PROPEP®
SURGICAL
Nerve Monitoring for Robotic Prostate Surgery

Assisting Surgeons. Protecting Patients.

The ProPep Surgical® Nerve Monitoring System identifies critical non-visible somatic nerves at risk during Robotic-Assisted Radical Prostatectomy (RARP), allowing the surgeon to make informed decisions on how to spare these nerves during surgery. While current nerve-sparing techniques focus on preservation of parasympathetic nerves, it is well documented that somatic nerves also play a direct role in erectile function and continence control. The variability of the location of these nerves around the prostate gland correlates to peer-reviewed, published studies that report 38% to 40% impotency and 20% to 44% incontinence 12 months after surgery if these nerves are cut and not spared during surgery.

The ProPep® Nerve Monitoring System allows the surgeon to:

- **Identify** the location and assess the integrity of somatic nerves critical to sexual function and urinary control prior to prostate removal
- **Verify** the location of somatic nerves during dissection
- **Validate** the integrity of somatic nerves post-dissection

Segments of the RARP procedure where nerves are at risk:

- **Posterior dissection**
- **Pedicle dissection**
- **Wide excision**
- **Apical dissection**
- **Anastomosis**
- **Posterior reconstruction**

Questions to ask your surgeon if he/she has never used ProPep® Nerve Monitoring System:

1) If the somatic nerves that control continence and sexual function are hidden within tissue during surgery, how can you see them without nerve monitoring?

2) If the nerves can vary from patient to patient, and even from the left side to the right side, how can you be sure they are where you think they are?

3) What system do you currently use to monitor somatic nerves?

If your surgeon does not use the ProPep® Nerve Monitoring System, we can help you locate a surgeon that does. Please visit us at

http://www.propepsurgical.com/find-a-surgeon/

PRINT THIS PAGE FOR CONSULTATION WITH YOUR DOCTOR

Clinical Findings

Intraoperative Identification and Monitoring of the Somatic Nerves Critical to Potency Preservation during da Vinci Prostatectomy (J. RASMUSSEN, J. SCHNEIDER, B. KANSAS MD.)

Variability in Nerve Location during da Vinci Prostatectomy (R.KUHN)

Preservation of Putative Continence Nerves during Radical Retropubic Prostatectomy Leads to More Rapid Return of Urinary Continence (R. HOUABAUGH, R. DMOCHOWSKJ, T. KNEIB, AND M. STEINER)

Surgeon Experience using Real Time Nerve Monitoring during Robotic-assisted Radical Prostatectomy (RARP) (J. SCHIFF, J. RASMUSSEN)

For white papers, videos and surgeon feedback, visit www.ProPepSurgical.com

Surgeon Validation

"ProPep Nerve Monitoring [System] bridges the gap between surgical repair and nerve preservation for the improvement of urinary incontinence after prostate cancer surgery. This nerve monitoring is the next step in the evolution of the robotic prostatectomy. Nerve monitoring will soon become the standard care in patients undergoing robotic prostatectomies." – Dr. Ronald Kuhn

Dr. Kuhn has performed over 3,200 da Vinci prostatectomies, making him one of the most experienced robotic surgeons in the nation. Dr. Kuhn has performed over 450 surgeries using the ProPep® Nerve Monitoring System)

For additional product information or to schedule product training, call

512-617-6740