

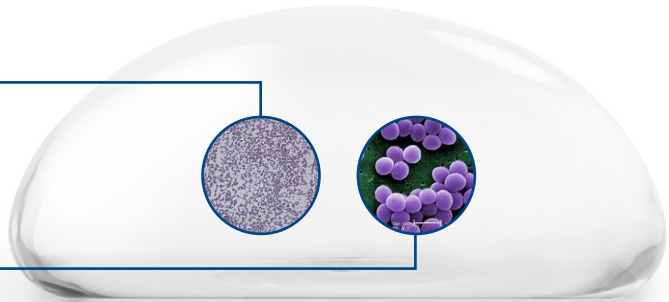
You Can't Tell the Difference but Bacteria Can



Latest studies show for Smooth Breast Implants there is a significant correlation between bacteria contamination and increasing levels of capsular contracture¹

Staphylococcus epidermidis is the primary cause of capsular contracture³

Staphylococcus Aureus is one of the most common causes of infections³

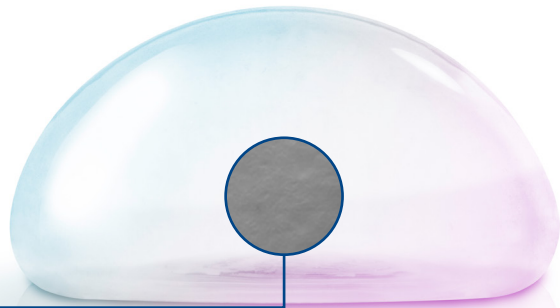


Not all Smooth Implants are the Same!*



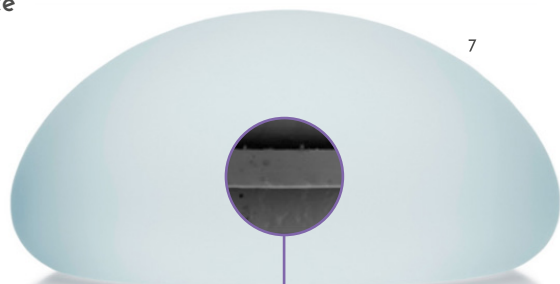
Mentor® MemoryGel™ Xtra

- Grows less bacteria^{1**}
- Low surface area and roughness^{1**}
- 1% Malposition at 10 years^{¥5}
- Lowest associated risk of Staphylococcus epidermidis^{2**}
- Automated shell manufacturing process



Motiva Implants® SilkSurface™

- Grows more bacteria than Mentor® Smooth¹
- 5.6% Malposition at 1 year⁶
- No Long Term Published Evidence
- Manual shell dipping



¥ Kaplan-Meier estimated risk of first occurrence. MemoryGel™ Core Studies

* Bacteria studied includes: S. Epidermidis, S. Aureus, P. Aeruginosa, R. Pickettii. As compared to Silimed Polyurethane, Eurosilicone™ Textured, Allergan® Biocell®, Nagor™ Nagotex®, Polytech POLYtxt®, Mentor® Siltex™, Motiva Implants® VelvetSurface™, Motiva Implants® SilkSurface®, Allergan® Smooth, Sientra® Smooth, Mentor® Smooth.

** As compared to Silimed Polyurethane, Eurosilicone™ Textured, Allergan® Biocell®, Nagor™ Nagotex®, Polytech POLYtxt®, Mentor® Siltex™, Motiva Implants® VelvetSurface™, Motiva Implants® SilkSurface®, Sientra® Smooth, Mentor® Smooth.

You Can Trust Mentor[®], Can you Trust Other Competitors?



Mentor is Proven and Trusted through:

10 *Years*
LOWEST KEY
COMPLICATIONS⁵

Lowest Key Complications at 10 Years⁵

MRI
DIAGNOSED
RUPTURE

OVER
1,000
PATIENTS

Over 1,000 Patients Core, Level 2,
Multi Centre Unbiased Study

5.2%

CAPSULAR
CONTRACTURE
RATE AT

10 *Years*

5.2% Capsular Contracture Rate at 10 years in 614 Smooth Submuscular Primary Breast Augmentation Patients

References

1. Jones P, et al. The Functional Influence of Breast Implant Outer Shell Morphology on Bacterial Attachment and Growth. *Plast. Reconstr. Surg.* 142: 837, 2018.
2. Agnello, M, et al. Association of Microbial Growth on Silicone Breast Implants with Capsular Contracture: A Systematic Review. *Journal of Aesthetic & Reconstruction Surgery.* ISSN 2472-1905, 2015. Jones P, et al. The Functional Influence of Breast Implant Outer Shell Morphology on Bacterial Attachment and Growth. *Plast. Reconstr. Surg.* 142: 837, 2018.
3. Tony Y.C, Steven, et al. *Staphylococcus aureus* Infections: Epidemiology, Pathophysiology, Clinical Manifestations, and Management. American Society for Microbiology. 2015; 10.1128/CMR.00134-14.
4. Mentor Worldwide LLC. MemoryGel™ Clinical Study Final Report, April 2013
5. Summary of the Safety and Effectiveness of MENTOR[®] MemoryGel™ Silicone Gel-Filled Implants in Patients who are Undergoing Primary Breast Augmentation, Primary Breast Reconstruction, or Revision. 10-Year Core Gel Final Clinical Study Report. April 2013.
6. Huemer G, et al. Motiva Ergonomix Round SilkSurface Silicone Breast Implants: Outcome Analysis of 100 Primary Breast Augmentations over 3 Years and Technical Considerations. *Plast. Reconstr. Surg.* 141:831e, 2018.
7. Atlan M, et al. Breast Implant Surface Texture Impacts Host Tissue Response. *Journal of the Mechanical Behavior of Biomedical Materials*, 88: 377-388, 2018.

Important Safety Information: MENTOR[®] MemoryGel™ Breast Implants are indicated for breast augmentation, in women who are at least 18 years old, or for breast reconstruction. Breast implant surgery should not be performed in those women with active infection anywhere in their body, those with existing cancer or pre-cancer of their breast(s), those who have not received adequate treatment for these conditions or those who are pregnant or nursing. There are risks associated with breast implant surgery. Breast implants are not lifetime devices and breast implantation is not necessarily a one-time surgery. The most common complications with MENTOR[®] MemoryGel™ Breast Implants include re-operation, implant removal, capsular contracture, asymmetry, and breast pain. A lower risk of complication is implant rupture, which is most often silent. The health consequences of a ruptured silicone gel-filled breast implant have not been fully established. Screenings such as mammography, MRI, or ultrasound are recommended after initial implant surgery to assist in detecting implant rupture. Your patient needs to be informed and understand the risks and benefits of breast implants, and she should be provided with an opportunity to consult with you prior to deciding on surgery. For detailed indications, contraindications, warnings and precautions associated with the use of all MENTOR[®] Implantable Devices, please refer to the Product Insert Data Sheet provided with each product, or review the Important Safety Information provided at www.mentorwwllc.eu. The most common complications for breast augmentation with MemoryGel™ Implants include any reoperation, capsular contracture, nipple sensation changes, and implant removal with or without replacement. The most common complications with CPG™ Implants for breast augmentation include reoperation for any reason, implant removal with or without replacement, and ptosis. A lower risk of complication is rupture. The health consequences of a ruptured silicone gel breast implant have not been fully established. MRI screenings are recommended three years after initial implant surgery and then every two years after to detect silent rupture.

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