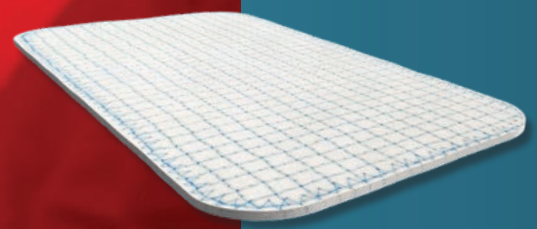
THE NEXT GENERATION IN SOFT TISSUE REPAIR

OVITEX®

REINFORCED TISSUE MATRIX



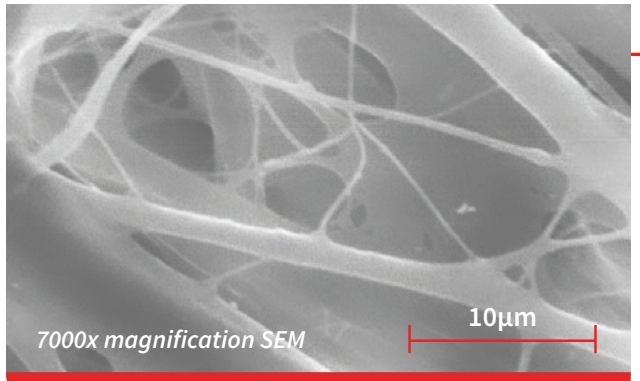
THE REMODELING DIFFERENCE


TELABIO®
SCIENCE. VALUE. INNOVATION.

TABLE OF CONTENTS

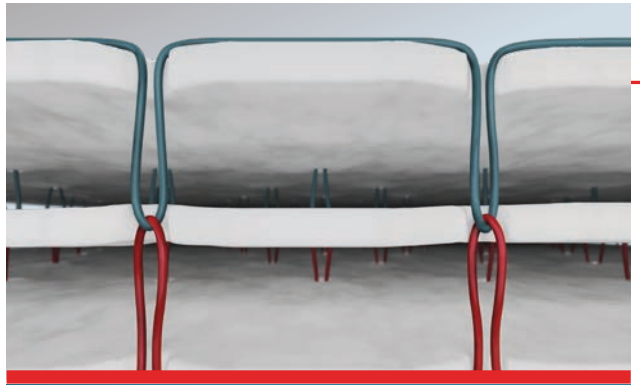
OVITEX®

REINFORCED TISSUE MATRIX



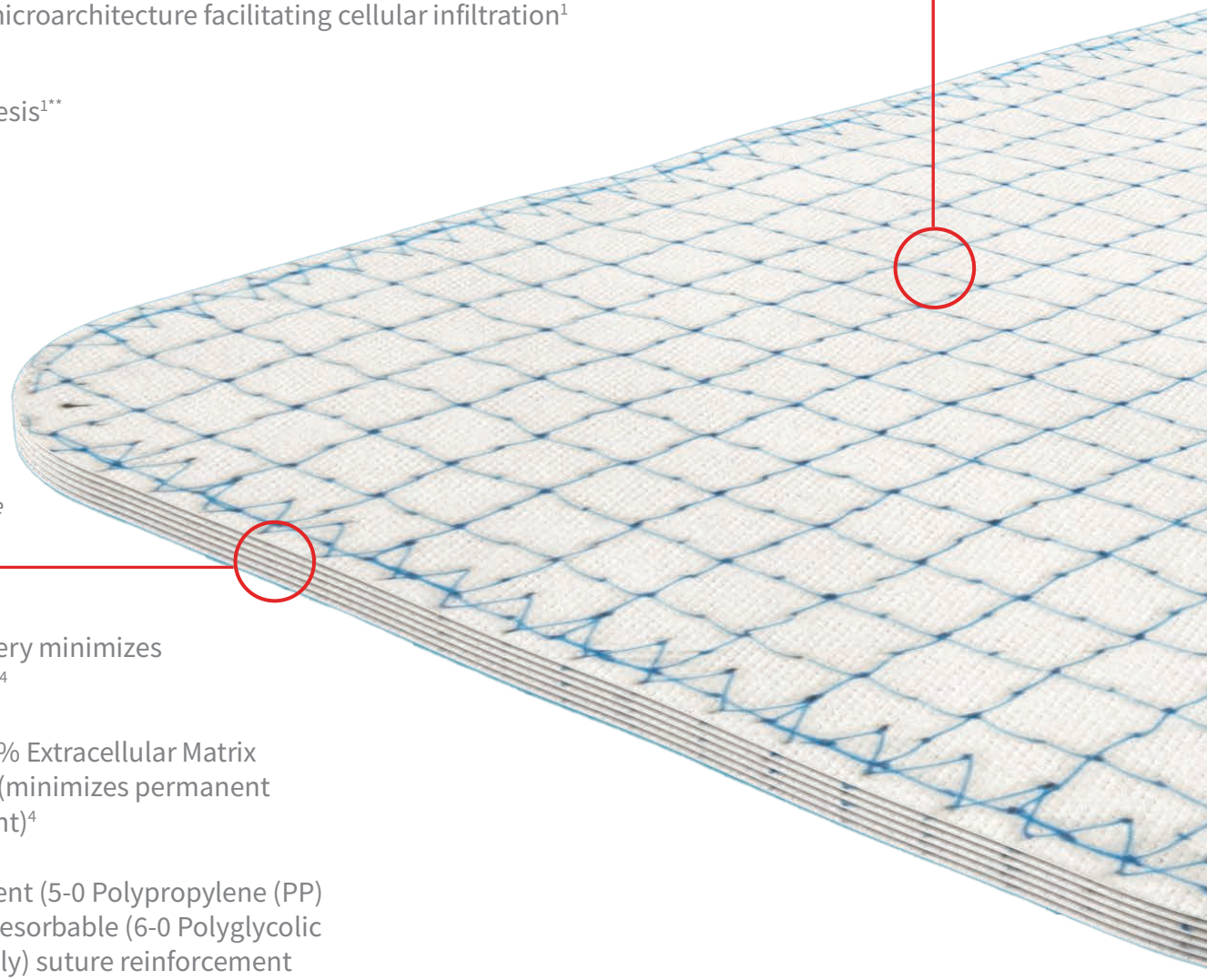
~95 BIOLOGIC BUILDING BLOCK

- Retains open-pore microarchitecture facilitating cellular infiltration[1]
- Facilitates angiogenesis[1**]
- Low elastin content[2]

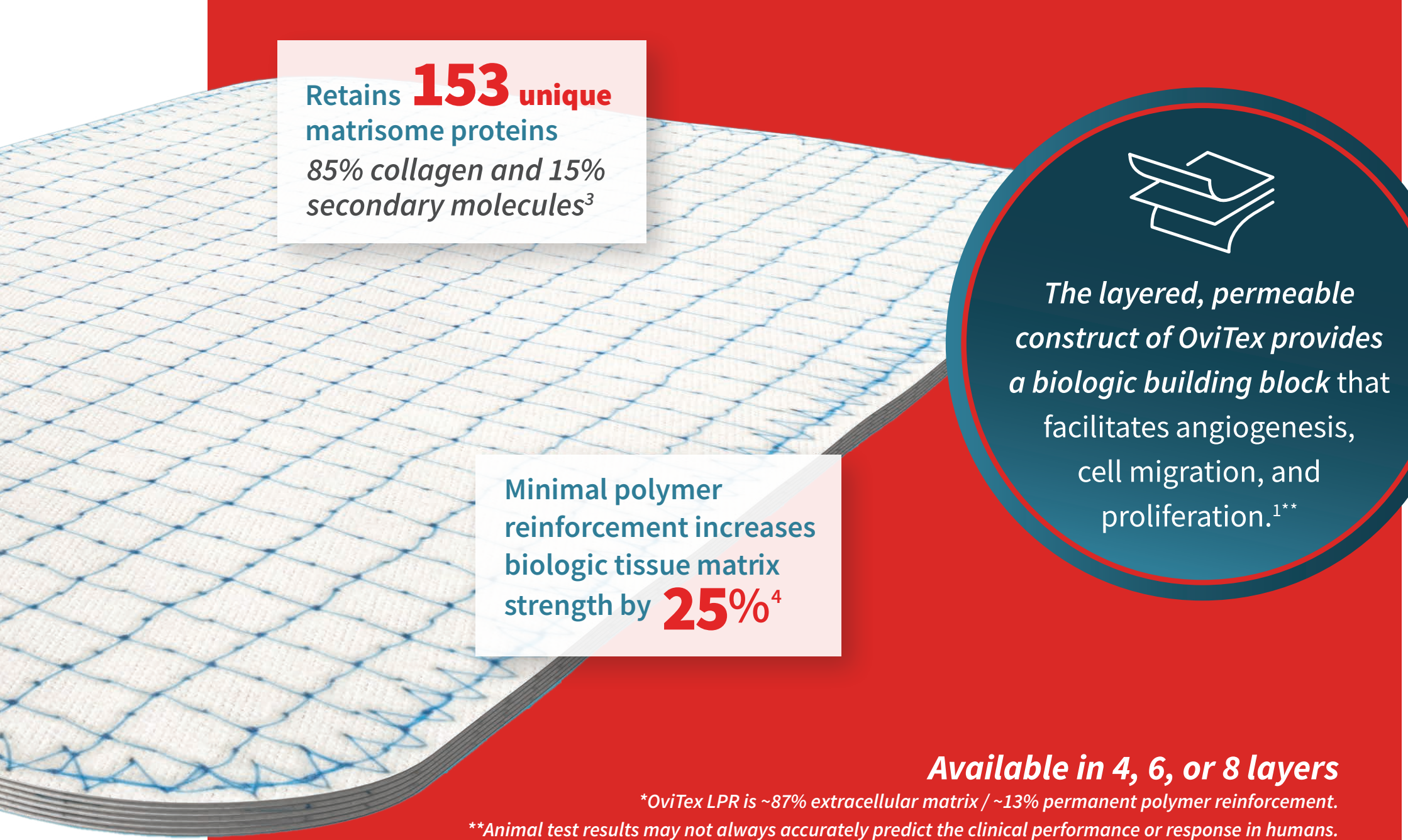


~5% SUTURE REINFORCEMENT

Red polymer shown for illustrative purposes only.



- Lock-stitch embroidery minimizes unraveling when cut[4]
- Device construct: 95% Extracellular Matrix (ECM) / 5% Polymer (minimizes permanent foreign body footprint)[4]
- Available in permanent (5-0 Polypropylene (PP) – blue and clear) or resorbable (6-0 Polyglycolic Acid (PGA) – clear only) suture reinforcement



Retains 153 unique matrisome proteins

85% collagen and 15% secondary molecules[3]

Minimal polymer reinforcement increases biologic tissue matrix strength by 25%[4]

The layered, permeable construct of OviTex provides a biologic building block that facilitates angiogenesis, cell migration, and proliferation.[1**]

Available in 4, 6, or 8 layers

**OviTex LPR is ~87% extracellular matrix / ~13% permanent polymer reinforcement.*

***Animal test results may not always accurately predict the clinical performance or response in humans.*

SOURCE MATERIAL

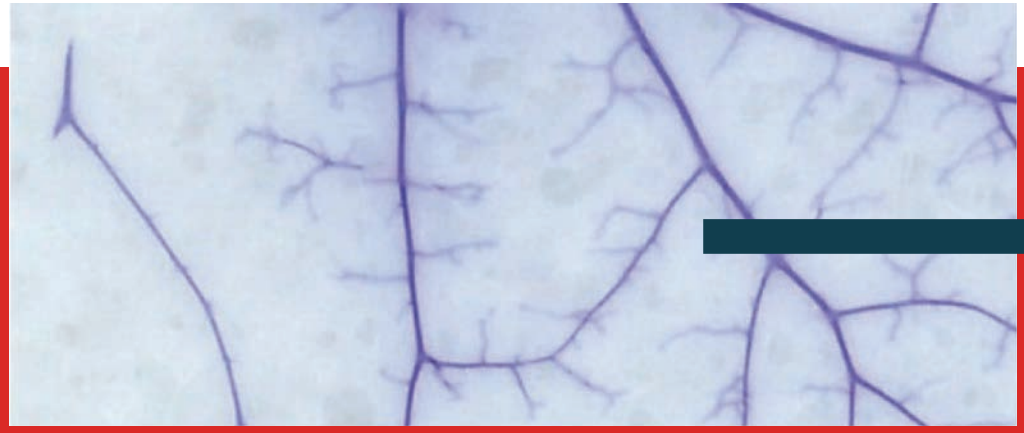
OviTex Reinforced Tissue Matrix

Unique Source Material

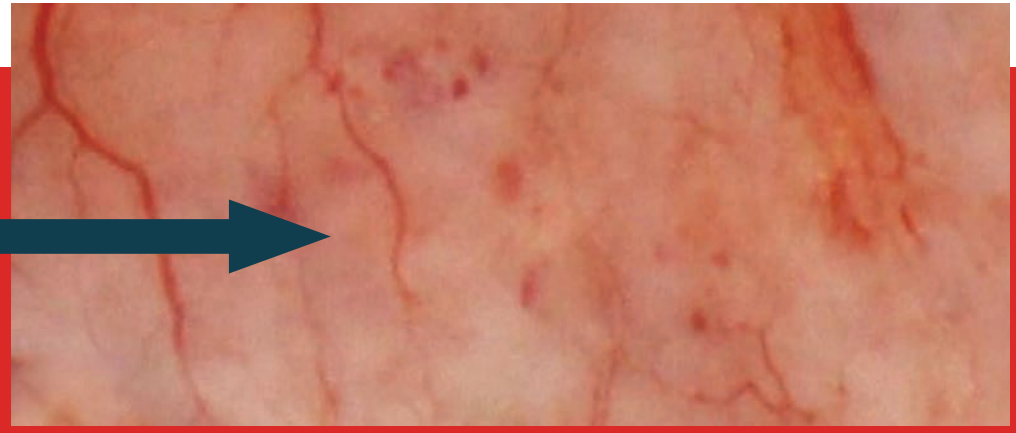
- Abundant source – Sheep are raised in New Zealand to supply high quality meat products globally
- Forestomach is highly vascular – evolved for nutrient absorption[1]
- High rate of tissue turnover (remodeling) –rich biology[1]

OviTex Facilitates Rapid Blood Vessel Formation[5]

In-Vivo Evidence – Non-Human Primate Model*



DYE SHOWS RESIDUAL VASCULAR CHANNELS ARE RETAINED IN ECM



NEWLY FORMED TISSUE DEMONSTRATING THE ESTABLISHMENT OF VASCULATURE AT THE SITE OF OFM APPLICATION

- Cells utilize these channels as a template[5]
  – termed 'angioconduction'
- Builds new blood vessels[5]
- Leads to well-vascularized granulation tissue[5]

*Animal test results may not always accurately predict the clinical performance or response in humans.

OviTex Provides a Unique Fun

	Composition	Primary Mechanism of Action
OviTex Reinforced Tissue Matrices	**Non-Dermal ECM – reinforced with minimal suture[6,7]**	**Tissue repair and reinforcement[6,7,8]**
Biologic Mesh (porcine, bovine or human)	Dermal ECM[12,13]	Tissue repair and reinforcement
Permanent Synthetic Mesh	Synthetic Polymers - PP, PE, ePTFE, etc.[14,15]	Reinforcement (permanent)[14,15]
Resorbable Synthetic Mesh	Resorbable Synthetic Polymers - PGA, P4HB, TMC, etc.[14,15]	Reinforcement (transient)[16,17]

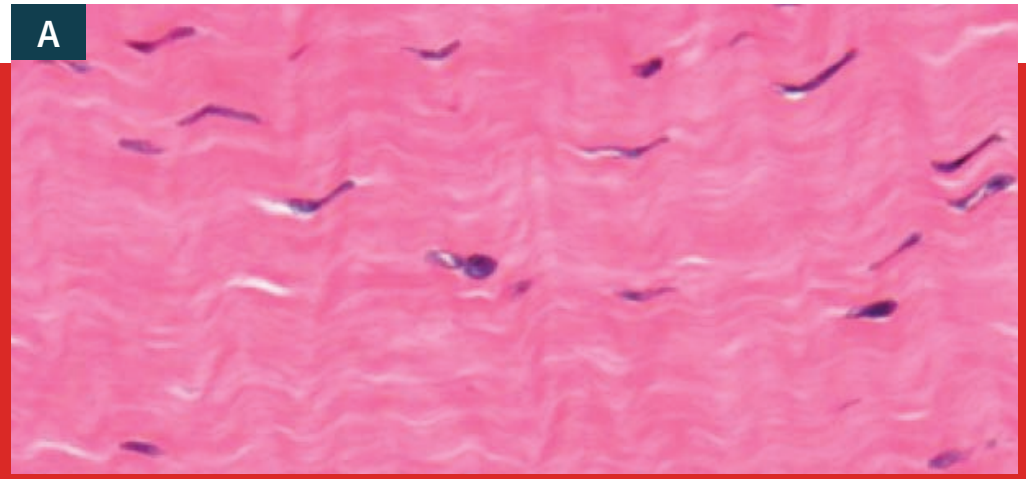
ctional ECM for Hernia Repair

Reason for Secondary Protein Known to Aid Tissue Repair?	Components Known to Modulate Tissue Inflammation?	Shown To Recruit Stem Cells?	Support Cell Infiltration and Proliferation*
Yes[3*]	**Yes[9*]**	**Yes[10*]**	**Yes (~4 weeks)[11]**
Yes[13]	No[13]	No[13]	Yes (~12 weeks)[11]
No[14,15]	No[14,15]	No[14,15]	No[11]
No[16]	No[16]	No[16]	No[11]

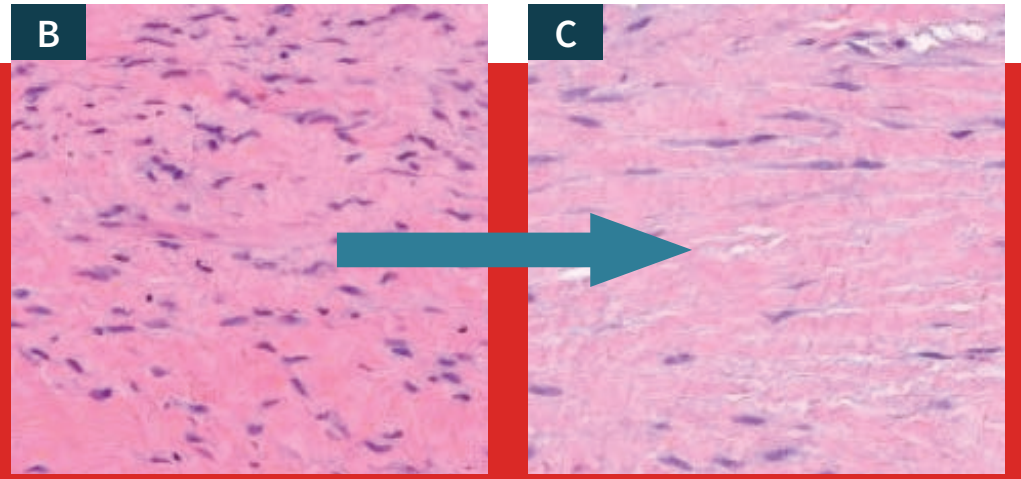
*Preclinical test results may not necessarily be indicative of human clinical performance

THE REMODELING DIFFERENCE

In-Vivo Evidence – Non-Human Primate Model*



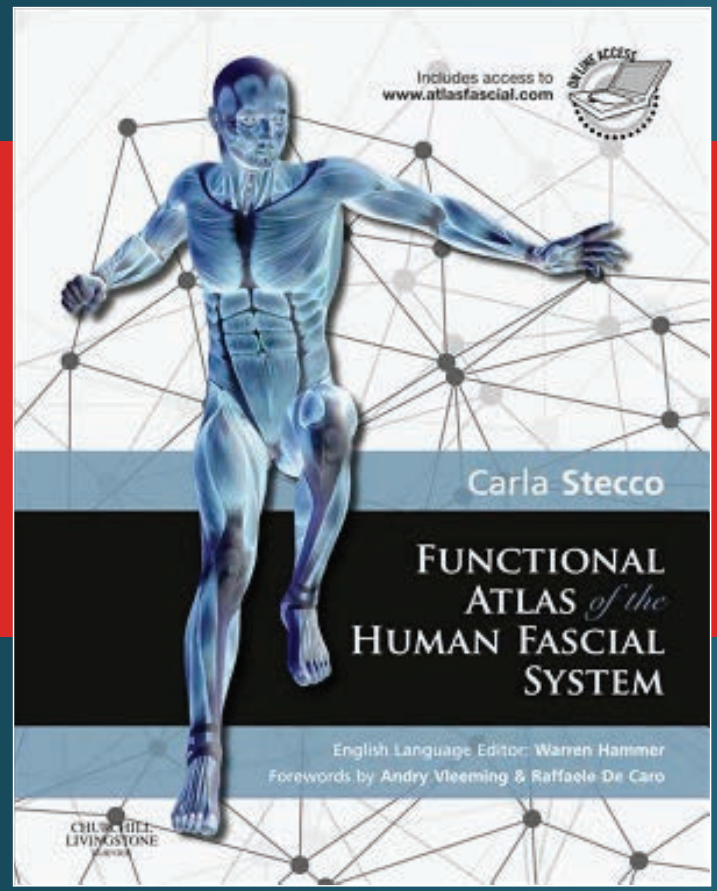
HUMAN FASCIAL SYSTEM
FUNCTIONAL ORGANIZED TISSUE



OVITEX
12 WEEKS 24 WEEKS

- Functional organized collagen has a wave like appearance (A)[18]
- OviTex promoted the formation of organized layered functional host collagen at early timepoints (B)[11*]
- Functional collagen replaced the OFM with thickness equivalent to native tissue (C)[11*]

*Animal test results may not always accurately predict the clinical performance or response in humans.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ONLINE ACCESS
Carla Stecco
FUNCTIONAL ATLAS of the HUMAN FASCIAL SYSTEM
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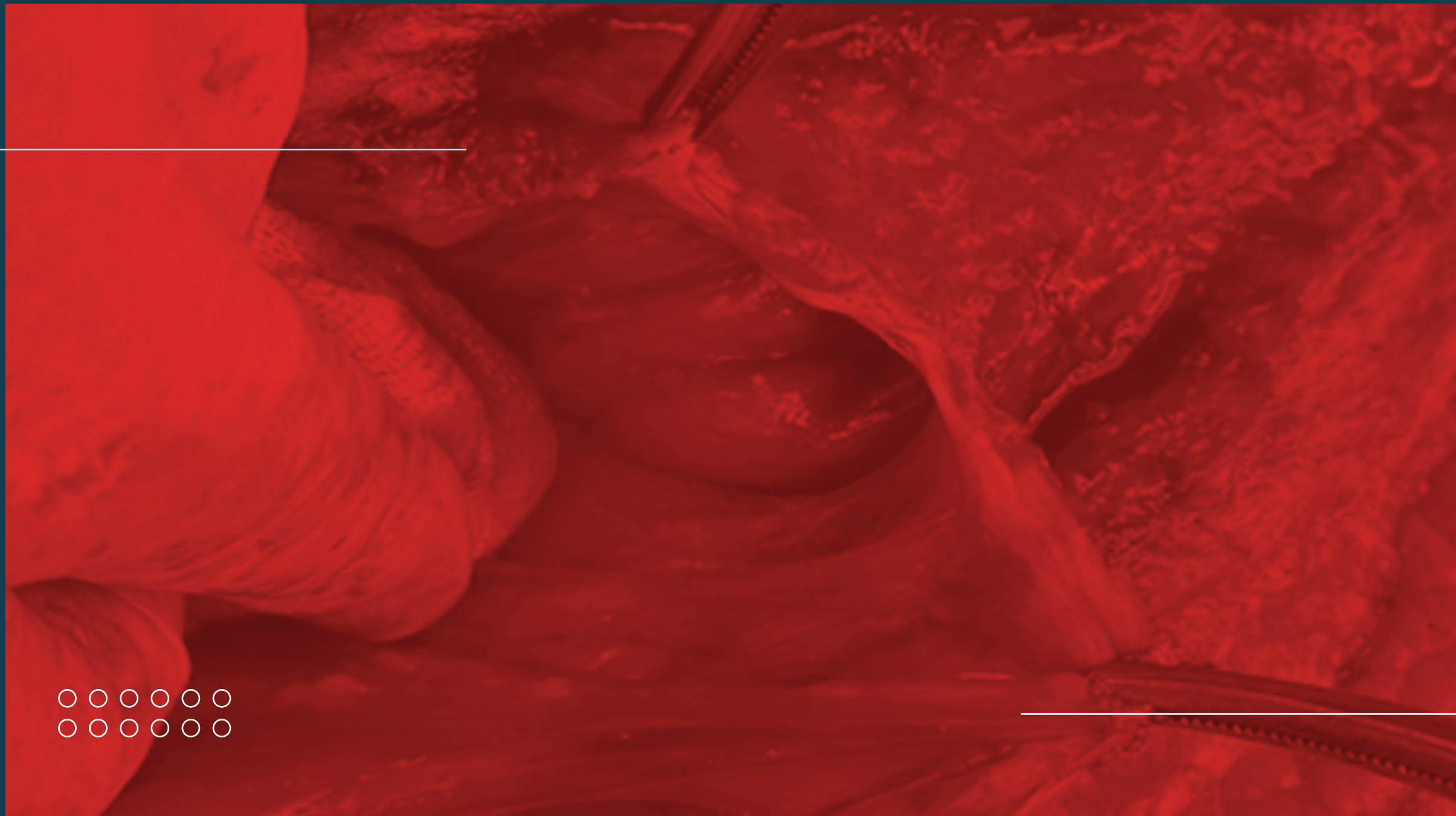
Forewords by Andry Vleeming & Raffaele De Caro
CHURCHILL LIVINGSTONE



COMPLEX ABDOMINAL WALL REPAIR

OviTex 2S Permanent

Lookback on Complex Abdominal Wall Repair at 9 months

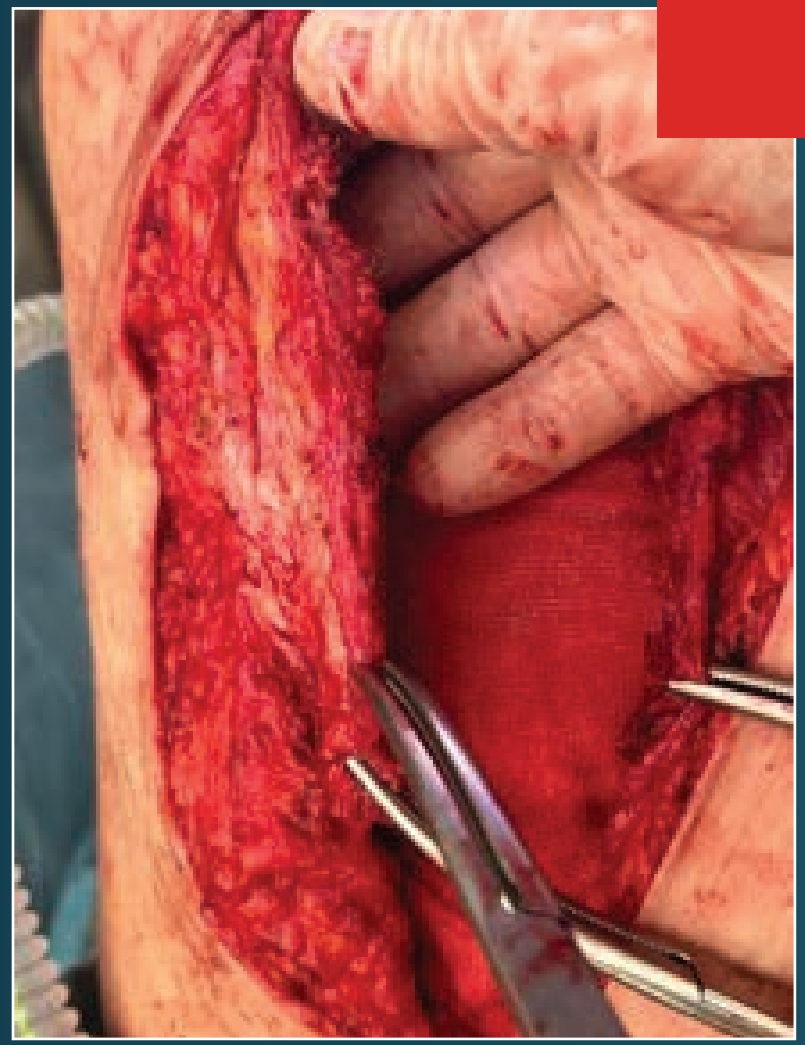
Marja Boermeester, Professor of Surgery
Amsterdam, Netherlands

Reason for second surgical intervention – Laparotomy

Reported Patient Demographics & Comorbidities*
– Male, 74 yo, multiple previous hernia repairs with removal of synthetic mesh stacked on top of each other (approx. 7 times).

> *What I'm seeing after only 9 months is a very thick, strong layer of new collagen-type material, like a new fascia, surrounding the suturing network, replacing the cells of the inserted Ovitex mesh. This is a very nice building block.*
>
> *-Marja Boermeester, Professor of Surgery***

> *"I'm seeing a very nice, thick collagen layer at the site of the Ovitex mesh implanted 12 months ago to reinforce the lower reinsertion of the ruptured lateral muscle complex. Our operation was to repair a midline hernia after open abdomen treatment."*
>
> *-Marja Boermeester, Professor of Surgery***



OviTex 2S Permanent
Lookback on Complex Abdominal Wall Repair at 12 months

Marja Boermeester, Professor of Surgery
Amsterdam, Netherlands

Reason for second surgical intervention – Laparotomy

Reported Patient Demographics & Comorbidities*

- Female, 25 yo, previous trauma injury with rupture of left lateral abdominal wall muscles; left repositioned with bone anchors and reinforced with synthetic mesh.

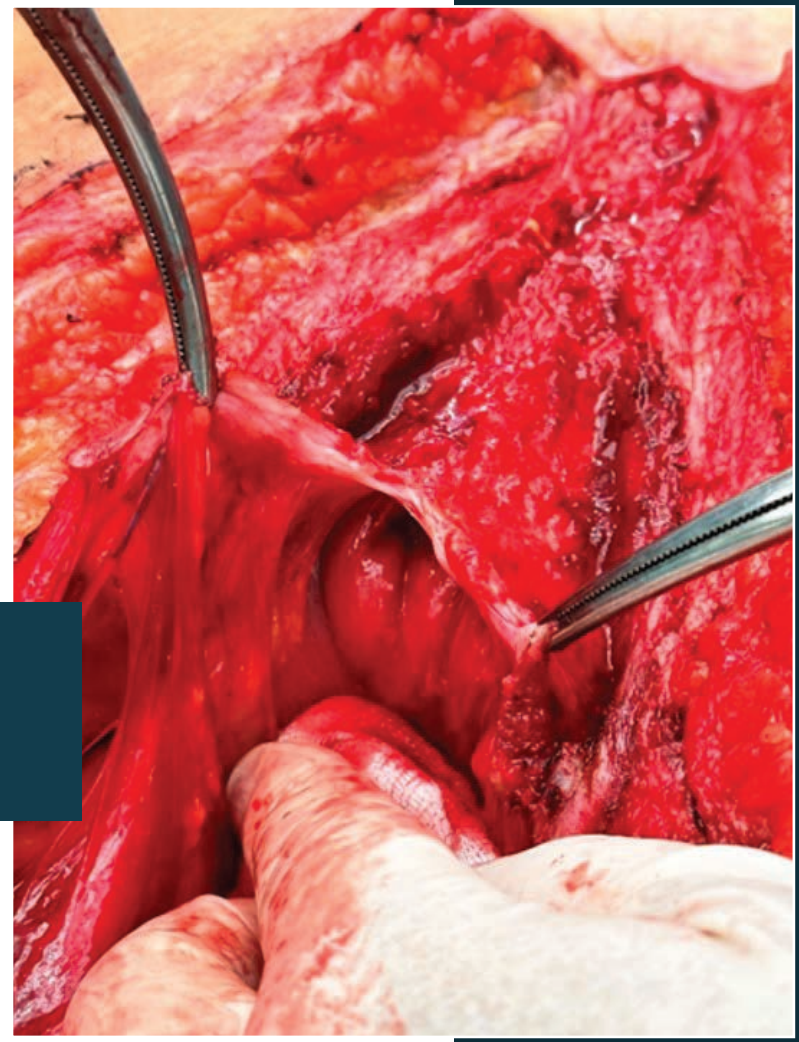
OviTex 1S Permanent

Lookback on Complex Abdominal Wall Repair at 9 months

Marja Boermeester, Professor of Surgery
Amsterdam, Netherlands

Reason for second surgical intervention – Laparotomy

Reported Patient Demographics & Comorbidities*
– Male, 64 yo, open abdomen treatment after perforated diverticulitis.



> *"What I'm seeing is a thick fascia at the site where OviTex 1S was implanted."*
>
> *-Marja Boermeester, Professor of Surgery***

INCISIONAL/VENTRAL HERNIA REPAIR

OviTex 1S Permanent

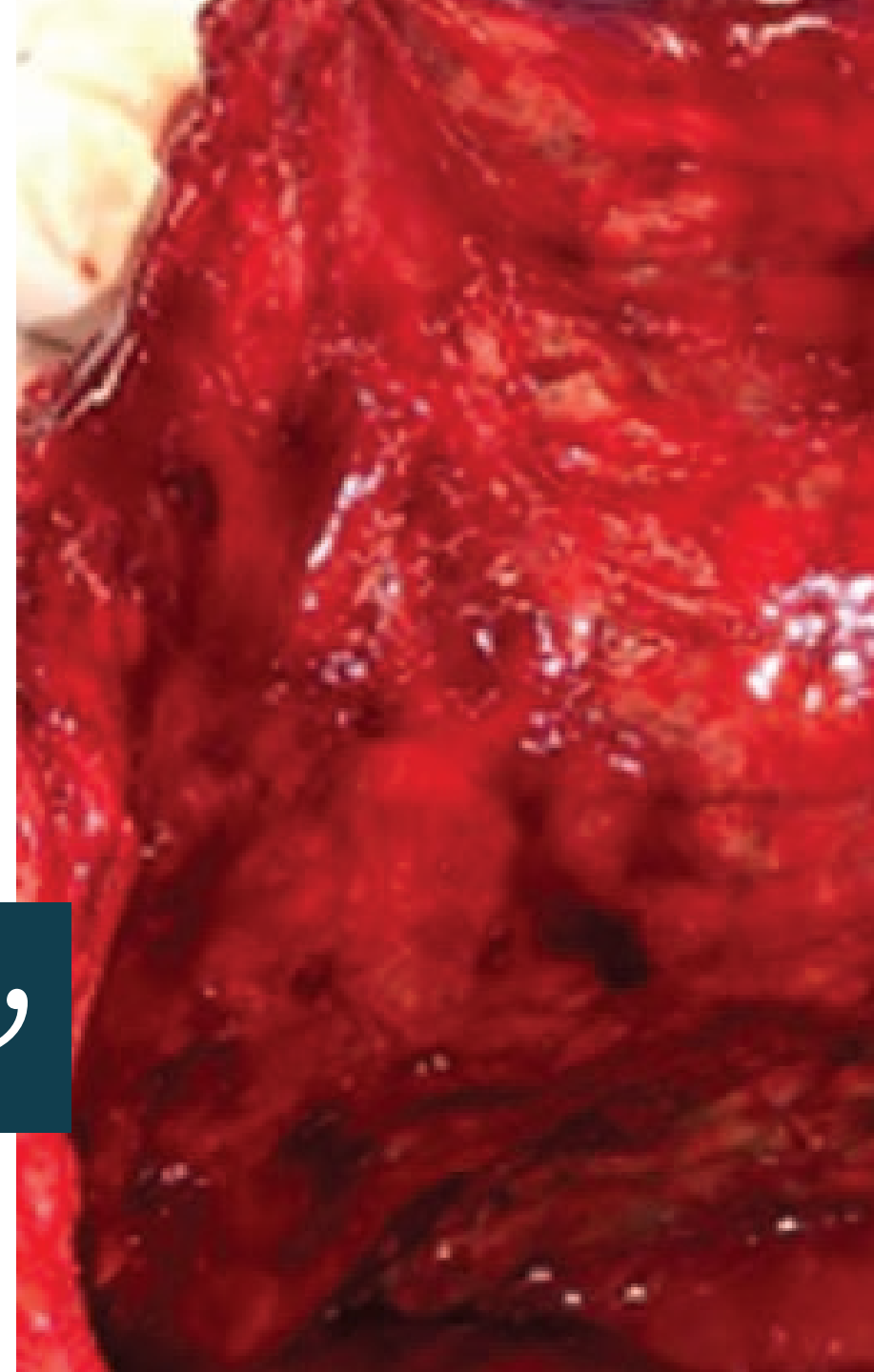
Lookback on Incisional Hernia Repair at 7 months

George DeNoto, III, MD, FACS
New York, United States

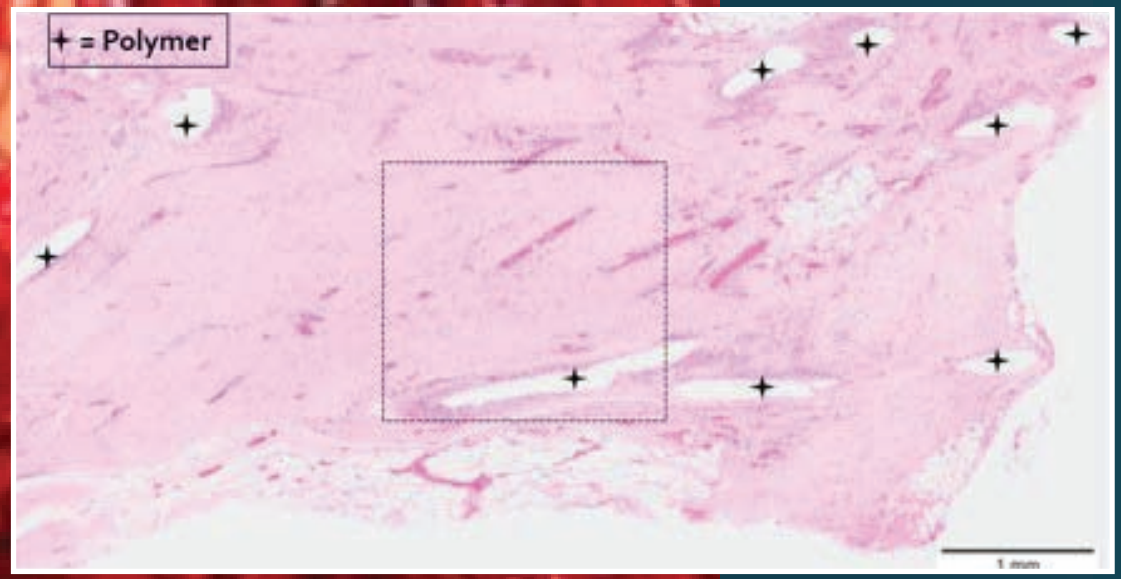
Reason for second surgical intervention – Sigmoidectomy for diverticulitis

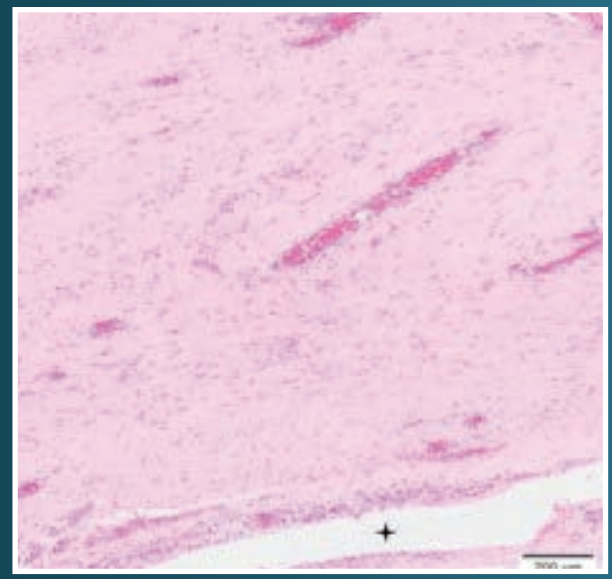
Reported Patient Demographics & Comorbidities*
– History of hysterectomy, four previous recurrent incisional hernia repairs, and removal of an infected intraperitoneal synthetic mesh.

> *"What I'm observing is impressive cell growth and new blood vessel formation, with minimal inflammation, and the polymer is surrounded by abundant cellular activity."*
>
> *-George DeNoto, III, MD, FACS***



HISTOLOGY





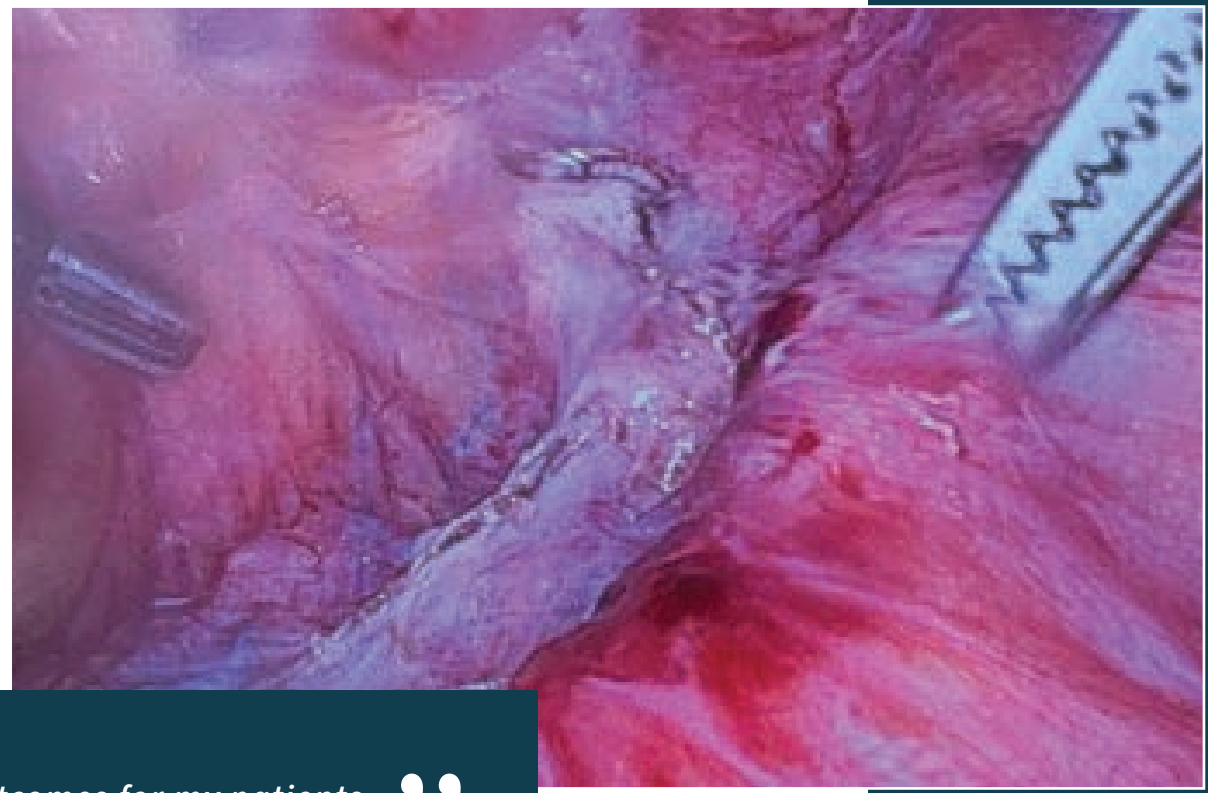
OviTex 1S Permanent

Lookback on Robotic Incisional Hernia Repair at 7 months

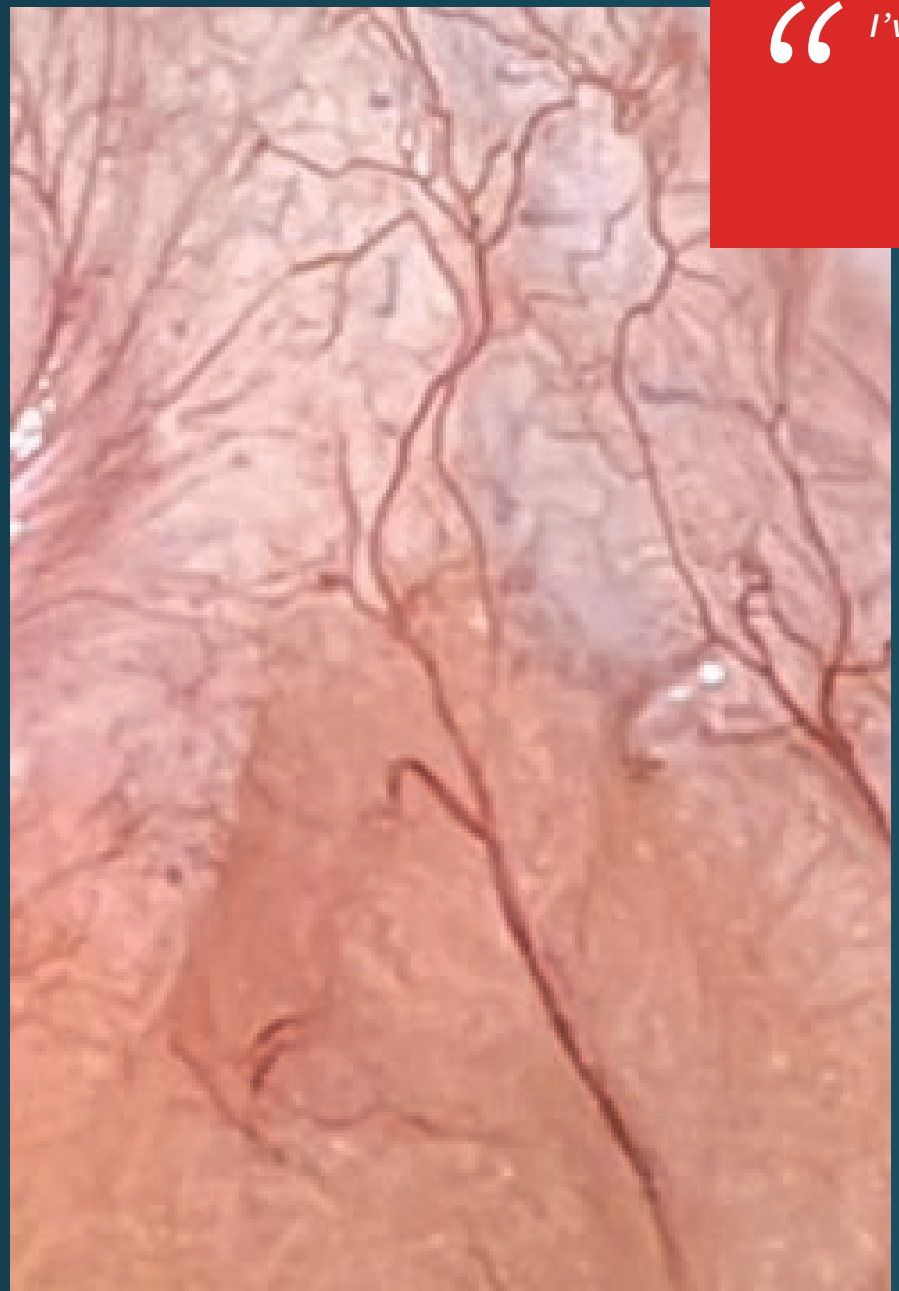
Michael Keller, MD, FACS, FASCRS
Texas, United States

Reason for second surgical intervention
– Unrelated incisional hernia

Reported Patient Demographics & Comorbidities*
– History of Crohn's disease, 2 previous hernia repairs, right colectomy, ostomy placement and reversal, and fistulotomy.



> *What I'm seeing is fully remodeled, functional tissue —critical for achieving positive long-term outcomes for my patients.*
>
> *-Michael Keller, MD, FACS, FASCRS***



> *I've observed how OviTex remodels into tissue that closely resembles native fascia—not just in structure, but in function. Its ability to integrate, vascularize, and provide durable, fascia-like support is truly remarkable.*
>
> *-Michael Keller, MD, FACS, FASCRS***

OviTex 1S Permanent
Lookback on Robotic Ventral Hernia Repair at 15 months

Michael Keller, MD, FACS, FASCRS
Texas, United States

Reason for second surgical intervention
– Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*
– History of crohn's disease and incisional hernia.

> *I observed that the OviTex was fully integrated and remodeled, resembling tissue in both appearance and texture.*
>
> *-Paul Szotek, MD, MBA, FACS***

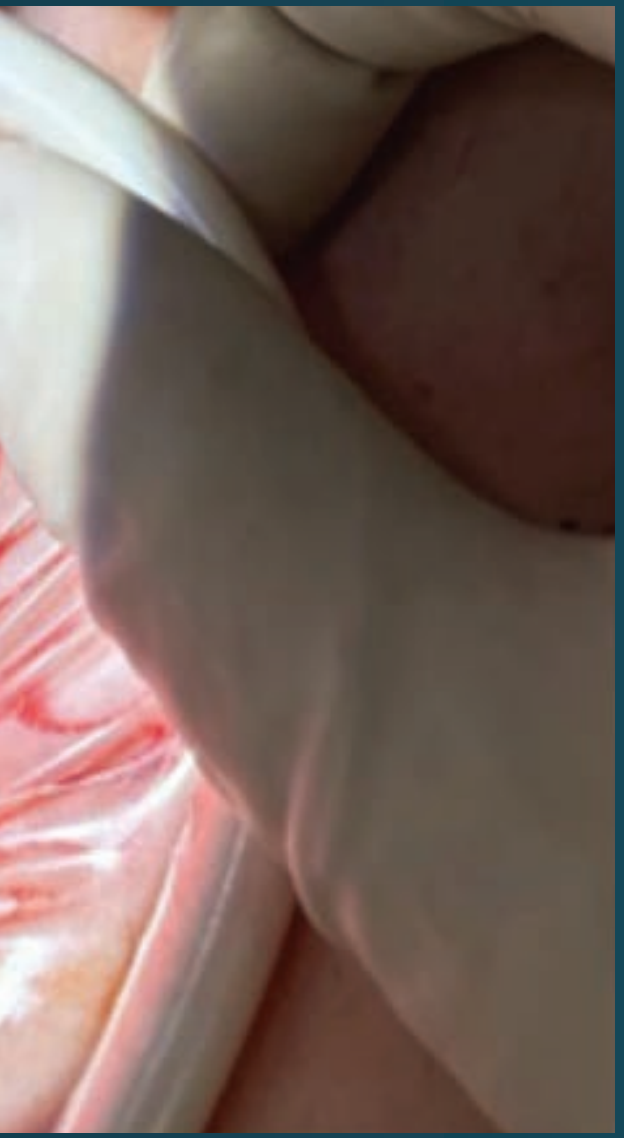
OviTex LPR Permanent

Lookback on Incisional Hernia Repair at 12 months

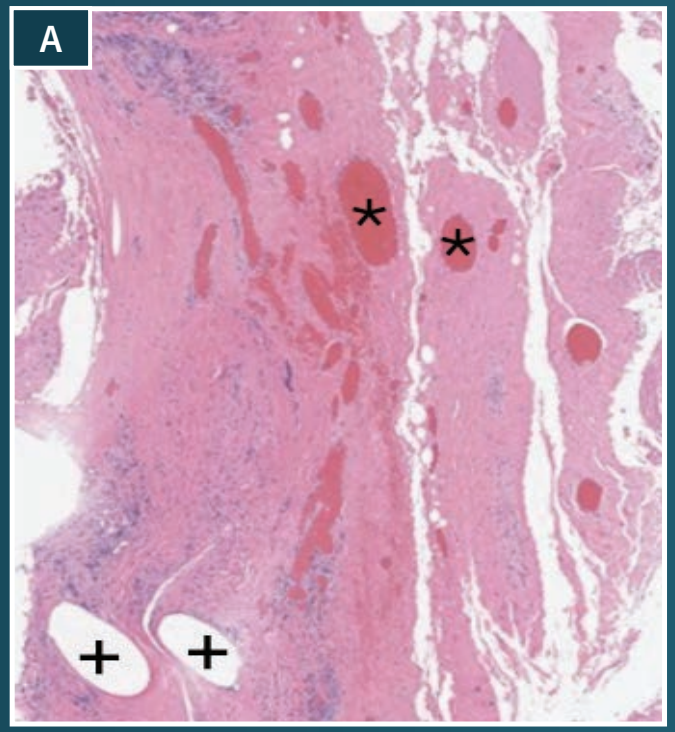
Paul Szotek, MD, MBA, FACS
Indiana, United States

Reason for second surgical intervention – Unrelated incisional hernia

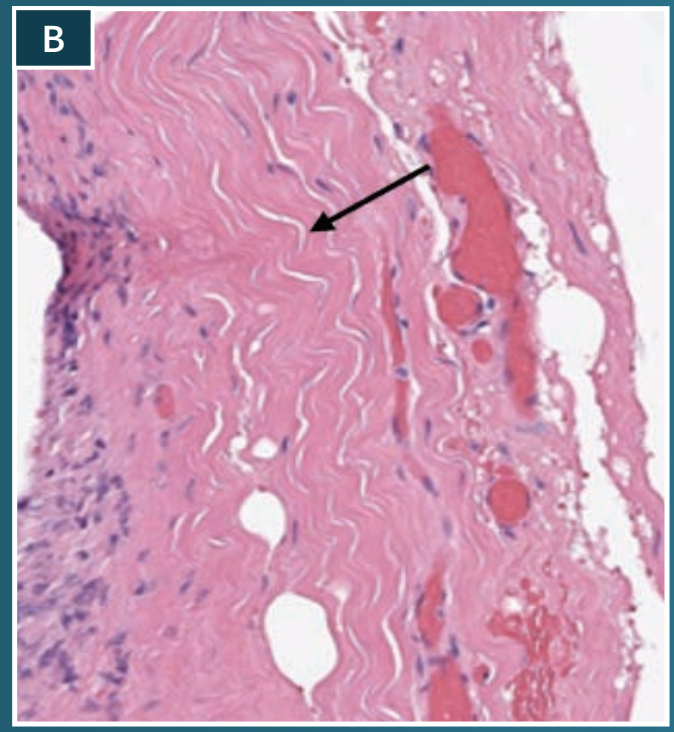
Reported Patient Demographics & Comorbidities*
– BMI of 39, history of midline hernia repair with strangulated small intestine, and hyperlipidemia.



HISTOLOGY



NEOVASCULARIZATION (*) AND POLYPROPYLENE SUTURE (+)



WAVY, UNDULATING, TENDINOUS FASCIA LIKE CONNECTIVE TISSUE (ARROW)

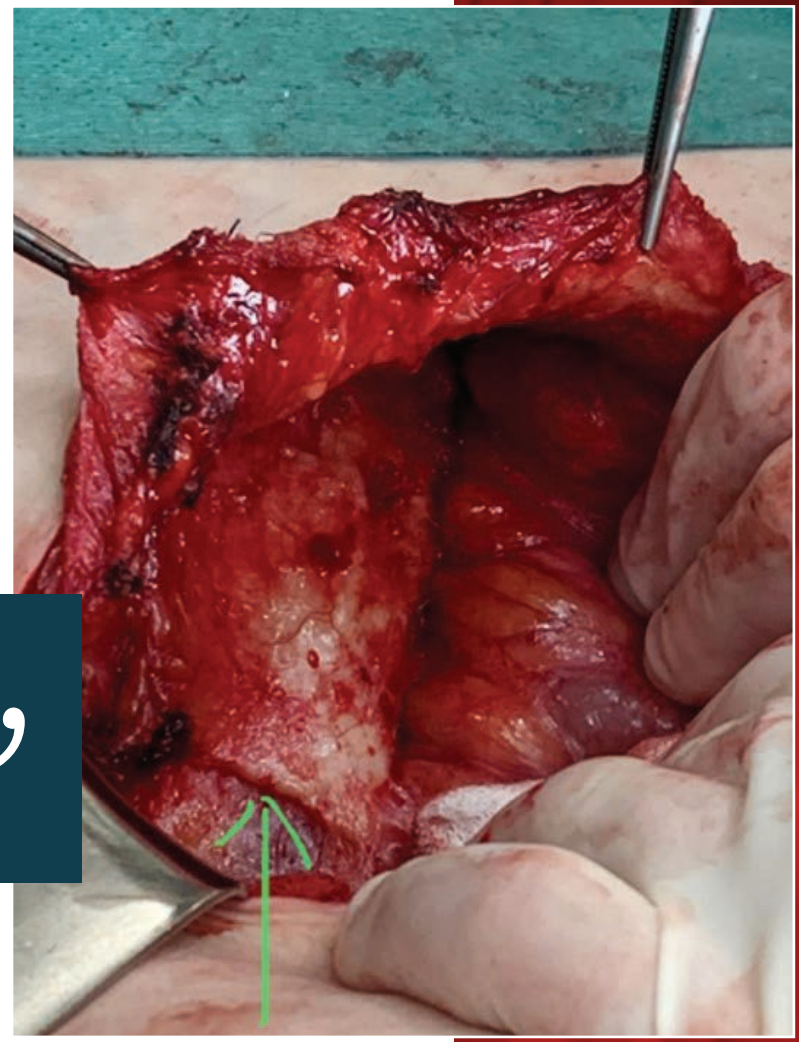
OviTex 1S Permanent

Lookback on Incisional Hernia Repair at 12 months

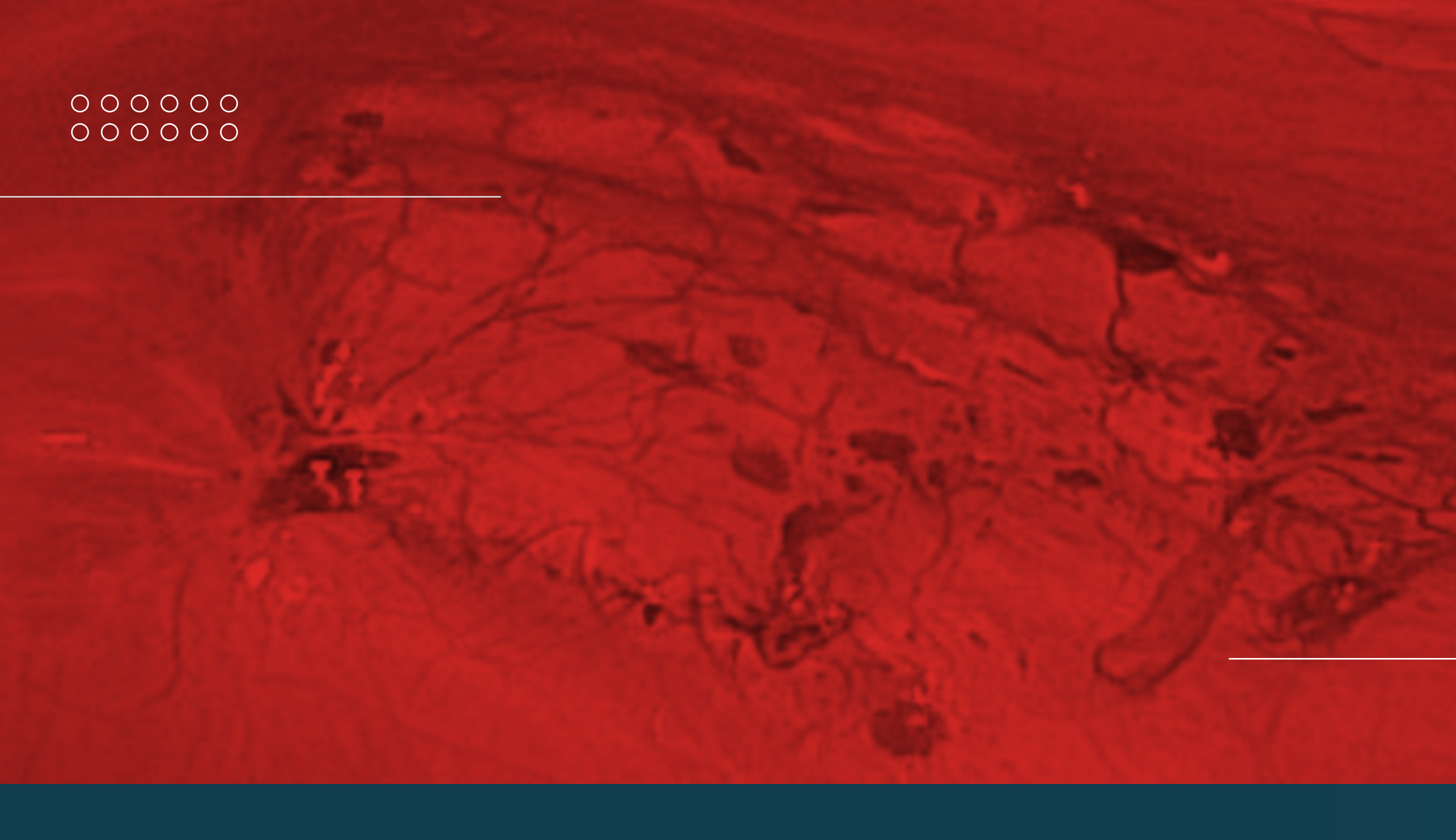
Marja Boermeester, Professor of Surgery
Amsterdam, Netherlands

Reason for second surgical intervention
– Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*
– Female, 45 yo.



> *What I'm seeing is a remarkably matured and thick layer of collagen on the inside of the iliac bone 12 months after placing OviTex 1S Permanent intra-abdominally curved lateral and posterior for a lower lateral abdominal wall repair.*
>
> *-Marja Boermeester, Professor of Surgery***



INGUINAL HERNIA REPAIR

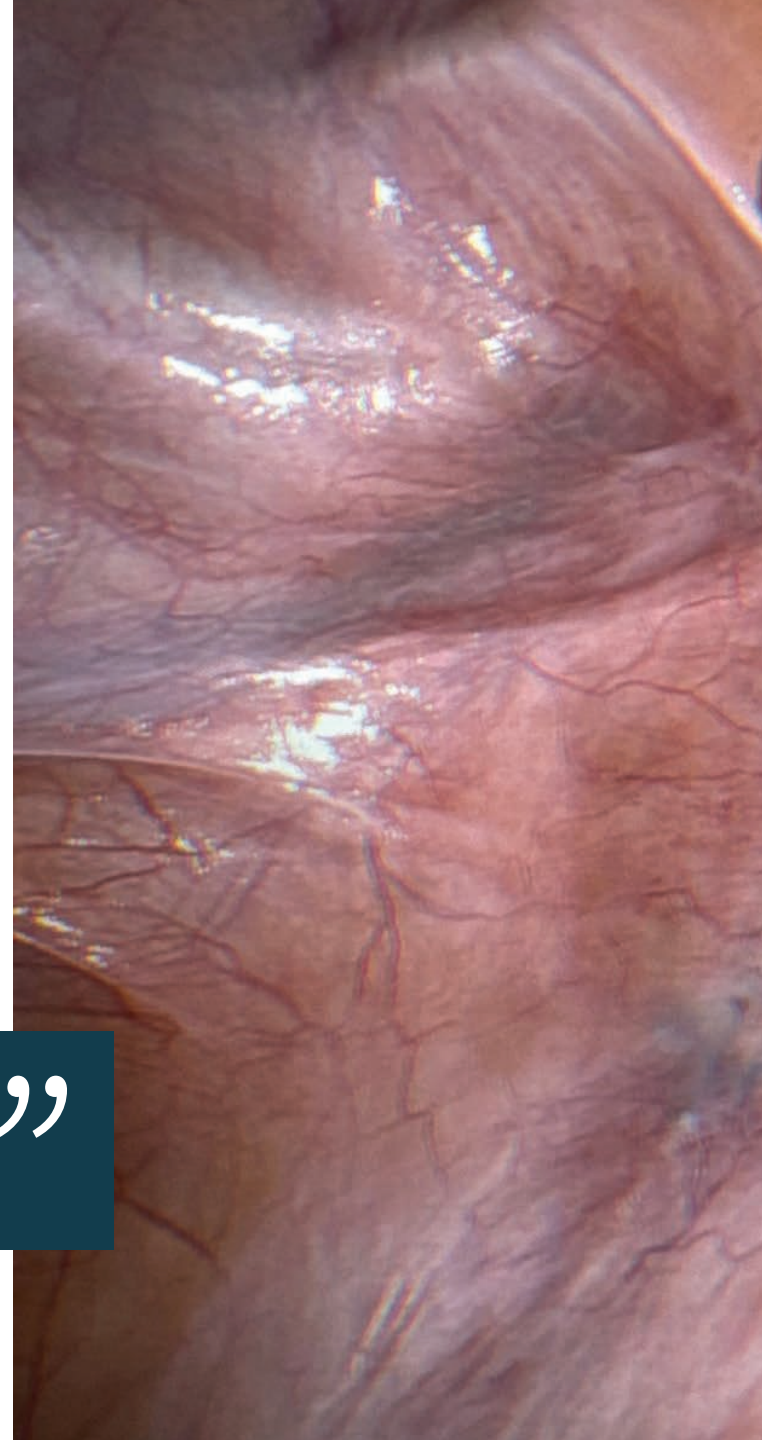
OviTex Core Permanent

Lookback on Robotic Inguinal Hernia Repair at 7 months

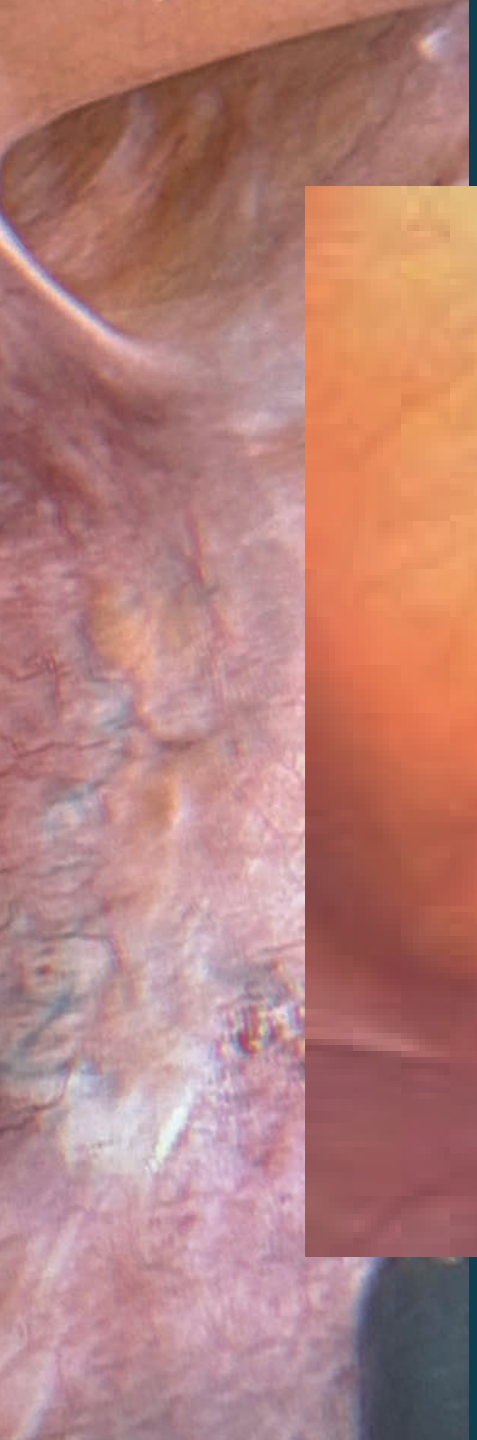
Paul Szotek, MD, MBA, FACS
Indiana, United States

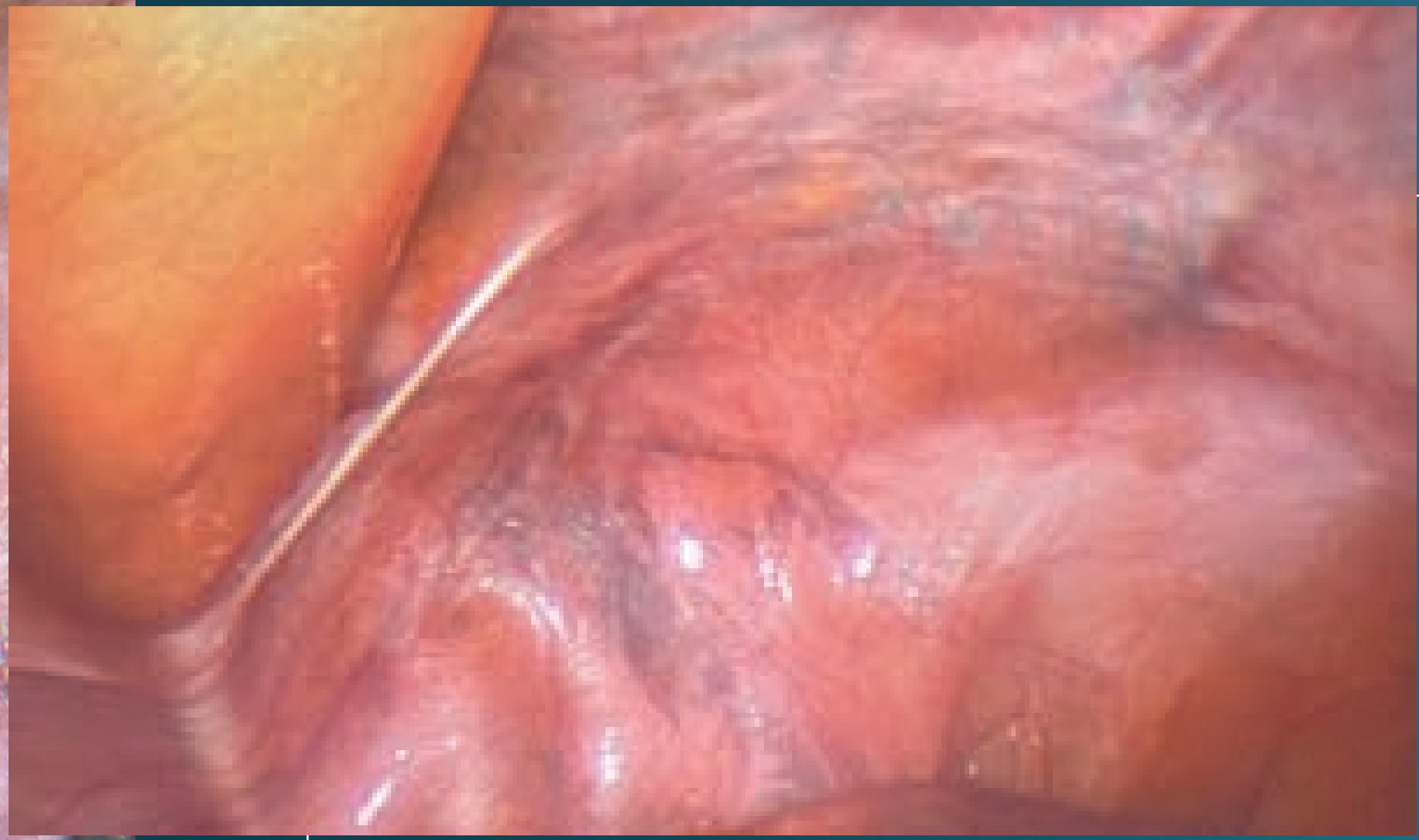
Reason for second surgical intervention
– Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*
– Healthy with a low BMI.



> *"OviTex was completely transformed into a mature, fully functional, and well-vascularized tissue."*
>
> *-Paul Szotek, MD, MBA, FACS***





OviTex Core Permanent

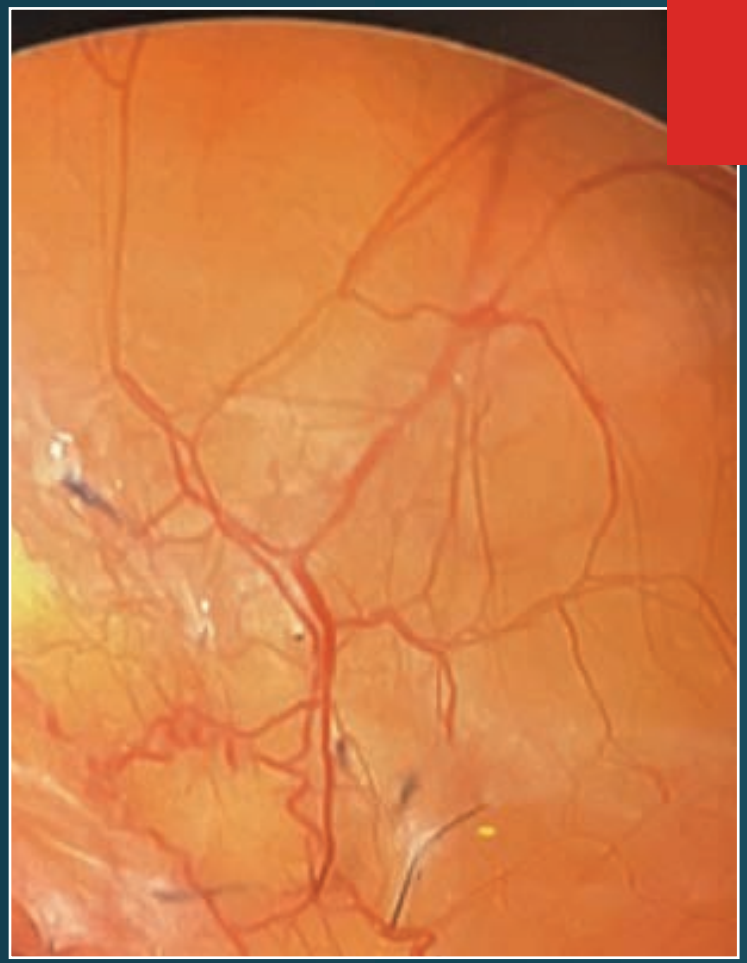
Lookback on Robotic Inguinal Hernia Repair at 12 months

Scott Golembeski, MD
Colorado, United States

Reason for second surgical intervention
– Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*
– 65 yo with hypertension and pre-diabetes.

> *“I’ve observed that OviTex produces tissue that looks and feels more natural, with significantly less contraction compared to other synthetic mesh products. My patients show faster recovery, reporting less postoperative pain and fewer complaints than with the permanent synthetic meshes I used before.”*
>
> *-Scott Golembeski, MD***



> *I've been impressed with how OviTex integrates into the body, remodeling into tissue that looks and feels remarkably fascia-like. This unique characteristic gives me confidence in the strength and durability of the repair, offering my patients a more natural and reliable solution.*
>
> *-Paul Szotek, MD, MBA, FACS***

OviTex Core Permanent
Lookback on Robotic Inguinal Hernia Repair at 36 months

Paul Szotek, MD, MBA, FACS
Indiana, United States

Reason for second surgical intervention – Acute Appendicitis

Reported Patient Demographics & Comorbidities*
– BMI of 27.5, history of gout and kidney stones, with no prior surgical history.

HIATAL HERNIA REPAIR

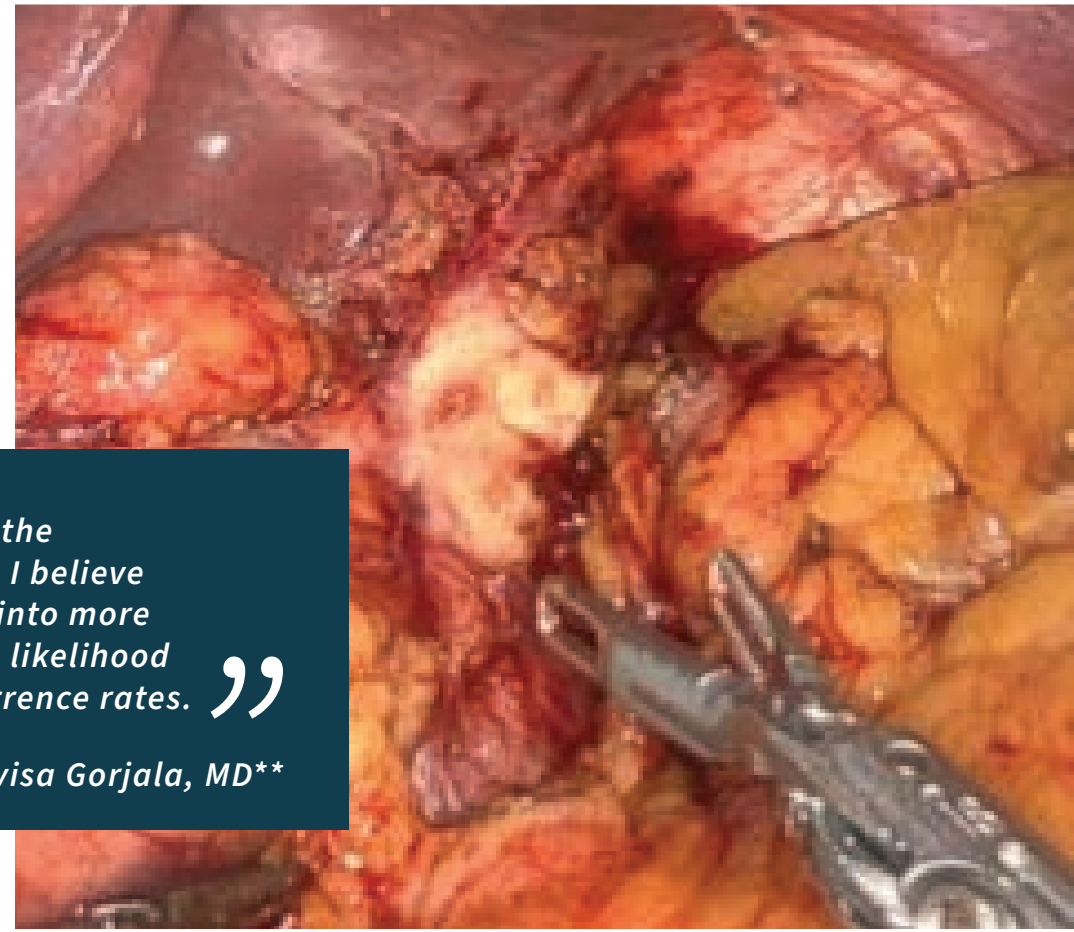
OviTex 1S Resorbable

Lookback on Robotic Hiatal Hernia Repair at 24 months

Srinivasa Gorjala, MD
Georgia, United States

Reason for second surgical intervention
– Bariatric weight loss surgery

Reported Patient Demographics & Comorbidities*
– Obesity, gastroesophageal reflux disease (GERD), and diabetes.



> *I believe that hiatal hernia repair with a reinforcement material like OviTex is the future of hiatal hernia surgery. Having used various types of hernia meshes, I believe OviTex is the best option for hiatal hernia repair. Its ability to remodel into more natural tissue instills confidence in both my patients and me, reducing the likelihood of recurrence in a procedure often associated with high recurrence rates.*
>
> *-Srinivisa Gorjala, MD***

PARASTOMAL HERNIA REPAIR


X MASK

OviTex 2S Permanent

Lookback on Robotic Parastomal Hernia Repair at 24 months

Bryan Payne, DO
North Carolina, United States

Reason for second surgical intervention
– Unrelated complication from urology procedure

Reported Patient Demographics & Comorbidities*
– Patient had a stroke and is bed bound.

> *At 24 months post-repair, the parastomal hernia repaired with OviTex 2S Permanent demonstrated remarkable integration. The material appeared fully vascularized, blending seamlessly with the surrounding tissue and resembling the strength and durability of native fascia.*
>
> *-Bryan Payne, DO***

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S4M Europe. 59, rue Castellion. 01100 Oyonnax – France

*Patient demographics and comorbidity information were provided by each respective surgeon.

**The following surgeons are paid consultants of TELA BIO: Marja Boermeester, George DeNoto, Paul Szotek, Scott Golembeski, Srinivisa Gorjala, and Bryan Payne. The opinions of Marja Boermeester, George DeNoto, Paul Szotek, Scott Golembeski, Srinivisa Gorjala, and Bryan Payne are those of the surgeons and not necessarily those of TELA BIO. Individual results may vary.

Indications and Important Safety Information: Indications and Important Safety Information: OviTex Reinforced Tissue Matrix is intended for use as a surgical mesh to reinforce and/or repair soft tissue where weakness exists. Indications for use include the repair of hernias and/or abdominal wall defects that require the use of reinforcing or bridging material to obtain the desired surgical outcome. OviTex IHR is intended for use as a surgical mesh to reinforce and/or repair soft tissue where weakness exists. Indications for use include the repair of inguinal hernias that require the use of reinforcing material to obtain the desired surgical outcome.

Caution: Federal (US) law restricts this device to sale by or on order of a physician. Do not use OviTex in patients known to be sensitive to materials of ovine (sheep) origin. Use of OviTex in this patient population may result in an allergic or immunological reaction. The following adverse events have been reported for surgical repair of hernias (with or without a surgical mesh): pain, infection, dysphagia, hernia recurrence, dehiscence, abscess, adhesion, bowel obstruction, bleeding, fistula, seroma, perforation, mesh migration, and mesh contraction. For additional important safety information, please see the OviTex Instructions for Use. Healthcare professionals must use their own clinical judgment in evaluating appropriate treatment options for a particular patient. Treatment of a specific patient should be based on individual needs and the medical care deemed necessary by the patient's treating physician and institutional protocols. Always refer to the package insert, product label, and/ or instructions for use before using any TELA Bio product. Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your TELA Bio representative if you have questions about TELA Bio products.

References: 1. 1.Lun S, Irvine S.M., Johnson K.D., Fisher N.J., Floden E.W., Negron L., Dempsey S.G., McLaughlin R.J., Vasudevamurthy M., Ward B.R., May B.C., A functional extracellular matrix biomaterial derived from ovine forestomach, Biomaterials 31(16) (2010) 4517-29. **2.**Irvine, S. M.; Cayzer, J.; Todd, E. M.; Lun, S.; Floden, E. W.; Negron, L.; Fisher, J. N.; Dempsey, S. G.; Alexander, A.; Hill, M.C.; O'Rouke, A.; Gunningham, S. P.; Knight, C.; Davis, P. F.; Ward, B.R.; May, B. C. H. Quantification of in vitro and In-Vivo angiogenesis stimulated by ovine forestomach matrix biomaterial. Biomaterials 2011, 32 (27), 6351–61. **3.** Dempsey SG, Miller CH, Hill RC, Hansen KC, May BCH. Functional Insights from the Proteomic Inventory of Ovine Forestomach Matrix. J Proteome Res. 2019 Apr 5;18(4):1657-1668. doi: 10.1021/acs.jproteome.8b00908. Epub 2019 Mar 25. PMID: 30879303. **4.** Biomechanical data on file (EN-STU-0028, EN-STU-0041, EN-STU-0043,). **5**. Smith, M. J., et al (2021). "Further structural characterization of ovine forestomach matrix and multi-layered extracellular matrix composites for soft tissue repair." J Biomater Appl 36(6): 996-1010. **6.** OviTex Portfolio Brochure - MK-PM-0110 Revision 01 (October 2023). **7.** OVITEX® PRS Brochure - MK-PM-0095 Revision 00 (April 2023). **8.** Sawyer, M., Ferzoco, S., & DeNoto, G., 3rd (2021). A Polymer-Biologic Hybrid Hernia Construct: Review of Data and Early Experiences. Polymers, 13(12), 1928. https://doi.org/10.3390/polym13121928. **9**. Negron, et al (2012). Ovine forestomach matrix biomaterial is a broad-spectrum inhibitor of matrix metalloproteinases and neutrophil elastase. International Wound Journal,. doi: 10.1111/j.1742- 481X.2012.01106.x. **10**.Dempsey, S. G., C. H. Miller, J. Schueler, R. W. F. Veale, D. J. Day and B. C. H. May (2020). "A novel chemotactic factor derived from the extracellular matrix protein decorin recruits mesenchymal stromal cells in vitro and In-Vivo." PLoS One 15(7): e0235784. **11**. Overbeck, N., Nagvajara, G. M., Ferzoco, S., May, B., Beierschmitt, A., & Qi, S. (2020).* In-vivo evaluation of a reinforced ovine biologic: a comparative study to available hernia mesh repair materials. Hernia: the journal of hernias and abdominal wNote all surgery, 24(6), 1293–1306. https://doi.org/10.1007/s10029-019-02119-z. **12**. Kollmetz T, Castillo-Alcala F, Veale RWF, Taghavi N, van Heeswijk VM, Persenaire M, May BCH, Dempsey SG. Comparative Analysis of Commercially Available Extracellular Matrix Soft Tissue Bioscaffolds. Tissue Eng Part A. 2024 Sep 30. doi: 10.1089/ten.TEA.2024.0076. Epub ahead of print. PMID: 39276103. **13**.Petrie K, Cox CT, Becker BC, MacKay BJ. Clinical applications of acellular dermal matrices: A review. Scars, Burns & Healing. 2022;8. doi:10.1177/20595131211038313. **14**. Bilsel, Y., & Abci, I. (2012). The search for ideal hernia repair; mesh materials and types. International journal of surgery (London, England), 10(6), 317–321. https://doi.org/10.1016/j.ijsu.2012.05.002. **15**. Najm A, Niculescu AG, Gaspar BS, Grumezescu AM, Beuran M. A Review of Abdominal Meshes for Hernia Repair-Current Status and Emerging Solutions. Materials (Basel). 2023 Nov 10;16(22):7124. doi: 10.3390/ma16227124. PMID: 38005054; PMCID: PMC10672379. **16.** Deeken CR, Chen DC, Lopez-Cano M, Martin DP, Badhwar A. Fully resorbable poly-4-hydroxybutyrate (P4HB) mesh for soft tissue repair and reconstruction: A scoping review. Front Surg. 2023 Apr 12;10:1157661. doi: 10.3389/fsurg.2023.1157661. PMID: 37123542; PMCID: PMC10130450. **17.** Van den Dop LM, Van Rooijen MMJ, Tollens T, Jørgensen LN, De Vries-Reilingh TS, Piessen G, Köckerling F, Miserez M, Dean M, Berrevoet F, Dousset B, Van Westreenen HL, Gossetti F, Tetteroo GWM, Koch A, Boomsma MF, Lange JF, Jeekel J. Five-Year Follow-Up of a Slowly Resorbable Biosynthetic P4HB Mesh (Phasix) in VHWG Grade 3 Incisional Hernia Repair. Ann Surg Open. 2023 Nov 28;4(4):e366. doi: 10.1097/AS9.0000000000000366. PMID: 38144487; PMCID: PMC10735126.18. Stecco, Carla. Functional Atlas of the Human Fascial System. Elsevier, 2015.

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