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THE NEXT GENERATION IN SOFT TISSUE REPAIR



THE REMODELING DIFFERENCE





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REINFORCED TISSUE MATRIX







~95 BIOLOGIC BUILDING BLOCK

Retains open-pore microarchitecture facilitating cellular infiltration¹

Facilitates angiogenesis^{1**}

Low elastin content²

Red polymer shown for illustrative purposes only.



Cock-stitch embroidery minimizes unraveling when cut⁴

Device construct: 95% Extracellular Matrix
 (ECM) / 5% Polymer (minimizes permanent foreign body footprint)⁴

Available in permanent (5-0 Polypropylene (PP) – blue and clear) or resorbable (6-0 Polyglycolic Acid (PGA) – clear only) suture reinforcement Retains **153** unique matrisome proteins 85% collagen and 15% secondary molecules³

> Minimal polymer reinforcement increases biologic tissue matrix strength by **25%**⁴

The layered, permeable construct of OviTex provides a biologic building block that facilitates angiogenesis, cell migration, and proliferation.^{1**}

Available in 4, 6, or 8 layers

*OviTex LPR is ~87% extracellular matrix / ~13% permanent polymer reinforcement. **Animal test results may not always accurately predict the clinical performance or response in humans.



SOURCE MATERIAL

OviTex Reinforced Tissue Matrix Unique Source Material

- Abundant source Sheep are raised in New Zealand to supply high quality meat products globally
- Forestomach is highly vascular evolved for nutrient absorption¹
- High rate of tissue turnover (remodeling)
 -rich biology¹

OviTex Facilitates Rapid Blood Vessel Formation⁵ In-Vivo Evidence – Non-Human Primate Model^{*}





*Animal test results may not always accurately predict the clinical performance or response in humans.

OviTex Provides a Unique Fun

	Composition	Primary Mechanism of Action
OviTex Reinforced Tissue Matrices	Non-Dermal ECM – reinforced with minimal suture ^{6,7}	Tissue repair and reinforcement ^{6,7,8}
Biologic Mesh (porcine, bovine or human)	Dermal ECM ^{12,13}	Tissue repair and reinforcement
Permanent Synthetic Mesh	Synthetic Polymers - PP, PE, ePTFE, etc. ^{14,15}	Reinforcement (permanent) ^{14,15}
Resorbable Synthetic Mesh	Resorbable Synthetic Polymers - PGA, P4HB, TMC, etc. ^{14,15}	Reinforcement (transient) ^{16,17}

ctional ECM for Hernia Repair

Reason for Secondary Protein Known to Aid Tissue Repair?	Components Known to Modulate Tissue Inflammation?	Shown To Recruit Stem Cells?	Support Cell Infiltration and Proliferation*
Yes ^{3*}	Yes ^{9*}	Yes ^{10*}	Yes (~4 weeks) ¹¹
Yes ¹³	No ¹³	No ¹³	Yes (~12 weeks) ¹¹
No ^{14,15}	No ^{14,15}	No ^{14,15}	No ¹¹
No ¹⁶	No ¹⁶	No ¹⁶	No ¹¹

*Preclinical test results may not necessarily be indicative of human clinical performance

THE REMODELING DIFFERENCE



In-Vivo Evidence – Non-Human Primate Model*

	B	C	
HUMAN FASCIAL SYSTEM FUNCTIONAL ORGANIZED TISSUE	OVI 12 WEEKS	TEX 24 WEEKS	
Functional organized collagen has a wave like appearance (A) ¹⁸	OviTex promoted the formation of organized layered functional host collagen at early timepoints (B) ^{11*}		
	Functional collagen replaced to native tissue (C) ^{11*}	the OFM with thickness equivalent	
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*Animal test results may not always accurately predict the clinical performance or response in humans.

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COMPLEX ABDOMINAL WALL REPAIR

OviTex 2S Permanent Lookback on Complex Abdominal Wall Repair at 9 months

Marja Boermeester, Professor of Surgery

Amsterdam, Netherlands

Reason for second surgical intervention – Laparotomy

Reported Patient Demographics & Comorbidities*

– Male, 74 yo, multiple previous hernia repairs with removal of synthetic mesh stacked on top of each other (approx. 7 times).



What I'm seeing after only 9 months is a very thick, strong layer of new collagen-type material, like a new fascia, surrounding the suturing network, replacing the cells of the inserted Ovitex mesh. This is a very nice building block.



-Marja Boermeester, Professor of Surgery**







I'm seeing a very nice, thick collagen layer at the site of the Ovitex mesh implanted 12 months ago to reinforce the lower reinsertion of the ruptured lateral muscle complex. Our operation was to repair a midline hernia after open abdomen treatment.

-Marja Boermeester, Professor of Surgery**

OviTex 2S Permanent Lookback on Complex Abdominal Wall Repair at 12 months

Marja Boermeester, Professor of Surgery Amsterdam, Netherlands

Reason for second surgical intervention – Laparotomy

Reported Patient Demographics & Comorbidities*

 Female, 25 yo, previous trauma injury with rupture of left lateral abdominal wall muscles; left repositioned with bone anchors and reinforced with synthetic mesh.

OviTex 1S Permanent Lookback on Complex Abdominal Wall Repair at 9 months

Marja Boermeester, Professor of Surgery

Amsterdam, Netherlands

Reason for second surgical intervention – Laparotomy

Reported Patient Demographics & Comorbidities*

– Male, 64 yo, open abdomen treatment after perforated diverticulitis.

What I'm seeing is a thick fascia at the site where OviTex 1S was implanted.

-Marja Boermeester, Professor of Surgery**

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INCISIONAL/VENTRAL HERNIA REPAIR



OviTex 1S Permanent Lookback on Incisional Hernia Repair at 7 months

George DeNoto, III, MD, FACS

New York, United States

Reason for second surgical intervention – Sigmoidectomy for diverticulitis

Reported Patient Demographics & Comorbidities*

– History of hysterectomy, four previous recurrent incisional hernia repairs, and removal of an infected intraperitoneal synthetic mesh.

What I'm observing is impressive cell growth and new blood vessel formation, with minimal inflammation, and the polymer is surrounded by abundant cellular activity.



-George DeNoto, III, MD, FACS**



HISTOLOGY

1.mm



OviTex 1S Permanent Lookback on Robotic Incisional Hernia Repair at 7 months

Michael Keller, MD, FACS, FASCRS

Texas, United States

Reason for second surgical intervention

Unrelated incisional hernia

Reported Patient Demographics & Comorbidities*

- History of Crohn's disease, 2 previous hernia repairs, right colectomy, ostomy placement and reversal, and fistulotomy.



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What I'm seeing is fully remodeled, functional tissue -critical for achieving positive long-term outcomes for my patients. \mathbf{y}

-Michael Keller, MD, FACS, FASCRS**



I've observed how OviTex remodels into tissue that closely resembles native fascia—not just in structure, but in function. Its ability to integrate, vascularize, and provide durable, fascia-like support is truly remarkable.

-Michael Keller, MD, FACS, FASCRS**

OviTex 1S Permanent Lookback on Robotic Ventral Hernia Repair at 15 months

Michael Keller, MD, FACS, FASCRS Texas, United States

Reason for second surgical intervention

- Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*

– History of crohn's disease and incisional hernia.

C I observed that the OviTex was fully integrated and remodeled, resembling tissue in both appearance and texture.

-Paul Szotek, MD, MBA, FACS**

OviTex LPR Permanent

Lookback on Incisional Hernia Repair at 12 months

Paul Szotek, MD, MBA, FACS

Indiana, United States

Reason for second surgical intervention - Unrelated incisional hernia

Reported Patient Demographics & Comorbidities*

– BMI of 39, history of midline hernia repair with strangulated small intestine, and hyperlipidemia.





HISTOLOGY



NEOVASCULARIZATION (*) AND POLYPROPYLENE SUTURE (+) WAVY, UNDULATING, TENDINOUS FASCIA LIKE CONNECTIVE TISSUE (ARROW)

OviTex 1S Permanent Lookback on Incisional Hernia Repair at 12 months

Marja Boermeester, Professor of Surgery Amsterdam, Netherlands

Reason for second surgical intervention

- Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*

- Female, 45 yo.

"

What I'm seeing is a remarkably matured and thick layer of collagen on the inside of the iliac bone 12 months after placing OviTex 1S Permanent intraabdominally curved lateral and posterior for a lower lateral abdominal wall repair.

-Marja Boermeester, Professor of Surgery**







INGUINAL HERNIA REPAIR

OviTex Core Permanent Lookback on Robotic Inguinal Hernia Repair at 7 months

Paul Szotek, MD, MBA, FACS Indiana, United States

Reason for second surgical intervention

- Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*

– Healthy with a low BMI.

OviTex was completely transformed into a mature, fully functional, and well-vascularized tissue. -Paul Szotek, MD, MBA, FACS**





OviTex Core Permanent Lookback on Robotic Inguinal Hernia Repair at 12 months

Scott Golembeski, MD Colorado, United States

Reason for second surgical intervention

- Unrelated new hernia occurrence

Reported Patient Demographics & Comorbidities*

- 65 yo with hypertension and pre-diabetes.



I've observed that OviTex produces tissue that looks and feels more natural, with significantly less contraction compared to other synthetic mesh products. My patients show faster recovery, reporting less postoperative pain and fewer complaints than with the permanent synthetic meshes I used before. 77



-Scott Golembeski, MD**





I've been impressed with how OviTex integrates into the body, remodeling into tissue that looks and feels remarkably fascia-like. This unique characteristic gives me confidence in the strength and durability of the repair, offering my patients a more natural and reliable solution.

-Paul Szotek, MD, MBA, FACS**

OviTex Core Permanent Lookback on Robotic Inguinal Hernia Repair at 36 months

Paul Szotek, MD, MBA, FACS Indiana, United States

Reason for second surgical intervention – Acute Appendicitis

Reported Patient Demographics & Comorbidities* – BMI of 27.5, history of gout and kidney stones, with no prior surgical history.



HIATAL HERNIA REPAIR



OviTex 1S Resorbable Lookback on Robotic Hiatal Hernia Repair at 24 months

Srinivasa Gorjala, MD

Georgia, United States

Reason for second surgical intervention

- Bariatric weight loss surgery

Reported Patient Demographics & Comorbidities*

– Obesity, gastroesophageal reflux disease (GERD), and diabetes.

I believe that hiatal hernia repair with a reinforcement material like OviTex is the future of hiatal hernia surgery. Having used various types of hernia meshes, I believe OviTex is the best option for hiatal hernia repair. Its ability to remodel into more natural tissue instills confidence in both my patients and me, reducing the likelihood of recurrence in a procedure often associated with high recurrence rates.

-Srinivisa Gorjala, MD**







PARASTOMAL HERNIA REPAIR



OviTex 2S Permanent Lookback on Robotic Parastomal Hernia Repair at 24 months

Bryan Payne, DO

North Carolina, United States

Reason for second surgical intervention

Unrelated complication from urology procedure

Reported Patient Demographics & Comorbidities*

- Patient had a stroke and is bed bound.



At 24 months post-repair, the parastomal hernia repaired with OviTex 2S Permanent demonstrated remarkable integration. The material appeared fully vascularized, blending seamlessly with the surrounding tissue and resembling the strength and durability of native fascia.



-Bryan Payne, DO**



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*Patient demographics and comorbidity information were provided by each respective surgeon.

**The following surgeons are paid consultants of TELA BIO: Marja Boermeester, George DeNoto, Paul Szotek, Scott Golembeski, Srinivisa Gorjala, and Bryan Payne. The opinions of Marja Boermeester, George DeNoto, Paul Szotek, Scott Golembeski, Srinivisa Gorjala, and Bryan Payne are those of the surgeons and not necessarily those of TELA BIO. Individual results may vary.

Indications and Important Safety Information: Indications and Important Safety Information: OviTex Reinforced Tissue Matrix is intended for use as a surgical mesh to reinforce and/or repair soft tissue where weakness exists. Indications for use include the repair of hernias and/or abdominal wall defects that require the use of reinforcing or bridging material to obtain the desired surgical outcome. OviTex IHR is intended for use as a surgical mesh to reinforce and/or repair soft tissue where weakness exists. Indications for use include the repair of inguinal hernias that require the use of reinforcing material to obtain the desired surgical outcome.

Caution: Federal (US) law restricts this device to sale by or on order of a physician. Do not use OviTex in patients known to be sensitive to materials of ovine (sheep) origin. Use of OviTex in this patient population may result in an allergic or immunological reaction. The following adverse events have been reported for surgical repair of hernias (with or without a surgical mesh): pain, infection, dysphagia, hernia recurrence, dehiscence, abscess, adhesion, bowel obstruction, bleeding, fistula, seroma, perforation, mesh migration, and mesh contraction. For additional important safety information, please see the OviTex Instructions for Use. Healthcare professionals must use their own clinical judgment in evaluating appropriate treatment options for a particular patient. Treatment of a specific patient should be based on individual needs and the medical care deemed necessary by the patient's treating physician and institutional protocols. Always refer to the package insert, product label, and/ or instructions for use before using any TELA Bio product. Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your TELA Bio products.

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To learn more about OviTex RTM, call

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