

Final outcomes of the initial 20 subjects reaching 2 year follow up in the BRAVO Ventral Hernia Study

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Introduction

The BRAVO trial was designed to evaluate the clinical performance of OviTex RTM (1S, Permanent), a novel reinforced tissue matrix in a variety of ventral hernia repairs. This abstract presents the final disposition of the initial 20 subjects reaching the 2-year follow-up post implantation.

Methodology

BRAVO is a prospective, single arm, multicenter study (ClinicalTrials.gov/NCT03074474). Most patients presenting with a ventral hernia were eligible, including those with recurrences and previous infections. Excluded were only those with a BMI > 40 kg/m², CDC wound class Grade 4, and defects requiring implants larger than 20 x 20 or 18 x 22 cm. The endpoints studied are real and apparent recurrences and all post-operative surgical site occurrences (SSO), including wound related events. Patients with a clinically suspected recurrence were required to undergo a CT scan for confirmation. Any other complications occurring within the first three months following surgery were noted as well, whether related to the procedure or not. At each follow up timepoint patients completed Quality of Life (QoL) questionnaires and pain assessments. The patients are being followed for 2 years post-implantation.

| Preoperative Variables, Comorbid Conditions, and Perioperative Variables | |
|--|--------------------|
| Preoperative variables | 24 Months |
| Subjects enrolled | 92 |
| Subjects, n (%) | 20 (22%) |
| Sex, n (%) | |
| Male | 7 (35%) |
| Female | 13 (65%) |
| Age (years), mean (range) | 64.6 (47.0 - 84.8) |
| Body mass index (kg/m ²), mean (range) | 31.1 (23.6 - 38.5) |
| Comorbid conditions | |
| Obesity, n (%) | 14 (70%) |
| Patients with prior VH repairs, n (%) | 7 (35%) |
| Number of repairs, mean | 3 |
| Prior SSI, n (%) | 1 (5%) |
| History of surgical infection, n (%) | 4 (20%) |
| Perioperative variables | |
| VHWG, n (%) | |
| Grade I | 3 (15%) |
| Grade II | 13 (65%) |
| Grade III | 4 (20%) |

| Operative Characteristics | |
|---|------------------|
| Operative characteristics | 24 Months |
| Hernia defect size (cm ²), mean (range) | 131.3 (4-384) |
| Mesh size (cm ²), mean (range) | 266.5 (30-400) |
| Approach, n (%) | |
| Open | 14 (70%) |
| Laparoscopic | 2 (10%) |
| Robotic | 4 (20%) |
| Plane of placement, n (%) | |
| Retrorectus | 11 (55%) |
| Intraperitoneal | 5 (25%) |
| TAR | 3 (15%) |
| Retrofascial/pre-peritoneal | 1 (5%) |
| Onlay | 0 (0%) |
| Primary closure, n (%) | 18 (90%) |
| Component separation, n (%) | 14 (70%) |
| Time in surgery (hours), mean (range) | 2.53 (0.88-3.93) |
| Hospital stay (days), mean (range) | 5.06 (0-9) |

| Primary and Secondary Endpoints: Adverse Events | |
|---|-----------|
| | 24 Months |
| Total patients | 20 (24%) |
| Hernia recurrence, n (%) | - |
| SSO (patients), n (%)* | 5 (25%) |
| Seroma (requiring intervention) | - |
| Hematoma | 1 (5%) |
| Wound dehiscence | - |
| Skin necrosis | - |
| Fistulae | - |
| Superficial infection | 1 (5%) |
| Deep infection | 3 (15%) |
| Organ space infection | - |
| Complications | |
| Bowel obstruction | 1 (5%) |
| DVT/PE | 1 (5%) |
| Ileus | 3 (15%) |
| Malignancy | - |
| Other non-surgery or hernia related complications | 6 (30%) |
| *Individual patients may have experienced more than one SSO | |

Results

In total, ninety-two (92) patients were enrolled and underwent surgery. Twenty (20) subjects have now completed their two-year follow-up visit. In this group, the average BMI was 31.1, with 70% of the patients classifying as obese. Thirteen (13) of the 20 patients had a VHWG grade 2 and four (4) classified as grade 3. Five (5) subjects experienced SSOs, four (4) infections and one (1) hematoma, all of which had resolved at the time of first analysis at 30 days and did not require surgical intervention. No subject in this group has experienced a recurrence (0 of 20; 0%) through two years.

Conclusion

This first look at long-term outcomes in this prospective study with OviTex RTM demonstrates that in this group no further surgical procedures have been performed to treat either procedure related complications or recurrences. With the initial 20% of the intended patient population having reached the two-year follow-up, the observed absence of any recurrence is extremely encouraging.

The BRAVO study group

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