
HydroVANTAGE™
The power of choice.
Dip into something more
current.
Coloplast

HydroVANTAGE™

*The power of **choice**.*

The microbial environment and its infectious agents are constantly evolving – *shouldn't your infection prevention practices do the same?*

The Coloplast Titan® Inflatable Penile Prosthesis and Genesis® Malleable Prosthesis are coated with HydroVANTAGE™ hydrophilic coating.

HydroVANTAGE provides physicians with *The Power of Choice* in their aqueous solution, meaning your dips can be both customized and optimized to best serve the evolving needs of your patients and environment. Coloplast's Titan® and Genesis® penile implants are the only FDA approved penile prostheses with hydrophilic coating.

Effectively preventing infections begins with understanding what infectious agents are most prevalent and what antibiotics they may be resistant or susceptible to in your local area. An antibiogram can help! An antibiogram is a summary of antimicrobial susceptibilities of local bacteria. Antibiograms can be used by clinicians to assess and select appropriate antibiotic therapy. Consider contacting your facility's lab to request an antibiogram to get the most accurate reading for your facility.

For a quick overview of antibiotic resistant superbugs in your area, visit *resistanceopen.org* or *scan the QR Code.*

Infection

is the most dreaded complication of penile prosthetics, as it almost always results in removing the full implant. Therefore, a surgeon must be diligent about the threat of infection before, during, and after surgery.

– Current Urology Reports, 2019

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A Surgeon's Guide to the Various Antibiotic Dips Available During Penile Prosthesis Implantation.[1]

Author	Anti-Infection Dips Studied	Bacteria Studied	Pertinent Findings
Li H *1998*	Rifampin 40 mg/mL/minocycline 25 mg/mL Amikacin 30 mg/mL Vancomycin 60 mg/mL	*S. aureus* *S. epidermidis*	Rifampin/minocycline larger ZOI than amikacin and vancomycin
Hellstrom *2003*	Gentamicin 2mg/mL/bacitracin 100 U/mL	*S. aureus* *S. epidermidis* *E. coli* *P. aeruginosa*	Gentamicin/bacitracin greater ZOI than saline against S. epidermidis
Dhabuwala *2004*	Gentamicin 160 mg/L/vancomycin 1 mg/mL	*S. epidermidis*	Gentamicin/vancomycin reduces S. epidermidis colony counts by 41%
Dhabuwala *2008*	InhibiZone Rifampin 10 mg/mL/gentamycin 1 mg/mL Bacitracin 50 units/mL/gentamycin 1 mg/mL	*S. epidermidis* *E. coli*	Rifampin/gentamycin and bacitracin/gentamycin both have greater ZOIs than InhibiZone
Dhabuwala *2010*	InhibiZone Rifampin 10 mg/mL/gentamycin 1 mg/mL/vancomycin 2 mg/mL Rifampin 10 mg/mL/gentamycin 1 mg/mL Rifampin 1 mg/mL/gentamicin 1 mg/mL/vancomycin 2 mg/mL Rifampin 1 mg/mL/gentamycin 1 mg/mL Rifampin 10 mg/mL Bacitracin 50 units/mL/gentamycin 1 mg/mL	*S. epidermidis* *E. coli*	The zone of inhibition produced by both R10/G1 and R1/G1 is the greatest and exceed that produced by InhibiZone by 40% to 56% for S. epidermidis and 33% for E. coli
Wilson* *2011*	InhibiZone Trimethoprim/polymixin B ophthalmic solution Trimethoprim/sulfamethoxazole infusion solution Bacitracin Rifampicin/minocycline Rifampin/trimethoprim/sulfamethoxazole	*S. epidermidis* *S. lugdunensis* *S. aureus* *Pseudomonas* *Enterococcus*	All dips except bacitracin showed ZOI ≥ InhibiZone for most organisms. Author recommends TMP/SMX due to ease of handling and broad spectrum
Chanyi, RM *2018*	Gentamycin 15 µg/mL Ampicillin 100 µg/mL Tetracycline 10 µg/mL Kanamycin 50 µg/mL Erythromycin 25 µg/mL Ciprofloxacin 10 µg/mL	*E. coli* *S. aureus* *S. epidermidis* *P. mirabilis*	Ampicillin best for Gram-positive S. aureus and S. epidermidis while ciprofloxacin is best for Gram-negative E. coli and P. mirabilis

*Reference stated incorrectly within manuscript. Correct reference:
Wilson SK, Salem EA, Costerton W. Anti-infection dip suggestions for the Coloplast Titan inflatable penile prosthesis in the era of the infection retardant coated implant. J Sex Med. 2011;8(9):2647–54.

Titan® 3-Piece Inflatable Penile Implant with HydroVANTAGE™ Hydrophilic Coating

Indications: The Titan, Titan OTR and Titan Touch Inflatable Penile Prosthesis is indicated for male patients suffering from erectile dysfunction (impotence) who are candidates for implantation of a penile prosthesis.

Contraindications: The Titan, Titan OTR and Titan Touch Inflatable Penile Prosthesis is contraindicated in patients with an active infection present anywhere in the body, especially urinary tract or genital infection; with a documented sensitivity to silicone; with unresolved problems affecting urination, such as an elevated residual urine volume secondary to bladder outlet obstruction or neurogenic bladder; or, unwilling to undergo any further surgery for device revision.

Warnings: Implantation of the device may make latent natural erections, as well as other interventional treatment options, impossible. Men with diabetes or spinal cord injuries, as well as immunocompromised patients, may have an increased risk of infection associated with a prosthesis. Failure to evaluate and promptly treat erosion may result in a substantial worsening of the condition, leading to infection and loss of tissue. Implantation of a penile prosthesis may result in penile shortening, curvature or scarring. Pre-existing abdominal or penile scarring or contracture may make surgical implantation more complicated or impractical.

Precautions: Surgeons implanting penile prostheses should be familiar with the currently available techniques for measuring the patient, determining implant size, and performing the surgery. Removal of an implanted prosthesis without timely reimplantation of a new prosthesis may complicate subsequent reimplantation or may make it impossible.

Potential Complications: Potential complications include scrotal swelling, auto-inflation, discomfort, angulation/curvature, edema, device malfunction, chronic pain, difficulty with ejaculation, transient urinary retention.

The information provided is not comprehensive with regard to product risks. For a comprehensive listing of indications, contraindications, warnings, precautions, and adverse events refer to the product's Instructions for Use. Alternatively, you may contact your Coloplast representative.

Caution: See the device manual for detailed information regarding the implant procedure, contraindications, warnings, precautions, and potential complications/adverse events.

For further information, please contact your local Coloplast representative.

Genesis® 2-Piece Flexible Penile Prosthesis with HydroVANTAGE™ Hydrophilic Coating

Indications: The Genesis Prosthesis is designed for the management of impotence stemming from a variety of causes, including: epispadias; pelvic fracture; spinal cord injury or disease; prostatectomy; cystectomy; abdominal-perineal resection; multiple sclerosis; diabetes mellitus; alcoholism; arteriosclerosis and hypertensive vascular disease; priapism; and Peyronie's disease. The Prosthesis may also be used in selected patients with psychogenic impotence.

Contraindications: Implantation procedures are not advisable if infection is present anywhere in the body, especially urinary tract or genital infection. The Prosthesis should not be used in patients who have unresolved problems such as elevated residual urine from bladder outlet obstruction, or neurogenic bladder. The Prosthesis should be used with caution in diabetic patients who are more susceptible to infection and the complications of infection than nondiabetic patients. Other contraindications include unresolved urinary problems, any condition which may hamper sexual activity (such as severe angina), a history of sensitivity to foreign materials, compromised wound healing, compromised immune system, any anatomic or physiologic abnormality that could lead to significant postoperative complications, an unwillingness to undergo any further surgery for revision and psychological instability of the patient.

Warnings: Implantation of the device may eliminate any natural erections. Men with diabetes or spinal cord injuries, as well as immunocompromised patients, may have an increased risk of device infection which would necessitate an additional surgery. If a component of the device threatens to erode out the skin it must be addressed by a urologist. Failure may lead to infection and subsequent loss of penile tissue. Implantation of a penile prosthesis may result in penile shortening, curvature or scarring. Pre-existing abdominal or penile scarring or contracture may make surgical implantation more complicated or impractical. The risks and benefits of implanting this device in patients with lupus, scleroderma, myasthenia gravis, or documented sensitivity to silicone should be carefully considered.

Precautions: A thorough preoperative consultation should include a discussion between the patient and physician of all available treatment options for erectile dysfunction and their risks and benefits.

Potential Complications: Scrotal swelling, device infection, auto-inflation, discomfort, angulation/curvature, edema, device malfunction/deflation, pain, difficulty with ejaculation, transient urinary retention, fever, migration, patient dissatisfaction, hematoma, wound opening with drainage, bleeding, delayed wound healing, decreased penile sensation, component erosion, inguinal or reservoir hernia.

See the device manual for detailed information regarding the implant procedure, contraindications, warnings, precautions, and potential complications/adverse events.

For further information, please contact your local Coloplast representative.

References

1. Lokeshwar SD, Bitran J, Madhusoodanan V, Kava B, Ramasamy R. A Surgeon's Guide to the Various Antibiotic Dips Available During Penile Prosthesis Implantation. Curr Urol Rep. 2019;20(2):11.

PM-14185 12.20