



**Product Code**

GNP/THOR/HC-3

Hand Controller



**Product Code**

GNP/THOR/INF-3

Inflatable



**Product Code**

GNP/THOR/TUBING

Tubing

**Technical Specification**

4 – 10 bar air supply

No electrical supply required

Maximum patient weight 200kg

Inflatable – made from PVC: Latex free

**Precautions**

- 1 Please be aware that moving the patient intra-operatively can result in the patient becoming misaligned in relation to the inflatable. This could adversely affect the efficacy of ThorAcc® and could mean closure is not achieved. Also if the movement of the patient causes kinking of the tubing or air cells inflation may again be reduced or some cases over-inflation of a cell could occur.
- 2 Ensure that the patients arms are by their side before inflation. Arms which extend beyond the sides of the chambers can prevent effective inflation.
- 3 If the chest is not closing upon inflation check to ensure that the tubing is not blocked or twisted. If chambers of the inflatable do not inflate as expected or inflation fails do not continue inflating the device.

Manufactured and distributed by:

**Griffiths and Nielsen Ltd**

Maydwell Ave off Stane Street

Slinfold, Horsham

West Sussex RH13 OGN

Email: [medsales@gandn.com](mailto:medsales@gandn.com)

Tel : +44 (0)845 263 8908

Fax :+44 (0)845 263 8907

[www.gandn.com](http://www.gandn.com)

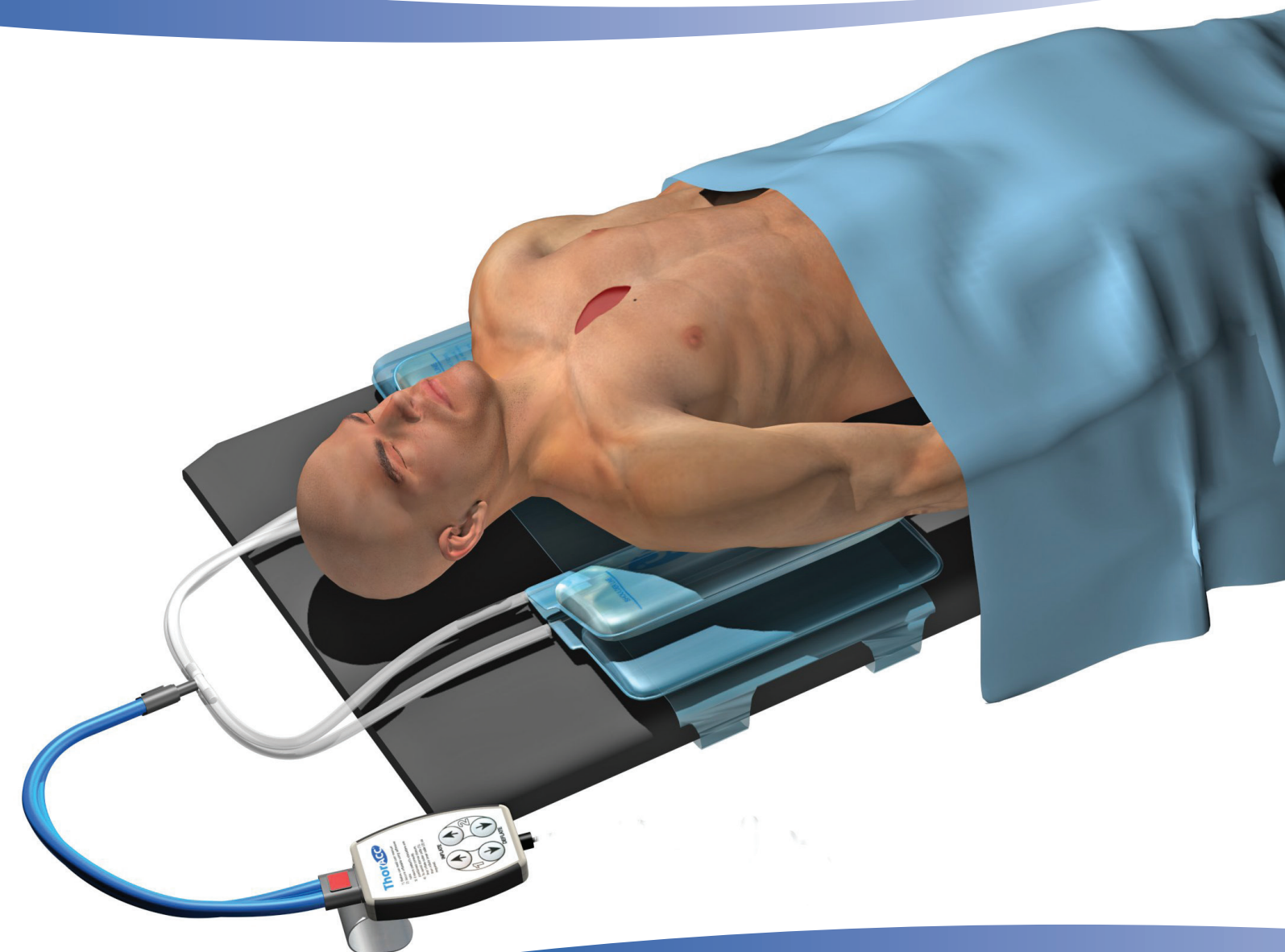


Medical Device Class I

Designed and made in the UK



TH-0801-0314



## ThorAcc®

A simple non-invasive device  
developed to assist sternal closure.

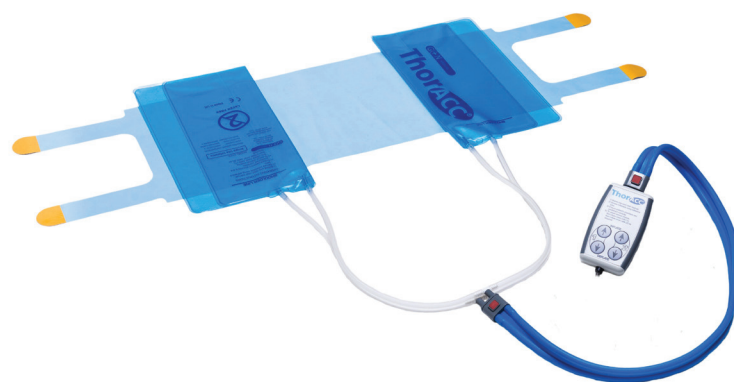
[www.gandn.com](http://www.gandn.com)

## ThorAcc®, a simple non-invasive device developed to assist sternal closure.

Clinically developed by leading cardiac centres in the UK and USA, ThorAcc® is a safe and simple device which supports sternal closure after median sternotomy<sup>1</sup>.

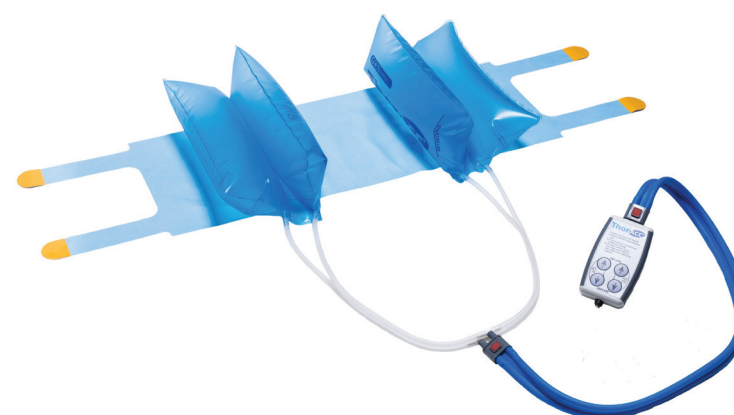
With adherence to perioperative aseptic technique, attention to haemostasis and precise sternal closure, a very low incidence of mediastinitis can be achieved<sup>2</sup>.

Mediastinitis patients have a 59% higher mortality risk compared with patients without mediastinitis<sup>3</sup>.



Controlled inflation of sectioned air cells allows the shoulders and sides to be pushed upwards and inwards.

This in turn helps to reduce the force required when tightening the wires to bring the sternal edges together and ensures a more controlled and uniform alignment.




Two sets of paired air cells are used to facilitate closure for all body sizes giving controlled and uniform alignment.

## Benefits

- Aids control of sternal closure.
- Facilitates uniform alignment of divided sternum.
- Reduces the force required to pull and tighten sternal wires.
- Reduces risk of 'cheese wire' effect.
- Helps to equalise pressure on all sternal wires.
- Reduces the risks associated with staff manual handling.
- Maintains patient position during sternal wiring.

## In use features

- Powered entirely from medical/surgical air supply.
- Two sets of paired air cells are used to facilitate closure.
- Simple and easy to use controller.
- Single-use disposable inflatable .
- Adhesive pads to secure inflatables.
- One size fits all.
- Latex free. CE marked. FDA approved.

## Quality

- CE marked and FDA approved

## Innovation

- Simple inflatable that uses lateral force to assist sternal closure

## Prevention

- Uniform alignment of sternum reduces risk of post-operative complications

## Productivity

- Reduces manual handling requirements

### References:

1. King's College Hospital, 2012.
2. Baskett, R et al, (1999). Is Mediastinitis a preventable complication? A 10 year review. *Ann Thorac Surg* 67(2). 462-599.
3. Risnes, I et al. (2010). Mediastinitis After Coronary Artery Bypass Grafting Risk Factors and Long-Term Survival. *Ann Thorac Surg* 89 (5), 1502-10.