

JOIN

Microthane®  
IN SCIENCES

POLYTECH

Made in  
Germany

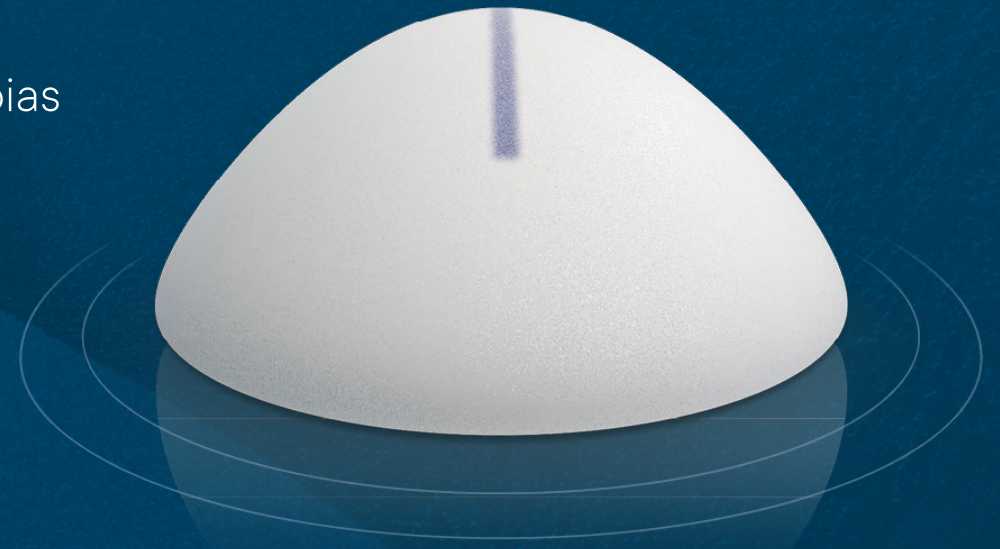
# Reliable and rigorous clinical research



CLINICAL  
RESEARCH

- Conducted by leading surgeons in the field of Breast Surgery
- Journal publications with rigorous peer review and editorial scrutiny
- Scientific accuracy and relevance with statistical significance
- Publications with level of evidence up to II, with less risk of bias
- Patients groups up to 894 <sup>21</sup>
- Median follow-up: up to avg. 103,3 months <sup>11</sup>

Find out the compilation of publications at [My](#)POLYTECH



## 2015

BRUNNERT <sup>20</sup>

Authors observation:

- No serious complications needing explantation, no capsular fibrosis, implant rotation or rupture
- Only 4 minor complications (Complication rate: 1.97%)

Prospective study  
Level of Evidence: III  
N° of patients: 90 (152 breasts)  
Median follow-up: 41 months  
DGPW

## 2016

POMPEI et al.<sup>10</sup>

**1.2% CC rate**

Retrospective study  
Level of Evidence: III  
N° of patients: 131 (255 breasts)  
Median follow-up: avg. 110 mos  
Statistical relevance: significant; P < .05  
Aesthetic Surgery Journal

## 2017

POMPEI et al.<sup>11</sup>

**Lower cumulative incidence of CC following 2-stage breast reconstruction, even when radiotherapy is performed**

Retrospective study  
Level of Evidence: III  
N° of patients: 92 (115 breasts)  
Median follow-up: avg. 103.3 mos  
Aesthetic Surgery Journal

STAN, BIGGS <sup>21</sup>

**Patient's satisfaction was estimated on a scale from 1 to 5. At the end of the observation period, 90% of patients under constant control revealed to be either satisfied or extremely satisfied with the outcomes (levels of satisfaction that ranged from 4 to 5).**

Retrospective case series  
N° of patients: 894  
Follow-up: 1 – 4 yrs  
Plastic and Reconstructive Surgery

## 2020

LORETI et al.<sup>12</sup>

**After mastectomy and one-stage Immediate Breast Reconstruction, the use of polyurethane covered implants is associated with a lower incidence of CC compared to textured implants. This advantage is amplified several folds for patients who necessitate post mastectomy radiation therapy.**

Retrospective study  
Level of Evidence: III  
N° of patients: 312  
Median follow-up: avg. 2 – 3 yrs  
THE BREAST

## 2021

COYETTE et al.<sup>23</sup>

**• SAFE to use in prepectoral DTI  
• STABLE without additional mechanical support  
• Prior breast irradiation should not be considered as a contraindication to prepectoral PU device placement**

Case series report  
Level of Evidence: III  
N° of patients: 50  
Follow-up: 1 – 4 years  
JPRAS

SALGARELLO et al.<sup>22</sup>

**At the 12-months follow-up, the mean Q-score for satisfaction with breast was 71.73 with maximum up to 88%.**

Retrospective study  
Level of Evidence: III  
N° of patients: 70  
Clinical Breast Cancer

## 2022

DE VITA et al.<sup>24</sup>

**• VERY HIGH patient satisfaction for DTI breast reconstruction  
• Likelihood of cost effectiveness compared to ADM<sup>27</sup>**

Retrospective study  
Level of Evidence: III  
Follow-up: 6 – 42 months  
N° of patients: 453  
Clinical Breast Cancer

## 2023

CAGLI et al.<sup>25</sup>

**The formation of less fibrotic capsule may reduce the risk of CC occurrence, particularly with Microthane® and MESMO® surfaces.**

Randomized Study  
Level of Evidence: III  
N° of patients: 30  
Statistical relevance: significant; P < .05  
Plastic and Reconstructive Surgery

Since 2015 focus on Microthane®

# 2023



CLINICAL  
RESEARCH

CAGLI et al.



Randomized Study

## BREAST

### Histologic and Immunohistochemical Evaluation of Human Breast Capsules Formed around Five Different Expander Surfaces

Barbara Cagli, MD, PhD<sup>1</sup>  
Simone Carotti, MD, PhD<sup>2</sup>  
Francesco Segreto, MD, PhD<sup>3</sup>  
Maria Francesconi, MSc<sup>2</sup>  
Giovanni F. Marangi, MD,  
PhD<sup>1</sup>  
Stefania Tenna, MD, PhD<sup>1</sup>  
Michele Diomedì, MD<sup>1</sup>  
Giuseppe Perrone, MD, PhD<sup>1</sup>  
Sergio Morini, MD, PhD<sup>1</sup>  
Paolo Persichetti, MD, PhD<sup>1</sup>

Rome, Italy

**Background:** Polyurethane (PU) coating and implant texturization were designed to reduce the incidence of capsular contracture (CC), even if the link between surface type and CC remains unclear. To date, the etiopathogenetic aspects have not been fully clarified. The aim of this study was to evaluate capsules formed around five different breast expanders.

**Methods:** Thirty patients were divided into randomized groups implanted with five different expanders: smooth, coated with PU foam (poly), with a low-microtextured, high-microtextured, and macrot textured surface (L-micro, H-micro, macro). Specimens of the capsules were removed at implant reconstruction and evaluated for morphology and immunohistochemistry expression of  $\alpha$ -smooth muscle actin ( $\alpha$ -SMA), collagen type I and III, CD68, CD34, and CD3. Remodeling Combined Index was also evaluated.

**Results:** Expression of  $\alpha$ -SMA was significantly increased in smooth capsules versus poly, low-microtextured, and high-microtextured groups ( $P = 0.007$ ;  $P = 0.010$ ;  $P = 0.028$ ), whereas the prevalence of collagen type I in smooth capsules and collagen type III in poly capsules identified a stable versus an unstable tissue. Remodeling Combined Index and  $\alpha$ -SMA showed an inverted correlation. CD68 and CD34 cellular expression increased significantly in poly capsules with respect to smooth ( $P < 0.001$ ;  $P < 0.001$ ) and macrot textured groups ( $P < 0.001$ ;  $P < 0.001$ ). CD3 showed no significant difference among the groups. **Conclusion:** In this human study, the authors observed that increased tissue remodeling and reduced myofibroblast activation, along with the inflammatory infiltration and neoangiogenesis, especially in the poly and low-microtextured groups, might promote the formation of an unstable and less fibrotic capsule, lowering the risk of CC. (*Plast. Reconstr. Surg.* 152: 388e, 2023.)

**CLINICAL QUESTION/LEVEL OF EVIDENCE:** Therapeutic, III.



# Microthane<sup>®</sup> IN SCIENCES

BRUNNERT



Authors observations:

- ⊕ No serious complications needing explanation, no capsular fibrosis, implant rotation or rupture
- ⊕ Only 4 minor complication rate (1.97%)

N° of patients: \_\_\_\_\_

90 (152 breasts)

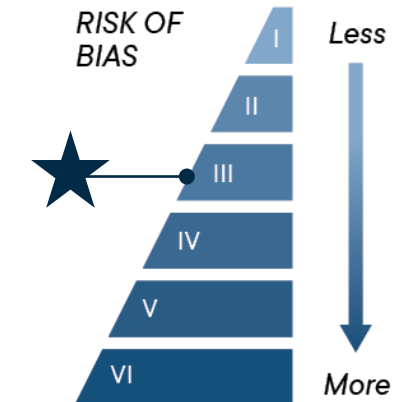
Median follow-up: \_\_\_\_\_

41 months

Publisher: \_\_\_\_\_

DGPW

## LEVEL OF EVIDENCE



2015

*Brunnert KE. The micropolyurethane foam-coated Diagon\Gel@4Two implant in aesthetic and reconstructive breast surgery - 3-year results of an ongoing study. GMS Interdiscip Plast Reconstr Surg DGPW. 2015 Dec 21;4:Doc20. doi: 10.3205/ijprs000079. PMID: 26713264; PMCID: PMC4686800.*

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# Microthane® IN SCIENCES

POMPEI et al.



Authors findings:

⊕ 1,2% Capsular Contraction Rate

⊕  $P < 0.5$  Statically Significance

N° of patients:

113 (255 breasts)

Median follow-up:

Avg. 110 months

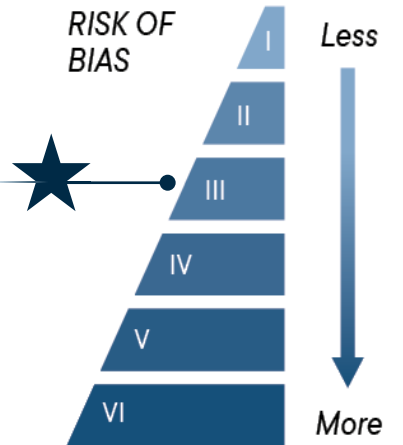
Retrospective Study

Publisher:

Aesthetic Surgery Journal

## LEVEL OF EVIDENCE

RISK OF  
BIAS



2016

Pompei S et al. *Aesthet Surg J.* 2016 Nov;36(10):1124-1129. doi: 10.1093/asj/sjw171. PMID: 27677825.

# Microthane® IN SCIENCES

POMPEI et al.



Authors findings:

⊕ Lower cumulative incidence of CC following 2-stage breast reconstruction, even when radiotherapy is performed

N° of patients:

92 (115 breasts)

Follow-up:

Avg. 103.3 months

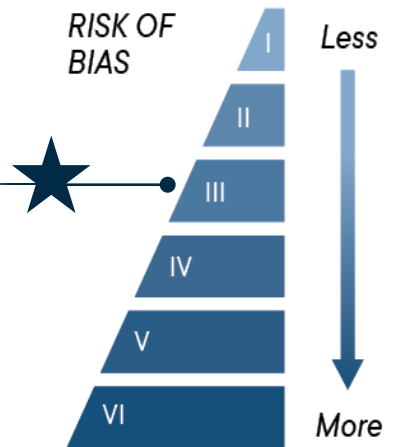
Retrospective Study

Publisher:

Aesthetic Surgery Journal

## LEVEL OF EVIDENCE

RISK OF BIAS



2017

Pompei S et al. *Aesthet Surg J.* 2017 Feb;37(2):171-176. doi: 10.1093/asj/sjw183. PMID: 27940908.

# Microthane<sup>®</sup> IN SCIENCES

STAN, BIGGS



## Authors findings:

⊕ Patient's satisfaction was estimated on a scale from 1 to 5. At the end of the observation period, 90% of patients under constant control revealed to be either satisfied or extremely satisfied with the outcomes (levels of satisfaction that ranged from 4 to 5).

N° of patients:

894

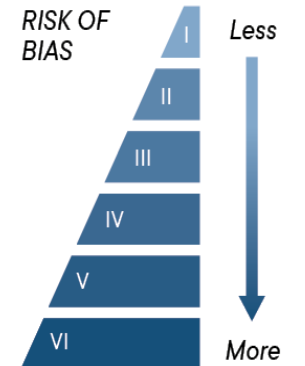
Follow-up:

4-5 years

Publisher:

Plastic and Reconstructive Surgery

### LEVEL OF EVIDENCE



2017

Stan C, Biggs T. The Diagon/Gel Implant: A Preliminary Report of 894 Cases. *Plast Reconstr Surg Glob Open*. 2017 Jul 5;5(7):e1393. doi: 10.1097/GOX.0000000000001393. PMID: 28831340; PMCID: PMC5548563

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# Microthane<sup>®</sup> IN SCIENCES

LORETI et al. 1



## Authors findings:

⊕ After mastectomy and one-stage Immediate Breast Recon., the use of PU covered implants is associated with a lower incidence of CC compared to textured implants. This advantage is amplified several folds for patients who necessitate post mastectomy radiation therapy.

N° of patients:

312

Follow-up:

Avg. 2-3 years

Retrospective Study

Publisher:

THE BREAST



2020

Loreti A et al. *Breast*. 2020 Apr;50:1-7. doi: 10.1016/j.breast.2020.01.008. Epub 2020 Jan 22. PMID: 32062351

# Microthane<sup>®</sup> IN SCIENCES

COYETTE et al.



Authors findings:

- ⊕ SAFE to use in prepectoral DTI
- ⊕ STABLE without additional mechanical support
- ⊕ Prior breast irradiation should not be considered as a contraindication to prepectoral PU device placement

N° of patients:

50

Follow-up:

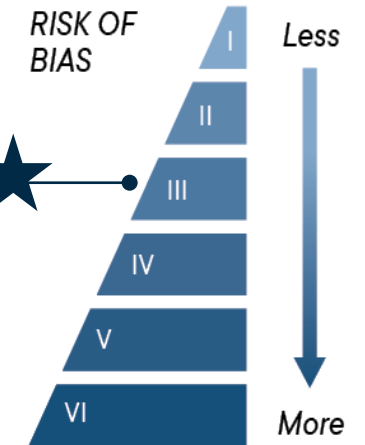
1-4 years

Case series report

Publisher:

JPRS

LEVEL OF EVIDENCE



2021

Coyette M, Coulie J, Lentini A, Gerdom A, Lengelé B. Prepectoral immediate breast reconstruction with polyurethane foam-coated implants: Feasibility and early results in risk-reducing and therapeutic mastectomies. *J Plast Reconstr Aesthet Surg*. 2021 Nov;74(11):2876-2884. doi: 10.1016/j.bjps.2021.03.077. Epub 2021 Apr 20. PMID: 34011475.

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# Microthane® IN SCIENCES

SALGARELLO et al.



Authors findings:

⊕ At the 12-months follow-up,  
mean Q-score for satisfaction with **71.73**  
with maximum up to **88%**.

N° of patients:

**70**

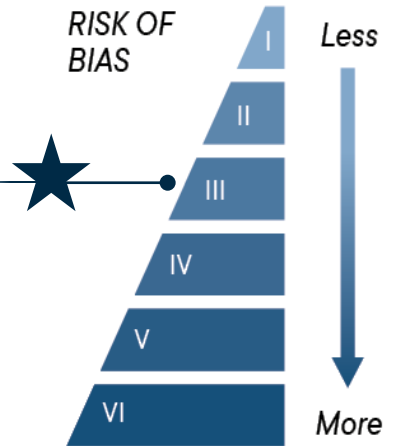
Retrospective  
Study

Publisher:

Clinical Breast Cancer

LEVEL OF EVIDENCE

RISK OF  
BIAS



2021

Salgarello M, Pagliara D, Barone Adesi L, Visconti G, Wild JB, Matey P. Direct to Implant Breast Reconstruction With Prepectoral Micropolyurethane Foam-Coated Implant: Analysis of Patient Satisfaction. *Clin Breast Cancer*. 2021 Aug;21(4):e454-e461. doi: 10.1016/j.clbc.2021.01.015. Epub 2021 Jan 23. PMID: 33627298.

POLYTECH

# Microthane® IN SCIENCES

DE VITA 



Authors findings:

- ⊕ VERY HIGH patient satisfaction for DTI breast reconstruction  $P < 0.5$
- ⊕ Likelihood of COST EFFECTIVENESS compared to ADM

N° of patients:

453

Median follow-up:

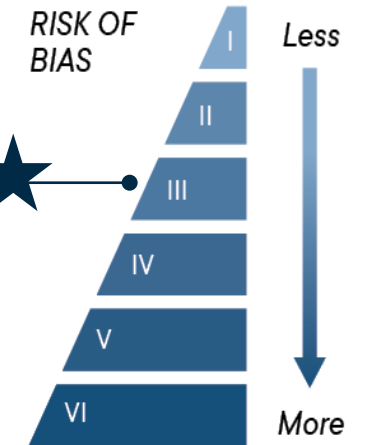
6-42 months

Retrospective Study

Publisher:

Clinical Breast Cancer

LEVEL OF EVIDENCE



2022

De Vita R, Villanucci A, Buccheri EM, Pozzi M. Extended Clinical Experience With Nipple-Sparing Mastectomy and Prepectoral Polyurethane Implant Positioning (BRAND4P method). *Clin Breast Cancer*. 2022 Jul;22(5):e623-e628. doi: 10.1016/j.clbc.2022.03.005. Epub 2022 Mar 24. PMID: 35437225.

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# Microthane® IN SCIENCES

CAGLI et al.



Authors findings:

- ⊕ The formation of less fibrotic capsule may reduce the risk of CC occurrence, particularly with Microthane® and MESMO® surfaces.

Randomized Study

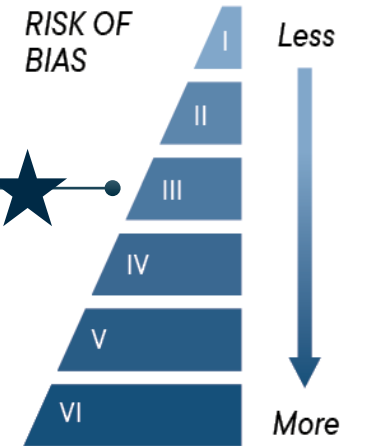
Statistical relevance:

Significant  $P < .05$

Publisher:

Plastic and Reconstructive Surgery

LEVEL OF EVIDENCE



2023

Cagli B, Carotti S, Segreto F, Francesconi M, Marangi GF, Tenna S, Diomedì M, Perrone G, Morini S, Persichetti P. „Histological and Immunohistochemical Evaluation of Human Breast Capsules Formed Around Five Different Expander Surfaces“. *Plast Reconstr Surg.* 2023 Feb 27:e010317. doi: 10.1097/PRS.00000000000010317. Epub ahead of print. PMID: 36827480.

POLYTECH

# Microthane®

## Indications



Primary  
augmentation



Revision  
augmentation



Reconstruction



Mastopexy  
augmentation

“There is no logical reason  
not to use polyurethane  
foam covered implants as  
**first choice** in all patients.”<sup>1</sup>

# Microthane<sup>®</sup> EXPERIENCE

STABILITY • ADHERENCE • PREDICTABILITY

“They stay where they are placed”

POLYTECH