosed herein. In certain embodiments, the anchor is an extension of the staple line reinforcement material discussed below. The anchor may comprise an integral part of the staple line reinforcement material, or may be formed from the same or a similar material and attached to the staple line reinforcement material.

As seen in FIGS. 2 and 2A, anvil assembly 20 further includes a surgical anvil buttress “B1”, pledget or the like operatively secured to a lower surface or tissue contacting surface of anvil plate 70, by an anchor “S”; to overlie at least some of anvil pockets 70a and/or at least a portion of a length of longitudinal slot 70b. In particular, an anchor “S” is cinched around a proximal portion of surgical anvil buttress “B1” and each of the proximal pair of recesses 70d and an anchor “S” is cinched around a distal portion of the surgical anvil buttress “B1” and each of the distal pair of recesses 70e.

Surgical anvil buttress “B1” includes a proximal pair of notches formed in side edges aligned with the proximal pair of recesses 70d of anvil plate 70, a distal pair of notches formed in side edges thereof aligned with the distal pair of recesses 70e of anvil plate 70, and a proximal notch formed in a proximal edge thereof aligned with longitudinal slot 70b when surgical anvil buttress “B1” is secured to anvil assembly 20. Surgical anvil buttress “B1” further includes a tongue or tab extending from a distal edge thereof to facilitate with the attachment of surgical anvil buttress “B1” to anvil assembly 20 during the assembly process. It is contemplated that the tongue is removed from surgical anvil buttress “B1” following securement of surgical anvil buttress “B1” to anvil assembly 20 and prior to packaging or shipment.

As seen in FIGS. 2-9, anvil assembly 20 further includes a release assembly 74 disposed between anvil plate 70 and cover plate 72 at a location in operative registration with the distal pair of recesses 70e. Release assembly 74 includes a guide plate 75 defining an arcuate slot 75a. Slot 75a is configured and dimensioned to receive a tool (not shown) therethrough. The function and purpose of slot 75a will be discussed in greater detail below.
[0114] Release assembly 74 further includes a lock or anchor bar 76 pivotally connected to anvil plate 70 (as seen in FIGS. 4 and 5) and/or optionally cover plate 72 (shown in FIG. 2). Anchor bar 76 includes a body portion 76a defining an elongate channel or slot 76b therein and a finger 76c extending from an edge thereof. Finger 76c is in operative registration with one of the distal pair of recesses 70c, preferably, the one of the distal pair of recesses having the relatively larger width dimension.

[0115] Suture release assembly 74 further includes an anchor bar actuation member 77 pivotally connected to anvil plate 70 (as seen in FIGS. 4, 5 and 5) and/or optionally cover plate 72 (shown in FIG. 2). Actuation member 77 includes an eccentric cam 77a defining a central axis of rotation about which actuation member is permitted to rotate. Actuation member 77 includes a nut or boss 77b extending from a surface of eccentric cam 77a in a direction substantially parallel to and offset a radial distance from the central axis of rotation of eccentric cam 77a. Boss 77b is slidably and rotatably disposed in elongate slot 76b of anchor bar 76. Actuation member 77 further includes a release bar 77c extending substantially tangentially from eccentric cam 77a from a side substantially opposite to boss 77b. Release bar 77c defines a pin 77d formed thereon which is in registration with the arcuate slot 75a of guide plate 75. In operation, as eccentric cam 77a is rotated, pin 77d of release bar 77c follows along the path of arcuate slot 75a of guide plate 75.

[0116] As seen in FIGS. 6 and 7, suture release assembly 74 includes a locking or anchoring configuration wherein finger 76c of anchor bar 76 extends into or overlies the respective one of the pair of distal recesses 70c in operative registration therewith, release bar 77c of actuation member 77 extends across knife slot 70b of anvil plate 70, and pin 77d of release bar 77c is disposed at or near a first end of arcuate slot 75a of guide plate 75. It is contemplated that suture release assembly 74 may include a friction fit or snap fit feature for maintaining and/or retaining suture release assembly 74 in the locking or anchoring configuration at all times following the manufacturing/assembly process and prior to a complete firing of surgical stapling apparatus 10.

[0117] As seen in FIGS. 8 and 9, suture release assembly 74 includes an open or release configuration wherein finger 76c of anchor bar 76 does not extend into or overlie the respective one of the pair of distal recesses 70c in operative registration therewith, release bar 77c of actuation member 77 does not extend across knife slot 70b of anvil plate 70, and pin 77d of release bar 77c is disposed at or near a second end of arcuate slot 75a of guide plate 75.

[0118] Suture release assembly 74 is used by a manufacturer during the assembly process of surgical stapling apparatus 10 to secure, with a surgical suture or tether, a surgical anvil buttress “B” to a tissue contacting surface of the anvil plate 70, and by the end user of surgical stapling apparatus 10 to automatically release or free the surgical anvil buttress “B” from the tissue contacting surface of the anvil plate 70 upon a complete firing of the surgical stapling apparatus 10.

[0119] With reference to FIGS. 6-9, during the manufacturing process, with suture release assembly 74 in the open or release configuration (FIGS. 8 and 9), a surgical anvil buttress “B” is laid over the tissue contacting surface of anvil plate 70. Then, a first end of a surgical suture “S1” is inserted into one of the pair of distal recesses 70c and a second end of surgical suture “S1” is extended across the surgical anvil buttress “B” (see FIG. 2) and inserted into the other of the pair of distal recesses 70c. It is contemplated that the first end of surgical suture “S1” may include a knot, stop or the like (not shown) sized so as to not pass through the narrower recess of the distal pair of recesses 70c.

[0120] With the second end of the surgical suture “S1” disposed in the pair of distal recesses 70c, and with the surgical suture “S1” pulled through the surgical anvil buttress “B”, a tool (not shown) is inserted through arcuate slot 75a of guide plate 75 and engaged with an opening provided in the pin 77d of release bar 77c. With reference to FIGS. 6 and 7, the tool is then manipulated to move through or along arcuate slot 75a of guide plate 75, thereby actuating or moving release bar 77c and rotating eccentric cam 77a. As eccentric cam 77a is rotated, boss 77b is rotated around the pivot axis of eccentric cam 77a and acts on the walls of elongate slot 76b of anchor bar 76 thereby causing anchor bar 76 to pivot. As anchor bar 76 is pivoted, finger 76c thereof is caused to extend into or overlie one of the distal recesses 70c and to pinch the second end of the surgical suture disposed therewith. Meanwhile, release bar 77c has been moved to a position extending across knife slot 70b of anvil plate 70. Suture release assembly 74 is now in the locking or anchoring configuration, as described above. The distal recess 70c that cooperates with the finger 76c is desirably relatively wide so as to allow the suture “S1” to easily pass into and out of the recess 70c when the 76 anchor bar is away from the recess 70c. The other distal recess 70c, arranged on the opposite lateral side of the anvil plate 70, may be the same size, or may be small enough to cinch the suture “S1” and hold the suture in place to facilitate assembly.

[0121] In operation, with surgical anvil buttress “B1” secured against the lower surface of anvil plate 70, during firing of surgical stapling apparatus 10, as drive assembly 50 is advanced (i.e., moved from a proximal-most position to a distal-most position), knife blade 66 slices through a central section of the proximal suture “S2”, thereby freeing the proximal end of the surgical anvil buttress “B1” from anvil assembly 20. During use, as the fusing stroke of surgical stapling apparatus 10 is nearing completion and as drive assembly 50 approaches a distal end of knife slot 70b of anvil plate 70, as seen in FIG. 9, drive assembly 50 contacts release bar 77c, urging release bar 77c and, in turn, eccentric cam 77a to rotate about the pivot axis thereof. As eccentric cam 77a is rotated, boss 77b is rotated around the pivot axis of eccentric cam 77a and acts on the walls of elongate slot 76b of anchor bar 76 thereby causing anchor bar 76 to pivot. As anchor bar 76 is pivoted, finger 76c thereof is caused to move away from the relatively wider distal recess 70c and to release the second end of the surgical suture “S” disposed therewith. With the second end of surgical suture “S” released or free, the distal end of the surgical anvil buttress “B1” is free to separate from the tissue contacting surface of anvil plate 70.

[0122] As seen in FIGS. 1 and 2, cartridge assembly 18 includes a carrier 80a defining an elongated support channel 80a. Elongated support channel 80a of carrier 80a receives a staple cartridge 82 therein. Corresponding tabs and slots formed along staple cartridge 82 and carrier 80 function to retain staple cartridge 82 within carrier 80. A pair of support struts formed on and extending from staple cartridge 82 are positioned to rest on side walls of carrier 80 to further stabilize staple cartridge 82 within support channel 80a of carrier 80. Staple cartridge 82 includes retention slots 82a formed therein for receiving a plurality of fasteners 84 and pushers 86. A plurality of spaced apart longitudinal slots 82d extend
through staple cartridge 82 to accommodate upstanding cam wedges 90a of an actuation sled 90. The actuation sled 90 includes a central upstanding wedge or wall 90b. Central wall 90b defines a distal notch or shoulder 90c formed therein (See FIG. 2).

A central longitudinal slot 82c is formed in and extends along the length of staple cartridge 82 to facilitate passage of central wall portion 62 of head 60 therethrough. During operation of surgical stapler 10, actuation sled 90 translates through longitudinal slots 82b of staple cartridge 82 to advance cam wedges 90a into sequential contact with pushers 92, to cause pushers 92 to translate vertically within retention slots 82a and urge fasteners 84 (e.g., staples) from slots 82c into the staple forming cavities 70a of anvil plate 70 of anvil assembly 20.

With continued reference to FIGS. 1 and 2, staple cartridge 82 defines a proximal pair of recesses 82e formed near a proximal end thereof and disposed, one each, on opposed sides of longitudinal slot 82c. Staple cartridge 82 further defines a distal pair of recesses 82f formed near a distal end thereof and disposed, one each, on opposed sides of longitudinal slot 82c. In one embodiment, at least one of the recesses of each of the proximal pair of recesses 82e and the distal pair of recesses 82f is preferably non-circular and constricting or otherwise arranged so as to frictionally engage and/or pinch an anchor “S”.

As seen in FIGS. 1 and 2B, cartridge assembly 18 further includes a surgical cartridge buttress “B2”, pledget or like operatively secured to an upper surface or tissue contacting surface of staple cartridge 82, by anchors “S3” and “S4”, to overlie at least some of staple pockets 82a and/or at least a portion of a length of longitudinal slot 82c. In particular, an anchor “S2” is cinched around a proximal portion of surgical cartridge buttress “B2” and each of the proximal pair of recesses 82e and an anchor “S3” is cinched around a distal portion of the surgical cartridge buttress “B2” and each of the distal pair of recesses 82f.

In one particular embodiment, a first end of each anchor “S” includes a knot, stop or the like (not shown) sized so as to not pass through one recess of the proximal pair of recesses 82e and a second end of each anchor “S” passes over, and transversely across, surgical cartridge buttress “B2”, at least once, and back through the other recess of the proximal pair of recesses 82e. For example, the second end of each anchor “S” may be pinched or cinched in the other recess of the proximal pair of recesses 82e so as to anchor the second end of the anchor “S” and secure the surgical cartridge buttress “B2” against the tissue contacting surface of staple cartridge 82. Similarly, an anchor “S3” is used to extend transversely across surgical cartridge buttress “B2” and into engagement with the distal pair of recesses 82f.

In a further embodiment, the release assembly is arranged to cut the suture “S”. The arcuate slot 75a on the guide plate 75 extends in the opposite direction so that it is arranged to drive the anchor bar 95 toward the suture “S.” The surface of the anchor bar 76 that faces the suture 5 includes a sharpened edge and cuts the suture when actuated by the drive assembly.

Surgical cartridge buttress “B2” includes a proximal pair of notches formed in side edges aligned with the proximal pair of recesses 82e of staple cartridge 82, a distal pair of notches formed in side edges thereof aligned with the distal pair of recesses 82f of staple cartridge 82, and a proximal notch formed in a proximal edge thereof aligned with longitudinal slot 82c when surgical cartridge buttress “B2” is secured to staple cartridge 82. Surgical cartridge buttress “B2” further includes a tongue or tab extending from a distal edge thereof to facilitate with the attachment of surgical cartridge buttress “B2” to staple cartridge 82 during the assembly process. It is contemplated that a width of surgical cartridge buttress “B2” may be reduced in a proximal portion thereof. It is further contemplated that the tongue is removed from surgical cartridge buttress “B2” following securing of surgical cartridge buttress “B2” to staple cartridge 82 and prior to packaging or shipment.

As seen in FIGS. 2 and 10-14, cartridge assembly 18 further includes a cartridge release assembly 94 supported in and near a distal end of staple cartridge 82. Release assembly 94 includes a lock or anchor bar 95 pivotally connected to staple cartridge 82. Anchor bar 95 includes a body portion 95a having a finger 95b extending from an edge thereof. Finger 95b is in operative registration with one of the distal pair of recesses 82f, preferably, the one of the distal pair of recesses having the relatively larger width dimension.

Release assembly 94 further includes an anchor bar actuation member 97 pivotally connected to anchor bar 95 (as seen in FIGS. 11 and 12). Actuation member 97 includes a first cam surface 97a located along a proximal edge of actuation member 97 and extending across central longitudinal slot 82c of staple cartridge 82, and a second eccentric cam surface 97b extending distally and laterally from actuation member 97 in close proximity to the one of the distal pair of recesses 82f that is operatively associated with finger 95b of anchor bar 95. First cam surface 97a of actuation member 97 is substantially arcuate or convex. Actuation member 97 defines an aperture or opening 97c configured and dimensioned to receive a pin 95c of anchor bar 95 therein so as to anchor bar 95 and actuation member 97 to pivot or rotate relative to one another.

In operation, rotation of actuation member 97 in a first direction, about its pivot point, results in second cam surface 97f pressing against a surface 82g (see FIGS. 13 and 14) of staple cartridge 82 and thus moving finger 95b at least partially over and/or across the one of the distal pair of recesses 82f associated therewith.

As seen in FIG. 13, suture release assembly 94 includes a locking or anchoring configuration wherein first cam surface 97a of actuation member 97 extends into and across central longitudinal slot 82c of staple cartridge 82, wherein second cam surface 97f of actuation member 97 is pressed against surface 82g of staple cartridge 82, and thus finger 95b of anchor bar 95 extends into or overlies the respective one of the pair of distal recesses 82f in operative registration therewith. Fastener release assembly 94 may be maintained in the locking or anchoring configuration by way of a biasing member or a retent that engages actuation member 97 in a manner so as to keep actuation member 97 in the locked or anchoring configuration. When in such a locked or anchoring configuration, the suture “S3” may be urged into recess 82f of staple cartridge 82. It is contemplated that suture release assembly 94 may include a friction fit or snap fit feature for maintaining and/or retaining suture release assembly 94 in the locking or anchoring configuration at all times following the manufacturing/assembly process and prior to a complete firing of surgical stapling apparatus 10.

As seen in FIGS. 12 and 14, suture release assembly 94 includes an open or release configuration wherein finger 95b of anchor bar 95 does not extend into or overlie the
respective one of the pair of distal recesses 82f in operative registration therewith, first cam surface 97a of actuation member 97 does not extend into and across central longitudinal slot 82c of staple cartridge 82, and second cam surface 97b of actuation member 97 is not pressed against surface 82g of staple cartridge 82.

[0134] Suture release assembly 94 is used by a manufacturer during the assembly process of surgical stapling apparatus 10 to secure, with an anchor, surgical suture, or tether “S”; a surgical cartridge buttress “B2” (see FIG. 2) to a tissue contacting surface of the staple cartridge 82, and by the end user of surgical stapling apparatus 10 to automatically release or free the surgical cartridge buttress “B2” from the tissue contacting surface of the staple cartridge 82 upon a complete firing of the surgical stapling apparatus 10.

[0135] With reference to FIGS. 10-14, during the manufacturing process, with suture release assembly 94 in the open or release configuration, a surgical cartridge buttress “B2” is laid over the tissue contacting surface of staple cartridge 82. Then, a first end of a surgical suture “S” is inserted into the relatively narrower of the pair of distal recesses 82f and a second end of surgical suture “S” is extended across the surgical cartridge buttress “B2” and inserted into the relatively wider of the pair of distal recesses 82f. It is contemplated that the first end of surgical suture “S” may include a knot, stop or the like (not shown) sized so as to not pass through the narrower recess of the distal pair of recesses 82f.

[0136] As seen in FIG. 11, staple cartridge 82 includes an access opening 83 formed therein which is used to insert and receive suture release assembly 94 therein and to provide access to actuation member 97. With the second end of the surgical suture “S” disposed in the relatively wider of the pair of distal recesses 82f, and with the surgical suture “S” pulled across the surgical cartridge buttress “B2,” actuation member 97 is rotated about the pivot axis causing first cam surface 97a of actuation member 97 to extend into and across central longitudinal slot 82c of staple cartridge 82 and causing second cam surface 97b of actuation member 97 to press against surface 82g (see FIGS. 13 and 14) of staple cartridge 82. In so doing, anchor bar 95 is pivoted by an amount sufficient for finger 95 of anchor bar 95 to extend into or override the respective one of the pair of distal recesses 82f in operative registration therewith thereby pinch the second end of the surgical suture disposed therewith. Suture release assembly 94 is now in the locking or anchoring configuration, as described above.

[0137] In operation, with surgical cartridge buttress “B1” secured against the tissue contacting surface of staple cartridge 82, during firing of surgical stapling apparatus 10, as drive assembly 50 is advanced (i.e., moved from a proximal-most position to a distal-most position), knife blade 66 slices through a central section of the proximal suture “S4,” thereby freeing the proximal end of the surgical cartridge buttress “B2” from staple cartridge 82. During use, as the firing stroke of surgical stapling apparatus 10 is nearing completion and as drive assembly 50 approaches a distal end of central longitudinal slot 82c of staple cartridge 82, as seen in FIG. 14, drive assembly 50 contacts first cam surface 97a of actuation member 97, urging actuation member 97 to rotate. Second cam surface 97b of actuation member 97 also rotates about the pivot axis of pivot pin 95c thereof. As eccentric second cam surface 97b is rotated about the pivot axis second cam surface 97b, the distance between the pivot pin 95c and the surface 82g of staple cartridge 82 is reduced thereby pivoting anchor bar 95 about pivot pin 95c. As anchor bar 95 is pivoted, finger 95c thereof is caused to move away from the relatively wider distal recess 82f and to release the second end of the surgical suture “S” disposed therewith. With the second end of surgical suture “S” released or free, the distal end of the surgical cartridge buttress “B2” is free to separate from the tissue contacting surface of staple cartridge 82. The distal recesses 82f that is in operative registration with finger 95c of anchor bar 95 is dimensioned so that, notwithstanding the rotation of anchor bar 95, the suture “S3” is not cinched therewith.

[0138] As drive assembly 50 is advanced from the proximal position to the distal position, knife blade 66 thereof slices or cuts longitudinally through both surgical anvil buttress “B1” and surgical cartridge buttress “B2,” thereby dividing the buttresses “B1, B2” substantially in half. Additionally, as drive assembly 50 is advanced from a proximal-most position to a distal-most position, upstanding cam wedges 90a of actuation sled 90 actuates pushers 92, to cause pushers 92 to translate vertically within retention slots 82a and urge fasteners 84 from slots 82a. As fasteners 84 (e.g., staples) are urged from slots 82a of staple cartridge 82, legs of fasteners 84 penetrate and pass through both surgical anvil buttress “B1” and surgical cartridge buttress “B2,” through any tissue (not shown) interposed between surgical anvil buttress “B1” and surgical cartridge buttress “B2,” and are formed against or within staple forming cavities 70a of anvil plate 70 of anvil assembly 20. Buttresses “B1, B2” preferably include perforations that divide the buttresses and facilitate removal of the apparatus from the tissue.

[0139] According to the present disclosure, surgical anvil buttress “B1” and/or surgical cartridge buttress “B2” is pre-loaded (i.e., from the manufacturer) onto anvil assembly 20 or cartridge assembly 18, respectively, of the loading unit 16. After the loading unit is fired, an additional unfired loading unit, with or without buttresses “B”, can be loaded onto the surgical apparatus. In certain embodiments, the replaceable loading unit is a removable cartridge that can be inserted into a support channel of carrier 80. A buttress and release assembly may be pre-loaded onto the removable cartridge and means for the user of the surgical apparatus to load a buttress onto the anvil assembly can be provided. For example, a buttress having an adhesive can be used. Additional or replacement buttresses “B” for anvil assembly 170 and/or cartridge assembly 18 may be secured to either anvil assembly 20 or cartridge assembly 18 as needed or desired.

[0140] In a further embodiment, the release assembly may be arranged to cut the suture “S.” The cam surface 97b on the actuation member 97 may be arranged to cause to the suture bar 95 toward the suture “S.” The surface of the anchor bar 97 that faces the suture “S” may include a sharpened edge and may cut the suture when actuated by the drive assembly.

[0141] Turning now to FIGS. 15-25, a loading unit according to another embodiment of the present disclosure, for surgical stapling apparatus 10, is generally designated as 116. Loading unit 116 is substantially similar to loading unit 16 and will only be discussed in detail herein to the extent necessary to identify differences in construction and operation.

[0142] As seen in FIGS. 15-20, anvil assembly 120 of loading unit 116 includes a suture release assembly 174 disposed between anvil plate 170 and cover plate 172 at a location in operative registration with the distal pair of recesses 170c. Suture release assembly 174 includes a link arm 175 pivotally connected to anvil plate 170 (as seen in FIG. 18) and/or optionally cover plate 172. Link arm 175 includes a body
portion 175a defining a pocket or recess 175c formed in a first side edge 175b thereof and a camming surface 175d defined substantially along an adjacent side or proximal edge thereof. Pocket 175c has a substantially arcuate, circular or rounded profile. As seen in FIGS. 18 and 20, link arm 175 includes a pivot pin 175e extending from body portion 175a for pivotally connecting link arm 175 to anvil assembly 120.

[0143] Release assembly 174 further includes a pusher bar 177 pivotally connected to link arm 175 and slidably disposed between anvil plate 170 and cover plate 172. Pusher bar 177 includes a body portion 177a having a substantially rectangular configuration and a head 177b, extending from a corner of body portion 177a, and having a substantially circular or rounded configuration. Head 177b of pusher bar 177 is configured and dimensioned for pivotable and/or rotatable connection in pocket 175c of link arm 175.

[0144] As seen in FIG. 19, suture release assembly 174 includes an unactuated configuration wherein pusher bar 177 does not extend into or overlie the respective one of the pair of distal recesses 170d in operative registration therewith, and a longitudinal axis of link arm 175 is oriented substantially parallel with a longitudinal axis of loading unit 116. It is contemplated that suture release assembly 174 may include a friction fit or snap fit feature for maintaining and/or retaining suture release assembly 174 in the locking or anchoring configuration at all times following the manufacturing/assembly process and prior to a complete firing of the surgical stapling apparatus.

[0145] As seen in FIG. 20, suture release assembly 174 includes an actuated configuration wherein pusher bar 177 extends into or overlies the respective one of the pair of distal recesses 170e in operative registration therewith, and a longitudinal axis of link arm 175 is oriented substantially transverse to the longitudinal axis of loading unit 116.

[0146] With reference to FIGS. 15-20, during the manufacturing process, with suture release assembly 174 in the unactuated configuration, a surgical anvil buttress (not shown) is laid over the tissue contacting surface of anvil plate 170. Then, a first end of a surgical suture “S1” is inserted into one of the pair of distal recesses 170d and a second end of surgical suture “S1” is extended across the surgical anvil buttress (not shown) and inserted into the other of the pair of distal recesses 170c. It is contemplated that each of the pair of distal recesses 170e is an open ended constraining slot so as to frictionally grip or cinch a surgical suture “S1” disposed therein.

[0147] In operation, with a surgical anvil buttress (not shown) secured against the lower surface of anvil plate 170, during firing of the surgical stapling apparatus, as drive assembly 150 is advanced (i.e., moved from a proximal-most position to a distal-most position), knife blade 166 slices through a central section of the proximal surface (not shown), thereby freeing the proximal end of the surgical anvil buttress (not shown) from anvil assembly 120. During use, as the firing stroke of the surgical stapling apparatus is nearing completion and as drive assembly 150 approaches a distal-most end of knife slot 170b of anvil plate 170, as seen in FIG. 20, drive assembly 150 contacts camming surface 175c of link arm 175, thus urging link arm 175 to rotate or pivot around the pivot pin and, in turn, urging pusher bar 177 to translate in the direction of the slot. As pusher bar 177 is translated, pusher bar 177 comes into contact with and urges the second end of suture “S1” out of the distal recess 170e that is registration therewith to release the second end of suture “S1” therefrom. With the second end of surgical suture “S1” released or free from distal recess 170b, the distal end of the surgical anvil buttress “B1” is free to separate from the tissue contacting surface of anvil plate 170.

[0148] As seen in FIGS. 15, 16 and 21-25, cartridge assembly 118 of loading unit 116 includes a cartridge release assembly 194 supported in and near a distal end of staple cartridge 182. Release assembly 194 includes a retainer 195 supported in a distal end of staple cartridge 182 at a location near a distal end of longitudinal slot 182e and at least partially extending thereacross. Retainer 195 includes a body portion 195a, a boss 195b extending from a surface thereof, and defines a channel or recess 195c formed in a surface thereof and extending through a side thereof. When supported in staple cartridge 182, recess 195c of retainer 195 is in registration with one of the pair of distal recesses 182d of staple cartridge 182.

[0149] Release assembly 194 further includes a pusher member 196 having a head portion 196a pivotally connected to boss 195b of retainer 195. Pusher member 196 further includes a first leg member 196b extending from head portion 196a and a second leg member 196c connected to a free end of first leg member 196b via a living hinge connection 196f. Pusher member 196 further includes piston 196e connected to a free end of second leg member 196c via a living hinge connection 196f. Piston 196e is slidably disposed and translatable within recess 195c of retainer 195. In certain other embodiments, the pusher is a linkage assembly having a first link pivotably connected to the cartridge at one end. The other end of the first link is pivotably connected to a first end of a second link. The opposite, second, end of the second link is confined in the recess of the retainer.

[0150] As seen in FIG. 24, release assembly 194 includes an unactuated configuration wherein piston 196e does not extend into or overlie the respective one of the pair of distal recesses 182c; and first leg member 196b and second leg member 196c are angled with respect to one another and project proximally along longitudinal slot 182c of staple cartridge 182. It is contemplated that suture release assembly 194 may include a friction fit or snap fit feature for maintaining and/or retaining suture release assembly 194 in the locking or anchoring configuration at all times following the manufacturing/assembly process and prior to a complete firing of the surgical stapling apparatus.

[0151] As seen in FIG. 25, suture release assembly 194 includes an actuated configuration wherein piston 196e extends into or overlies the respective one of the pair of distal recesses 182c in operative registration therewith, and first leg member 196b and second leg member 196c are extended substantially along a common axis.

[0152] With reference to FIGS. 21-25, during the manufacturing process, with suture release assembly 194 in the unactuated configuration, a surgical cartridge buttress (not shown) is laid over the tissue contacting surface of staple cartridge 182. Then, a first end of a surgical suture “S3” is inserted into one of the pair of distal recesses 182c and a second end of surgical suture “S3” is extended across the surgical cartridge buttress and inserted into the other of the pair of distal recesses 182c. It is contemplated that at least the recess 182b that is adjacent the retainer 195 is an open ended constraining slot so as to frictionally grip or cinch a surgical suture “S3” disposed therein.

[0153] In operation, with surgical cartridge buttress (not shown) secured against the tissue contacting surface of staple cartridge 182, during firing of surgical stapling apparatus 10,
as drive assembly 150 is advanced (i.e., moved from a proximal-most position to a distal-most position), knife blade 166 slices through a central section of a proximal suture (not shown), thereby freeing the proximal end of the surgical cartridge buttress from staple cartridge 182. During use, as the firing stroke of surgical stapling apparatus 10 is nearing completion and as drive assembly 150 approaches a distal end of central longitudinal slot 182c of staple cartridge 182, as seen in FIG. 25, drive assembly 150 contacts living hinge connection 196d between first leg member 196b and second leg member 196c. As drive assembly 150 is further advanced distally, drive assembly 150 presses against living hinge connection 196d, causing first leg member 196b and second leg member 196c to extend. As first leg member 196b and second leg member 196c extend, piston 196e is translated through recess 195c of retainer 195. As piston 196e is translated through recess 195c of retainer 195, piston 196c engages the second end of suture “S3” and urges suture “S3” out of the distal recess 182. In operation, when pusher 277 is in the advanced position, the distal end of the staple cartridge buttress is free to separate from the tissue contacting a surface of staple cartridge 182.

[0154] Turning now to FIGS. 26-29, a loading unit according to another embodiment of the present disclosure, for surgical stapling apparatus 10, is generally designated as 216. Loading unit 216 is substantially similar to loading unit 16 or 116 and will only be discussed in detail herein to the extent necessary to identify differences in construction and operation.

[0155] As seen in FIGS. 26-29, anvil assembly 220 of loading unit 216 includes a release assembly 274 disposed between anvil plate 270 and cover plate 272 at a location in operative registration with the distal pair of recesses 270c. Release assembly 274 includes a cam 275 pivotedly connected to anvil plate 270 and/or cover plate 272. Cam 275 includes a body portion 275a having an oval profile and defining a cam surface 275b that is in operative association with one of the distal pair of recesses 270c. Cam 275 further includes a finger or stem 275c projecting at an angle from a lateral edge of body portion 275a.

[0156] Release assembly 274 further includes a pusher 277 slidably disposed between anvil plate 270 and cover plate 272. As seen in FIGS. 27-29, pusher 277 may be slidably disposed within longitudinal slot 270b of anvil plate 270a. Pusher 277 includes a cam arm 277a extending substantially in a distal direction. Cam arm 277a is configured and dimensioned to engage and/or act on finger 275c extending from cam 275.

[0157] As seen in FIG. 28, suture release assembly 274 includes an unactuated configuration wherein body portion 275c of cam 275 does not extend into or overlie the respective one of the pair of distal recesses 270c in operative registration therewith, and pusher 277 is in a retracted or non-advanced position. As seen in FIG. 28, cam arm 277a of pusher 277 is adjacent finger 275c and may, although not necessarily, be in contact with finger 275c of cam 275.

[0158] As seen in FIG. 29, suture release assembly 274 includes an actuated configuration wherein body portion 275c of cam 275 extends into or overlies the respective one of the pair of distal recesses 270c in operative registration therewith, and pusher 277 is in an advanced position. As seen in FIG. 29, when pusher 277 is in the advanced position, cam arm 277a of pusher 277 has engaged finger 275c of cam 275 to rotate body portion 275a of cam 275.

[0159] In operation, with an surgical anvil buttress (not shown) secured against the lower surface of anvil plate 270, during firing of the surgical stapling apparatus, as drive assembly 250 approaches a distal-most end of knife slot 270b of anvil plate 270, drive assembly 250 contacts pusher 277, thus driving pusher 277 distally. As pusher 277 is driven distally, as seen in FIGS. 28 and 29, cam arm 277a of pusher 277 engages finger 275c of cam 275 to rotate or pivot cam 275. As cam 275 is rotated, cam surface 275b of cam 275 comes into contact with and urges the second end of suture “S1” out of the distal recess 270c that is registration therewith to release the second end of suture “S1” therefrom. With the second end of surgical suture “S1” released or free from distal recess 270c, the distal end of the surgical anvil buttress is free to separate from the tissue contacting surface of anvil plate 270.

[0160] Turning now to FIGS. 30 and 31, a loading unit according to another embodiment of the present disclosure, for surgical stapling apparatus 10, is generally designated as 316. Loading unit 316 is substantially similar to loading unit 16, 116 or 216 and will only be discussed in detail herein to the extent necessary to identify differences in construction and operation.

[0161] As seen in FIGS. 30 and 31, anvil assembly 320 of loading unit 316 includes a release assembly 374 disposed between anvil plate 370 and the cover plate at a location in operative registration with the distal pair of recesses 370c. Release assembly 374 includes a body portion 374a slidably disposed within longitudinal slot 370b of anvil plate 370a. Release assembly 374 further includes a head portion 374b connected to or extending from a distal surface of body portion 374a. Head portion 374b defines a cam surface 374c along a side edge thereof that is configured and dimensioned for operatively association with one of the distal pair of recesses 370c formed in anvil plate 370a. Cam surface 374c may have an arculate, curved or sinusoidal profile.

[0162] As seen in FIG. 30, suture release assembly 374 includes an unactuated configuration wherein body portion 374a is retracted and cam surface 374c does not extend into or across the respective one of the pair of distal recesses 370c in operative registration therewith.

[0163] As seen in FIG. 31, suture release assembly 374 includes an actuated configuration wherein body portion 374a is advanced distally and cam surface 374c extends into or overlies the respective one of the pair of distal recesses 370c in operative registration therewith.

[0164] In operation, with a surgical anvil buttress (not shown) secured against the lower surface of anvil plate 370, during firing of the surgical stapling apparatus, as drive assembly 350 approaches a distal-most end of knife slot 370b of anvil plate 370, as seen in FIGS. 30 and 31, drive assembly 350 contacts body portion 374a of release assembly 374, thus driving head portion 374b distally. As head portion 374b is driven distally, cam surface 374c comes into contact with and urges the second end of suture “S1” out of the distal recess 370c that is registration therewith to release the second end of suture “S1” therefrom. With the second end of surgical suture “S1” released or free from distal recess 370c, the distal end of the surgical anvil buttress is free to separate from the tissue contacting surface of anvil plate 370.

[0165] In a further embodiment, the driving head portion may include a sharpened edge instead of cam surface 374c.
As the driving head portion is moved distally, the suture “S1” is caught between the sharpened edge of the driving head portion and the side of the distal recess 370e, severing the suture “S1.”

[0166] Turning now to FIGS. 32-38, a loading unit according to another embodiment of the present disclosure, for surgical stapling apparatus 10, is generally designated as 416. Loading unit 416 is substantially similar to loading unit 16, 116, 216 or 316 and will only be discussed in detail herein to the extent necessary to identify differences in construction and operation.

[0167] As seen in FIGS. 32-38, cartridge assembly 418 of loading unit 416 includes a cartridge release assembly 494 supported in and near a distal end of staple cartridge 482. Release assembly 494 includes a retainer 495 supported in a distal end of staple cartridge 482 at a location near a distal end of longitudinal slot 482c and at least partially extending thereacross. Retainer 495 includes a body portion 495a, a boss 495b, extending from a surface thereof, and defines a channel or recess 495c formed in a surface thereof and extending through a side thereof. Body portion 495a of retainer 495 defines a slot 495d formed in opposed sides thereof and which are configured to receive a suture therein. When supported in staple cartridge 482, recess 495c of retainer 495 is in registration with one of the pair of distal recesses 482f of staple cartridge 482, and slots 495d of retainer 495 are in registration with the pair of distal recesses 482f of staple cartridge 482 (see FIG. 32).

[0168] Release assembly 494 further includes a cam member 496 having a head portion 496a pivotally connected to boss 495b of retainer 495. Cam member 496 further includes a body portion 496b extending from head portion 496a. Body portion 496b defines a first cam surface 496c and a second cam surface 496d each extending substantially tangentially to an axis of rotation of cam member 496.

[0169] Release assembly 494 further includes a sled 497 slidably disposed within channel 495c of retainer 495. Sled 497 includes a body portion 497a defining a cam surface 497b oriented to operatively engage second cam surface 496d of cam member 496 and a side wall 497c in registration with the one of the pair of distal recesses 482f of staple cartridge 482 that is in registration with recess 495c of retainer 495.

[0170] As seen in FIG. 37, release assembly 494 includes an unactuated configuration wherein first cam surface 496c of cam member 496 extends across longitudinal slot 482c of staple cartridge 482, side wall 497c of sled 497 does not extend into or over the one of the pair of distal recesses 482f of staple cartridge 482 that is in registration therewith, and second cam surface 496d of cam member 496 is substantially in flush contact with cam surface 497b of sled 497.

[0171] As seen in FIG. 38, release assembly 494 includes an actuated configuration wherein first cam surface 496c of cam member 496 does not substantially extend across longitudinal slot 482c of staple cartridge 482, side wall 497c of sled 497 extends into or over the one of the pair of distal recesses 482f of staple cartridge 482 that is in registration therewith, and second cam surface 496d of cam member 496 is spaced away from cam surface 497b of sled 497.

[0172] With reference to FIGS. 32-38, during the manufacturing process, with suture release assembly 494 in the unactuated configuration, a surgical cartridge buttress (not shown) is laid over the tissue contacting surface of staple cartridge 482. Then, a first end of a surgical suture “S3” is inserted into one of the pair of distal recesses 482f and a second end of surgical suture “S3” is extended across the surgical cartridge buttress and inserted into the other of the pair of distal recesses 482f. It is contemplated that at least the distal recesses 482f adjacent the side wall 497c is an open ended constricting slot so as to frictionally grip or cinch a surgical suture “S3” disposed therein.

[0173] In operation, with a surgical cartridge buttress (not shown) secured against the tissue contacting surface of staple cartridge 482, during firing of the surgical stapling apparatus, as drive assembly 450 approaches a distal end of central longitudinal slot 482c of staple cartridge 482, as seen in FIG. 38, drive assembly 450 contacts second cam surface 496c of cam member 496 extending across longitudinal slot 482c of staple cartridge 482.

[0174] As drive assembly 450 is further advanced distally, drive assembly 450 presses against first cam surface 496c of cam member 496, causing cam member 496 to rotate. As cam member 496 is rotated, second cam surface 496d thereof contacts and presses against cam surface 497b of sled 497 thus causing sled 497 to translate in recess 495c of retainer 495. As sled 497 is translated through recess 495c, side wall 497c of sled 497 engages the second end of suture “S3” and urges suture “S3” out of the distal recess 482f that is registration therewith to release the second end of suture “S3” therefrom. With the second end of surgical suture “S3” released or free from distal recess 482f, the distal end of the surgical cartridge buttress is free to separate from the tissue contacting surface of staple cartridge 482.

[0175] Turning now to FIGS. 39-46, an anvil assembly according to another embodiment of the present disclosure, for use with loading unit 116 (see FIGS. 15-25), is generally designated as 520. Anvil assembly 520 is substantially similar to anvil assembly 120 and will only be discussed in detail herein to the extent necessary to identify differences in construction and operation.

[0176] As seen in FIGS. 39 and 40, anvil assembly 520 includes a suture release assembly 574 disposed between anvil plate 570 and cover plate 572 at a location in operative registration with the distal pair of recesses 570e of anvil plate 570. Suture release assembly 574 includes a link arm 575 pivotally connected to anvil plate 570. Link arm 575 includes a body portion 575a defining a pocket or recess 575c formed in a first side edge 575b thereof and a camming surface 575f defined substantially along an adjacent side or proximal edge thereof. Pocket 575c has a substantially circular profile and defines an arcuate relief 575e is a side wall thereof.

[0177] Release assembly 574 further includes a pusher bar 577 pivotally connected to link arm 575 and slidably disposed between anvil plate 570 and cover plate 572. Pusher bar 577 includes a body portion 577a having a substantially rectangular configuration and a head 577b, extending from a corner of body portion 577a, and having a substantially circular or rounded configuration. Body portion 577a of pusher bar 577 defines an arcuate distal surface or wall 577c configured to ride against a surface 570f of anvil plate 570. Head 577b of pusher bar 577 is configured and dimensioned for pivotable and/or rotatable connection in pocket 575c of link arm 575. Head 577b of pusher bar 577 includes a stop member 577d projecting from a side edge thereof and into arcuate relief 575e of pocket 575c of link arm 575. A relative distance of rotation of pusher bar 577 relative to link arm 575 is determined by a relative length of arcuate relief 575e and a relative width of stop member 577d.
[0178] Turning now to FIGS. 41-46, in accordance with the present embodiment, anvil assembly 520 defines a proximal pair of recesses 570d formed near a proximal end of anvil plate 570 and disposed, one each, on opposed sides of longitudinal slot 570b. Anvil plate 570 defines a distal pair of recesses 570e formed near a distal end of anvil plate 570 and disposed, one each, on opposed sides of longitudinal slot 570b. In one embodiment, at least one of the recesses of each of the proximal pair of recesses 570d and at least one of the recesses of the distal pair of recesses 570e is in the form of a keyhole-shaped slot/recess.

[0179] In particular, as seen in FIG. 44, at least one of the recesses of each of the proximal pair of recesses 570d defines a uniform width central portion 570d, an expanding or widening portion 570d, disposed at one end of central portion 570d, and opening out beyond a side edge of anvil plate 570, and an enlarged head portion 570d, disposed at an opposite end of central portion 570d. Central portion 570d, of recess 570d, defines a first width W1, and enlarged head portion 570d, defines a second width W2 that is larger than first width W1.

[0180] As seen in FIG. 43, at least one of the recesses of each of the distal pair of recesses 570e defines a uniform width central portion 570e, an expanding or widening portion 570e, disposed at one end of central portion 570e, and opening out beyond a side edge of anvil plate 570, and an enlarged head portion 570e, disposed at an opposite end of central portion 570e. Central portion 570e, of recess 570e, defines a first width W1, and enlarged head portion 570e, defines a second width W2 that is larger than first width W1. As seen in FIGS. 43 and 44, enlarged head portion 570e is oval in shape having a length that is greater than second width W2.

[0181] In this manner, the sutures will reside in the enlarged head portions of the proximal pair of recesses 570d and the distal pair of recesses 570e, and the reduced width portions thereof will inhibit the sutures from sliding/walking out of the recesses without application of an external force thereto. By way of example, it is envisioned that width W1 is about 0.009-0.011 inches, width W2 is about 0.014-0.016 inches, and the sutures have a diameter of about 0.0165-0.0185 inches.

[0182] As seen in FIG. 46, at least one of the recesses of each of the distal pair of recesses 572b defines a uniform width central portion 572b, an expanding or widening portion 572b, disposed at one end of central portion 572b, and opening out beyond a side edge of cover plate 572, and an enlarged head portion 572b, disposed at an opposite end of central portion 572b. Central portion 572b, of recess 572b, defines a first width W1, and enlarged head portion 572b, defines a second width W2 that is larger than first width W1.

[0183] Keyhole-shaped slots or recesses 570d, 570e, 572b facilitate the insertion and/or release of a suture “S” (not shown) therefrom, as compared to recesses 70d, 70e of anvil plate 70 and recess 72b of cover plate 72, as described above.

[0184] It is further contemplated that a keyhole-shaped slot or recess may be provided in place of any of the side slots defined in any of the anvil assemblies and/or cartridge assemblies disclosed herein.

[0185] In further embodiments, recesses 570d, 570e, 572b are provided with differently-shaped slots and configurations to facilitate the insertion and/or release of a suture “S” (not shown) in a variety of circumstances. While the following embodiments illustrate a recess on the distal end of cover plate 572, it is contemplated that these configurations may be applied equally to recesses on the anvil plate 570.

[0186] Referring now to FIG. 47, a recess 572f is shown having a uniform width central portion 572f, an expanding or widening portion 572f, disposed at one end of central portion 572f, and opening out beyond a side edge of cover plate 572, and a circular head portion 572f, disposed at an opposite end of central portion 572f. Central portion 572f, of recess 572f, defines a first width W1, and circular head portion 572f, defines a second width W2 that is larger than first width W1. Recess 572f differs from recess 572b in that the enlarged head portion 572f is elongated or oval while the head portion 572f is substantially circular.

[0187] Referring now to FIG. 48, a recess 572g is shown having a uniform width central portion 572g, disposed at an angle with a side edge of cover plate 572, an expanding or widening portion 572g, disposed at one end of central portion 572g, and opening out beyond a side edge of cover plate 572 and a rounded head portion 572g, disposed at an opposite end of central portion 572g. Recess 572g is configured to engage a suture “S” (not shown) at an angle rather than substantially transverse to a side edge of cover plate 572 as in previous embodiments. Recess 572g prevents a suture “S” (not shown) from sliding out of recess 572g in a path substantially transverse to a side edge of cover plate 572. This may be particularly beneficial during the operation of surgical stapling apparatus 10, as the anvil assembly 520 is advanced through tissue.

[0188] Referring to FIG. 49, an embodiment of a recess 572h is shown having a uniform width central portion 572h, an expanding or widening portion 572h, disposed at one end of central portion 572h, and opening out beyond a side edge of cover plate 572, and an enlarged head portion 572h, disposed at an opposite end of central portion 572h. Central portion 572h, of recess 572h, defines a first width W1, and enlarged head portion 572h, defines a second width W2 that is larger than first width W1. Disposed within central portion 572h, are a plurality of bars 572h, such that upon insertion of a suture “S” (not shown) into a recess 572h, the edges of 572h engage suture “S” (not shown) so that it is restricted from motion away from the enlarged head portion 572h.

[0189] Turning to FIG. 50, disposed on an inner wall of the recess 572h within the enlarged head portion 572h, are a pair of steps 572h, serve to trap suture “S” (not shown) within enlarged head portion 572h, to prevent/inhibit distal motion of the suture “S” (not shown) withdrawal of suture “S” from recess 572h. Suture “S” (not shown) is trapped along a path defined by the internal wall of recess 572h and steps 572h. If suture “S” (not shown) is provided with bars on its outer surface, steps 572h
may serve to engage the barbs on suture “S” (not shown) to further inhibit motion of sutures “S’. Thus, steps 572h,3a,3b
work in conjunction with barbs 572h,3a to keep suture “S’ (not shown) disposed in a substantially fixed position within the elongated head portion 572h during operation of the anvil assembly 520.

According to further embodiments of the present disclosure, it is contemplated that buttsures “B’ may be
provided or formed with integral wings or tabs extending therefrom for insertion and/or receipt into distal and/or proximal recesses of anvil assembly and/or cartridge assembly. It is further contemplated that sutures “S’ may be affixed to, embedded in or otherwise connected to buttsures “B’.


Surgical buttsures “B’ may be fabricated from a suitable biocompatible and bioabsorbable material. Surgical buttsures “B’ may be fabricated from a non-absorbent material which does not retain fluid. Surgical buttsures “B’ may be fabricated from “BIOSYN” made from GLYCOMER 631 (a block copolymer), a synthetic polyester composed of glycolide, dioxanone and trimethylene carbonate.

One block of the resulting copolymer contains randomly combined units derived from p-dioxanone (1,4-dioxan-2-one) and trimethylene carbonate (1,3-dioxan-2-one). The second block of the copolymer contains randomly combined units derived from glycolide and p-dioxanone. The resulting polyester is an ABA trilblock terpolymer possessing about 60% glycolide, about 14% dioxanone, and about 26% trimethylene carbonate.

In accordance with the present disclosure, it is further contemplated that surgical buttsures “B’ may be constructed and/or fabricated, from the above-identified materials, as a non-woven, absorbable felt and the like.

With reference to FIGS. 1-52, and specifically, FIGS. 51 and 52, as mentioned above, in accordance with the present disclosure, and either in place of or in addition to the methods and systems disclosed above for attaching surgical buttsures “B1, B2” to the tissue contacting/facing surface of cartridge assembly 18 and/or anvil assembly 20 of a surgical stapling apparatus 100, surgical buttsures “B1, B2” may be further attached to the tissue contacting/facing surface of cartridge assembly 18 and/or anvil assembly 20 of surgical stapling apparatus 10 in a number of different ways.

For example, a roughness of a tissue facing side of surgical buttsures “B1, B2” may be minimized, thereby reducing friction between tissues and the surgical buttsures “B1, B2” during tissue manipulation; a flexing of the surgical buttsures “B1, B2” attachment points thereof may be minimized, thereby limiting movement where the surgical buttsures “B1, B2” is not fastened to cartridge assembly 18 and/or anvil assembly 20; a shape of each surgical buttsures “B1, B2” may be modified to conform to the topography of tissue facing surface of cartridge assembly 18 and/or anvil assembly 20; and/or increase a width of a profile of surgical buttsures “B1, B2” to be wider than a width of the respective cartridge assembly 18 and/or anvil assembly 20 widths so that some lateral shifting of surgical buttsures “B1, B2” can occur without compromising reinforcement of the entire staple line.

Specifically, the surface roughness of the material of surgical buttsures “B1, B2” may be minimized by any number of means including calendaring, applying heat and pressure, adding a fabricuous coating, or forming the material on a flat surface. In the case of melt blown synthetic fabrics the material of surgical buttsures “B1, B2” could be produced by blowing fibers onto a smooth heated belt to encourage relaxation of the fibers to conform to the heated surface. Minimizing buttsure roughness reduces the interaction of the material of surgical buttsures “B1, B2” when being moved across tissue, thus reducing forces exerted on the surgical buttsures “B1, B2” which lead to movement of surgical buttsures “B1, B2”.

Also, flexing or the flexibility of the material of surgical buttsures “B1, B2” may be minimized by increasing the material density, basis weight, or choosing a base material that has a high Young’s modulus. In the case of melt blown synthetic fabrics, this can also be accomplished by calendaring with heated rollers to increase intra fiber bonding and to increase fiber packing Less material flexing equates to the surgical buttsures “B1, B2” moving less when forces are exerted thereon during tissue manipulation.

Additionally, as seen in FIGS. 51 and 52, a topography of the surgical buttsures “B1, B2” may be shaped through heat and pressure when on the respective cartridge assembly 18 and/or anvil assembly 20, or staple reload, so that the surgical buttsures “B1, B2” conforms to the shape of the tissue facing surface of the respective cartridge assembly 18 and/or anvil assembly 20. This concept could include deforming the topography of the surgical buttsures “B1, B2” through pressure with a patterned press in such a way the material is slightly deformed locally into the staple retaining pockets in the cartridge assembly 18 and into the staple forming pockets on the anvil assembly 20 and also into the knife slots in the anvil assembly 20 and cartridge assembly 18. These local deformations would increase the contact area between the buttsure and cartridge and anvil surfaces and would thus make it more likely for the surgical buttsures “B1, B2” during tissue manipulation.

Further, with continued reference to FIGS. 51 and 52, a profile of the surgical buttsures “B1, B2” may be made wider so that its edges (lateral or otherwise) extend partially around the circumference and beyond a lateral side edge of the respective cartridge assembly 18 and/or anvil assembly 20, or staple reload. This could be done in combination with heat and pressure to ensure conformance of the material of the surgical buttsures “B1, B2” to the tissue facing surface of the respective cartridge assembly 18 and/or anvil assembly 20 so that shifting (i.e., lateral shifting) is hindered. Additionally, if any shifting were to occur the extra width of the profiles of the surgical buttsures “B1, B2” would help ensure that the entire staple line is reinforced with buttsure.

In addition to the foregoing, the surgical buttsures “B’ may be fabricated from any biodegradable and/or non-biodegradable material, including polymers, that can be used in surgical procedures. The term “biodegradable” as used herein is defined to include both bioabsorbable and bioresorbable materials. By biodegradable, it is meant that the material
decomposes, or loses structural integrity under body conditions (e.g., enzymatic degradation or hydrolysis) or is broken down (physically or chemically) under physiologic conditions in the body, such that the degradation products are excretable or absorbable by the body. Absorbable materials are absorbed by biological tissues and disappear in vivo at the end of a given period, which can vary, for example, from hours to several months, depending on the chemical nature of the material. It should be understood that such materials include natural, synthetic, bioabsorbable, and/or certain non-absorbable materials, as well as combinations thereof.

[0204] Representative natural biodegradable polymers which may be used to form the medical devices include: polysaccharides such as alginate, dextran, chitin, chitosan, hyaluronic acid, cellulose, collagen, gelatin, fucans, glycosaminoglycans, and chemical derivatives thereof (substitutions and/or additions of chemical groups including, for example, alkyl, alkyne, amine, sulfate, hydroxylations, carboxylations, oxidations, and other modifications routinely made by those skilled in the art); catgut; silk; linen; cotton; and proteins such as albumin, casein, zein, silk, soybean protein; and combinations such as copolymers and blends thereof, alone or in combination with synthetic polymers.

[0205] Synthetically modified natural polymers which may be used to form the medical devices include cellulose derivatives such as alkylcelluloses, hydroxyalkylcelluloses, cellulose ethers, cellulose esters, nitrocelluloses, and chitosan. Examples of suitable cellulose derivatives include methyl cellulose, ethyl cellulose, hydroxypropyl cellulose, hydroxypropyl methyl cellulose, hydroxybutyl methyl cellulose, cellulose acetate, cellulose propionate, cellulose acetate butyrate, cellulose acetate phthalate, carboxymethyl cellulose, cellulose triacetate, cellulose sulfate sodium salt, and combinations thereof.

[0206] Representative synthetic biodegradable polymers which may be utilized to form medical devices include polyhydroxy acids prepared from lactone monomers (such as glycolide, lactide, caprolactone, ε-caprolactone, valerolactone, and δ-valerolactone), carbonates (e.g., trimethylene carbonate, tetramethylene carbonate, and the like), dioxanones (e.g., 1,4-dioxanone and p-dioxanone), 1,2-dioxanones (e.g., 1,2-dioxepan-2-one and 1,5-dioxepan-2-one), and combinations thereof. Polymers formed from these include: poly(lactides); poly(glycolides); poly(ε-caprolactones); poly(trimethylene carbonate); poly(hydroxybutyric acid); poly(hydroxyvaleric acid); poly(lactide-co-(ε-caprolactone)); poly(glycolide-co-(ε-caprolactone)); polycarbonates; poly(pseudo amino acids); poly(amine acids); poly(hydroxalkanoates); such as polyhydroxybutyrate, polyhydroxyvalerate, poly(3-hydroxybutyrate-co-3-hydroxyvalerate), polyhydroxyoctanoate, and polyhydroxyhexanoate; polyalkylene oxalates; polyalkoxyesters; polyalkyhydrides; polystyrene anhydrides; polyorthoesters; and copolymers, block copolymers, homopolymers, blends, and combinations thereof.

[0207] Synthetic degradable polymers also include hydrophilic vinyl polymers including phosphorylcholines such as 2-methacryloyloxyethyl phosphorylcholine, hydroxamates, vinyl furanones and their copolymers, and quaternary amines; as well as various alkylene oxide copolymers in combination with other polymers such as lactones, orthoesters, and hydroxybutyrates, for example:

[0208] Rapidly bioerodible polymers, such as poly(lactide-co-glycolide), polynylhydrides, and polyorthoesters, which have carboxylic groups exposed on the external surface as the surface of the polymer erodes, may also be used.

[0209] Other biodegradable polymers include polyphosphazenes; polypropylene fumarates; polyimides; polymer drugs such as polyamines; perfluorooalkoxy polymers; fluorinated ethylene/proplylene copolymers; PEG-lactone copolymers; PEG-polynfortioester copolymers; blends and combinations thereof.

[0210] Some non-limiting examples of suitable nondegradable materials from which the medical devices may be made include metals, ceramics, and polymeric materials. Suitable nondegradable polymeric materials include, for example, polyolefins such as polyethylene (including ultra high molecular weight polyethylene) and polypropylene including isotactic, syndiotactic, and blends thereof; polyethylene glycols; polyethylene oxides; polyisobutylene and ethylalpha olefin copolymers; fluorinated polyolefins such as fluoroethylene, fluoropropylene, fluoropEGSs, and polytetrafluoroethylene; polyamides such as nylon, Nylon 6, Nylon 6,6, Nylon 6,10, Nylon 11, Nylon 12, and polycaprolactam; polyimines; polyesters such as polyethylene terephthalate, polyethylene naphthalate, polytrimethylene terephthalate, and polybutylene terephthalate; polyethers; polyesters; polyetheresters; poly(trimethylene terephthalate) 1,4-butandiol; polyurethanes; acrylic polymers; methacrylates; vinyl halide polymers such as polyvinyl chloride; polyvinyl alcohol; polyvinyl ethers such as polyvinyl methyl ether; polyvinylidene halides such as polyvinylidene fluoride and polyvinylidene chloride; polychlorotrifluoroethylene; polyacrylonitrile; polyaryletherketones; polyvinyl ketones; polyvinyl aromatics such as polystyrene; polyvinyl esters such as polyvinyl acetate; ethylene-methyl methacrylate copolymers; acrylonitrile-styrene copolymers; ABS resins; ethylene-vinyl acetate copolymers; alkyd resins; polycarbonates; polyoxymethylene; polystyrene; epoxy resins; aramids; rayon; rayon-triacetate; spandex; silicones; and copolymers and combinations thereof.

[0211] It will be understood that various modifications may be made to the embodiments disclosed herein. For example, the stapling apparatus need not apply staples but rather may apply two part fasteners as is known in the art. Further, the length of the linear row of staples or fasteners may be modified to meet the requirements of a particular surgical procedure. Thus, the length of a single stroke of the actuation shaft and/or the length of the linear row of staples and/or fasteners within a disposable loading unit may be varied accordingly. Therefore, the above description should not be construed as limiting, but merely as exemplifications of preferred embodiments. Those skilled in the art will envision other modifications within the scope and spirit of the claims appended thereto.

What is claimed is:

1. A surgical stapling apparatus, comprising:
   a housing;
   a handle supported by the housing;
   an elongated body extending distally from the housing;
   a tool assembly at the distal end of the elongated body, the tool assembly including:
   a cartridge assembly including a staple cartridge having a tissue facing surface, a plurality of staple retaining pockets and a knife slot formed in the tissue facing surface thereof;
   a plurality of surgical fasteners loaded one each in the staple retaining pockets; and
an anvil assembly in juxtaposed relation to the cartridge assembly, the anvil assembly including an anvil plate having a tissue facing surface defining a plurality of staple forming pockets and a knife slot therein, at least one of the cartridge assembly or the anvil assembly being movable in relation to the other of the cartridge assembly and the anvil assembly; and

a surgical buttress attached to the tissue facing surface of at least one of the cartridge assembly or the anvil assembly, the surgical buttress conforming to the tissue facing surface such that the surgical buttress is deformed locally into the staple retaining pockets and the knife slot of the cartridge assembly or the staple forming pockets and the knife slot of the anvil assembly to which the surgical buttress is attached, thereby increasing the contact area between the surgical buttress and the tissue facing surface.

2. The surgical stapling apparatus according to claim 1, wherein the surgical buttress has a width that is wider than a width of the respective cartridge assembly or anvil assembly to which the surgical buttress is attached.

3. The surgical stapling apparatus according to claim 2, wherein lateral edges of the surgical buttress extend partially around a circumference and beyond a lateral side edge of the respective cartridge assembly or anvil assembly to which the surgical buttress is attached.

4. The surgical stapling apparatus according to claim 1, wherein the surgical buttress is nonwoven.

5. The surgical stapling apparatus according to claim 1, wherein the surgical buttress is absorbable.

6. The surgical stapling apparatus according to claim 1, wherein the surgical buttress is a non-woven, absorbable felt.

7. The surgical stapling apparatus according to claim 1, wherein the surgical buttress is secured to at least one of the cartridge assembly or the anvil assembly by at least one anchor.

8. The surgical stapling apparatus according to claim 1, wherein the anchor is selected from the group consisting of sutures, threads, tethers, straps, bands, lines, wires, cables, fasteners, and tacks.

9. The surgical stapling apparatus according to claim 1, further comprising:

a release assembly associated with the at least one of the cartridge assembly or the anvil assembly to which the surgical buttress is attached; and

a drive assembly slidable translatably through the tool assembly from a proximal position to a distal position, wherein the drive assembly actuates the release assembly to thereby release the anchor and to free the surgical buttress from the at least one of the cartridge assembly or the anvil assembly.

10. A loading unit for use with a surgical stapling apparatus, the loading unit comprising:

a tool assembly including:

a cartridge assembly including a staple cartridge having a tissue facing surface, a plurality of staple retaining pockets and a knife slot formed in the tissue facing surface thereof;

a plurality of surgical fasteners loaded one each in the staple retaining pockets; and

a surgical buttress attached to the tissue facing surface of at least one of the cartridge assembly or the anvil assembly, the surgical buttress conforming to the tissue facing surface such that the surgical buttress is deformed locally into the staple retaining pockets and the knife slot of the cartridge assembly or the staple forming pockets and the knife slot of the anvil assembly to which the surgical buttress is attached, thereby increasing the contact area between the surgical buttress and the tissue facing surface.

11. The loading unit according to claim 10, wherein the surgical buttress has a width that is wider than a width of the respective cartridge assembly or anvil assembly to which the surgical buttress is attached.

12. The loading unit according to claim 11, wherein lateral edges of the surgical buttress extend partially around a circumference and beyond a lateral side edge of the respective cartridge assembly or anvil assembly to which the surgical buttress is attached.

13. The loading unit according to claim 10, wherein the surgical buttress is nonwoven.

14. The loading unit according to claim 13, wherein the surgical buttress is absorbable.

15. The loading unit according to claim 10, wherein the surgical buttress is a non-woven, absorbable felt.

16. The loading unit according to claim 10, wherein the surgical buttress is secured to at least one of the cartridge assembly or the anvil assembly by at least one anchor.

17. The loading unit according to claim 16, wherein the anchor is selected from the group consisting of sutures, threads, tethers, straps, bands, lines, wires, cables, fasteners, and tacks.

18. The loading unit according to claim 16, wherein at least one of the staple cartridge or the anvil plate includes a pair of recesses that frictionally engage the anchor.

19. A method of securing a surgical buttress to at least one of a cartridge assembly or an anvil assembly, the method comprising:

applying a surgical buttress to a tissue facing surface of at least one of a cartridge assembly or an anvil assembly; applying at least one of heat or pressure on the respective cartridge assembly or anvil assembly so that the surgical buttress conforms to the shape of the tissue facing surface by deforming the surgical buttress into staple retaining pockets and a knife slot of the cartridge assembly or staple forming pockets and a knife slot of the anvil assembly to which the surgical buttress is applied, thereby increasing the contact area between the surgical buttress and the tissue facing surface.

20. The method according to claim 19, wherein the step of applying at least one of heat or pressure further includes the step of applying pressure with a patterned press.