



XABO® Antibiotic-Impregnated Catheters

Extra Protection Against Shunt Infections

Rx only.

INDICATIONS FOR USE: The *XABO* Catheters are used for cerebrospinal fluid (CSF) shunting.

ENVISION THE EXTRAORDINARY™



XABO® Antibiotic-Impregnated Catheters

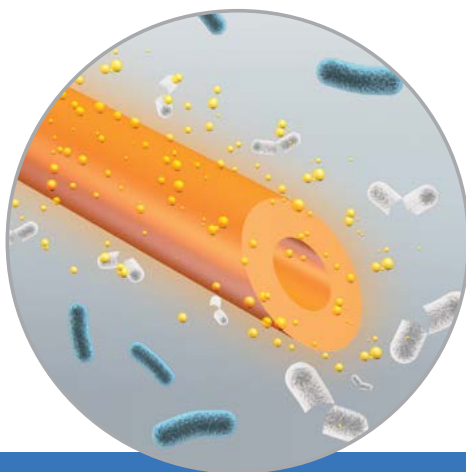
Extra Protection Against Shunt Infections

Infection Control

Implantation of a shunt system consisting of a valve and catheter is the most commonly selected treatment method for hydrocephalus.¹ One of the most common and potentially serious complications of hydrocephalus treatment is an infection of the shunt,² affecting 7-15% of hydrocephalus patients.³ This complication affects pediatric as well as adult patients and impairs their quality of life, cognitive function and shunt survival.⁴ The use of antibiotic-impregnated catheters is associated with a two-thirds reduction in shunt infection rates compared to standard catheters.³

Function

The XABO Antibiotic-Impregnated Catheters are treated with antimicrobial agents during production, allowing them to release antibiotics into the surrounding tissue after implantation.



Top Benefits

➤ 36 Month Shelf Life

The XABO Antibiotic-Impregnated Catheter's unique packaging provides sterility for up to 36 months and enables the catheter to withstand temperatures of up to 86°F without losing its effectiveness.⁵

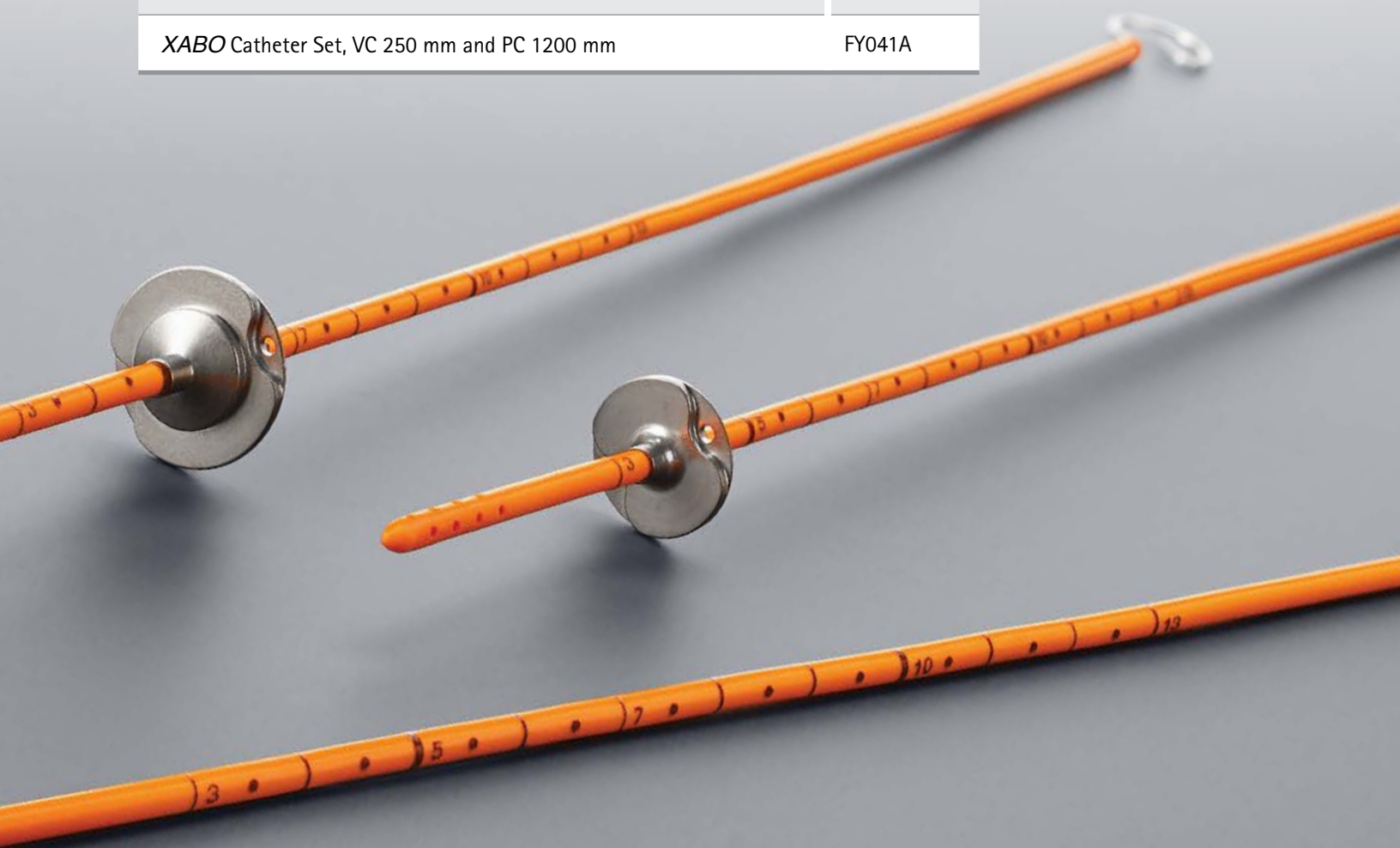
➤ Antibiotic Release for 38 Days


Patients can benefit from the XABO Antibiotic-Impregnated Catheter's optimized release kinetics: the antibiotics are released continuously over a minimum of 38 days after implantation,⁵ ensuring that the catheter's antimicrobial activity covers the time window when the patient is most susceptible to infection.⁶⁻⁹ The high potency of **clindamycin hydrochloride** and **rifampicin** impregnation allows for the release of low antibiotic doses, which may help prevent allergic reactions and may minimize the risk of resistance development.



Ordering Information

Description	Part Number
<i>XABO</i> ® Peritoneal Catheter, 1200 mm	FY012A
<i>XABO</i> Ventricular Catheter, 250 mm	FY021A
<i>XABO</i> Ventricular Catheter, 250 mm with Deflector	FY023A
<i>XABO</i> Ventricular Catheter, 250 mm with Pediatric Deflector	FY025A
<i>XABO</i> Catheter Set, VC 250 mm and PC 1200 mm	FY041A





Through collaborative
excellence we will improve the
quality of a patient's life and
meet the needs of the changing
healthcare environment.

References:

1. Hydrocephalus Association. (2021). What is Hydrocephalus? | Hydrocephalus Association. [www.hydroassoc.org. https://www.hydroassoc.org/about-hydrocephalus/](https://www.hydroassoc.org/about-hydrocephalus/)
2. Okamura Y, Maruyama K, Fukuda S, et al. Detailed standardized protocol to prevent cerebrospinal fluid shunt infection. J Neurosurg 2019;1–5.
3. Fernández-Méndez R, Richards HK, Seeley HM, et al. Current epidemiology of cerebrospinal fluid shunt surgery in the UK and Ireland (2004–2013).
4. Vinchon M, Dhellemmes P. Cerebrospinal fluid shunt infection: risk factors and long-term follow-up. Childs Nerv Syst 2006;22(7):692–97.
5. MIETHKE report. Data on file.
6. Okamura Y, Maruyama K, Fukuda S, et al. Detailed standardized protocol to prevent cerebrospinal fluid shunt infection. J Neurosurg 2019;1–5.
7. Borgbjerg BM, Gjerris F, Albeck MJ, Børgesen SE. Risk of infection after cerebrospinal fluid shunt: an analysis of 884 first-time shunts. Acta Neurochir (Wien). 1995;136(1–2):1–7.
8. George R, Leibrock L, Epstein M. Long-term analysis of cerebrospinal fluid shunt infections. A 25-year experience. J Neurosurg. 1979;51(6):804–811.
9. Wells DL, Allen JM. Ventriculoperitoneal shunt infections in adult patients. AACN Adv Crit Care. 2013;24(1):6–14.

See Instructions for Use for complete indications, including Contraindications, Warnings and Precautions.

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