# Aesculap Neurosurgery GAV<sup>®</sup>



Gravitational valve for the treatment of adult hydrocephalus





#### Alliance for innovations

When two strong partners combine their expertise, innovative and groundbreaking solutions frequently arise that would scarcely have been possible working alone.

Aesculap and Miethke have followed this path and have been cooperating since 1999. The goal was and is to develop better solutions for the difficult treatment of hydrocephalus and to make them available all over the world.

This vision has inspired and motivated everyone involved. An intensive dialogue was initiated with customers, doctors and patients about the problems associated with this complex medical condition. New solutions were developed and discussed in small circles of experts and scientific symposia.

The eventual outcome of this fruitful process was the market introduction of a gravitational unit – which can effectively prevent the overdrainage of cerebrospinal fluid. A unique product worldwide, and a milestone in modern hydrocephalus therapy.

What has already been achieved is only the beginning. For us, it is a duty and a necessity to continue along the path we have begun. In the patients' interest we will carry on our extensive investment into research and development and will not tire of learning more, collecting new insights and remaining open for future developments.

We will continue to venture in new directions and cross frontiers in order to be able to help where no solutions have yet been found.



iscurap, ractinge



Miethke, Potsdam



## **GAV**®

– the valve

The Miethke  $GAV^*$  is a unique gravitational value for the treatment of adult hydrocephalus.

The valve combines the tried and tested ball-in-cone technology with an innovative gravitational unit. This combination makes automatic adjustment of the opening pressure possible according to the position of the patient's body, thus effectively counteracting possible overdrainage.

Conventional differential pressure and programmable valves are passive systems. The opening pressure selected does not adjust to the different ICP situation which arises when the body position alters. As a result, many hydrocephalus patients suffer from side effects ranging from chronic headaches to slit ventricles.

It is precisely here that the strengths of the  $GAV^*$  value lie. By means of the gravitational mechanism, the  $GAV^*$  actively varies its opening pressure as soon as this becomes necessary due to alterations in the patient's body position. As a result, CSF drainage is as physiological as possible.

This also makes the valve particularly well suited for the treatment of NPH patients, as well as for extreme forms of hydrocephalus, such as LOVA (long-standing overt ventriculomegaly in adults)\*.

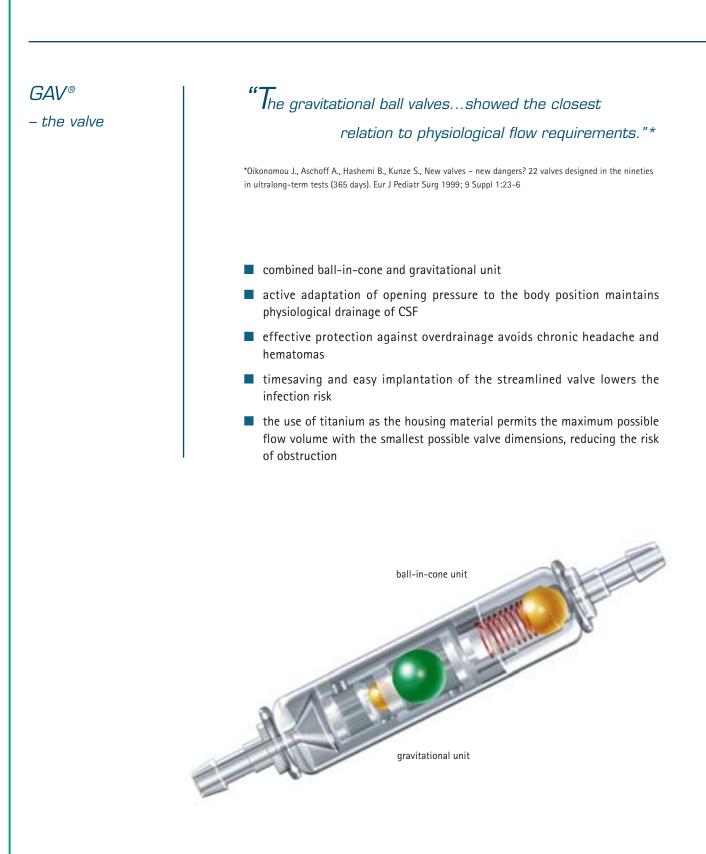
The GAV<sup>\*</sup> valve is made from titanium, a material that guarantees outstanding precision, reliability and biocompatibility. It is MRI compatible and offers effective protection against subcutaneous pressure.

Last but not least, the very slim, streamlined valve design facilitates extremely easy implantation in the retroauricular area.

"Unlike conventional differential pressure shunts, gravitational shunts can be used in the treatment of high-risk patients with longstanding overt ventriculomegaly in adults. Significant risk of overdrainage can be avoided."\*

> \*Source: Kiefer M., Eymann R., Strowitzki M., Steudel W.-I., Gravitational Shunts in Longstanding Overt Ventriculomegaly in Adults. Neurosurgery, Volume 57, Number 1, July 2005





#### Our recommendation:\*\*

Height of patient	Standard valve	
up to 160 cm	5 / 30 cmH <sub>2</sub> 0	
160 – 180 cm	5 / 35 cmH <sub>2</sub> 0	
over 180 cm	5 / 40 cmH <sub>2</sub> 0	

GAV® - our recommendation - your choice

\*\* Recommended settings only; may vary according to patient and medical history.

#### Your choice:

 $GAV^{*}$  is available in different pressure level settings. Each pressure level is specially coded, enabling the valve to be identified on post-operative x-rays.

Opening pressure horizontal/vertical (cmH <sub>2</sub> O)	coding <i>GAV</i> ° on x-ray
5 / 30	
5 / 35	
5 / 40	
10 / 30	
10 / 40	
10 / 50	



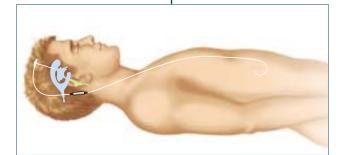


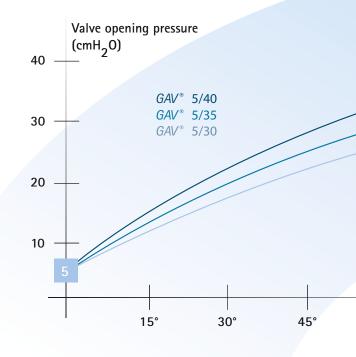
– the functions

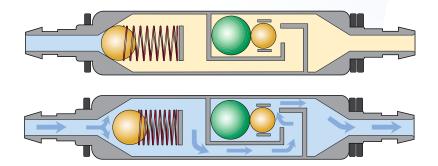
#### Supine Function

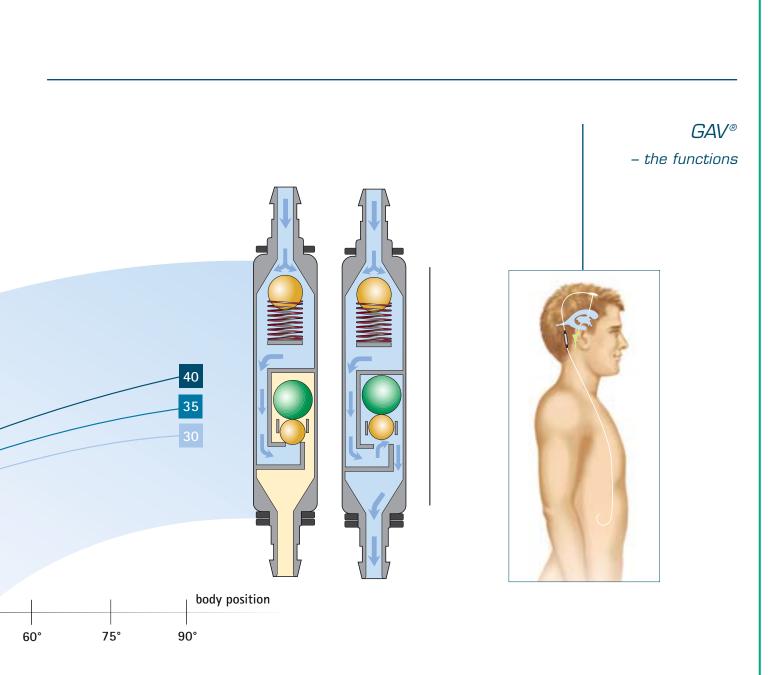
Implantation parallel to the patient's body axis guarantees precise and reliable functionality of the  $GAV^*$  valve.

- $\blacksquare$  When the patient is supine, the *GAV*<sup> $\circ$ </sup> is in a horizontal position.
- The low pressure setting of the ball-in-cone unit keeps the patient's intraventricular pressure within physiological limits
- The freely moving balls in the gravitational unit do not create any additional resistance when the patient is supine, and automatically keep the flow channel open in this position.









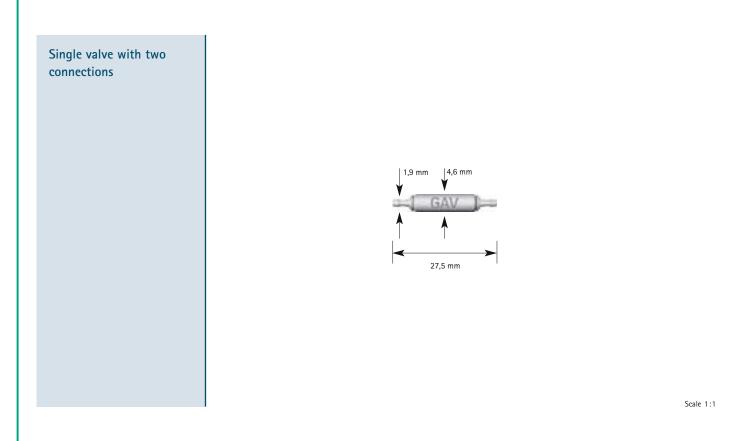
#### Upright Function

When the patient becomes upright, the gravitational unit is activated:

- A higher valve opening pressure is produced, since the opening pressures of both valve mechanisms (ball-in-cone and gravitational unit) must now be overcome.
- This higher valve opening pressure in the upright position effectively prevents overdrainage and guarantees physiological intracranial pressure in this body position too.



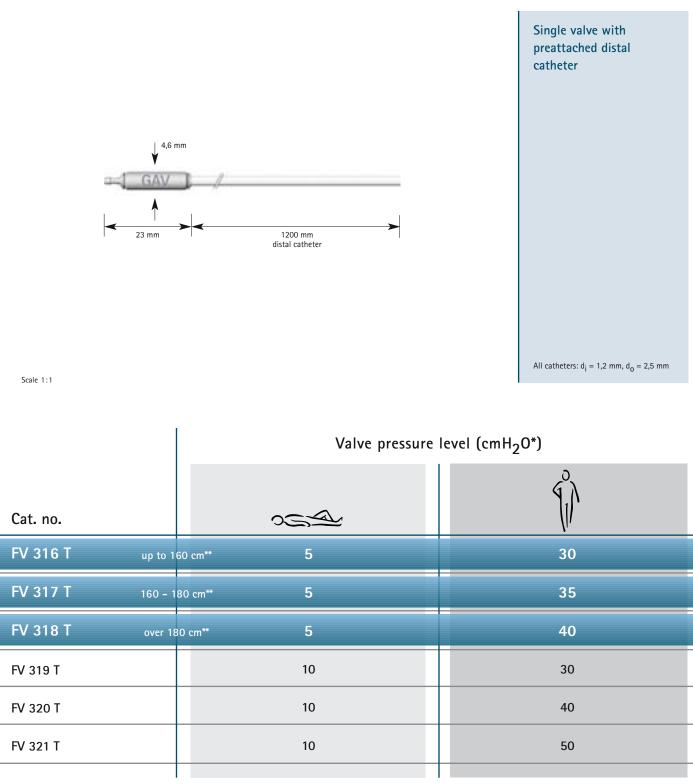
GAV® – the valve



	Valve pressure level (cmH <sub>2</sub> O*)	
Cat. no.	05A	
FV 310 T up to 1	60 cm** <b>5</b>	30
FV 311 T 160 -	80 cm** 5	35
FV 312 T over 1	80 cm** 5	40
FV 313 T	10	30
FV 314 T	10	40
FV 315 T	10	50

**\*\*Standard pressure levels** recommended levels only; may vary according to patient and medical history

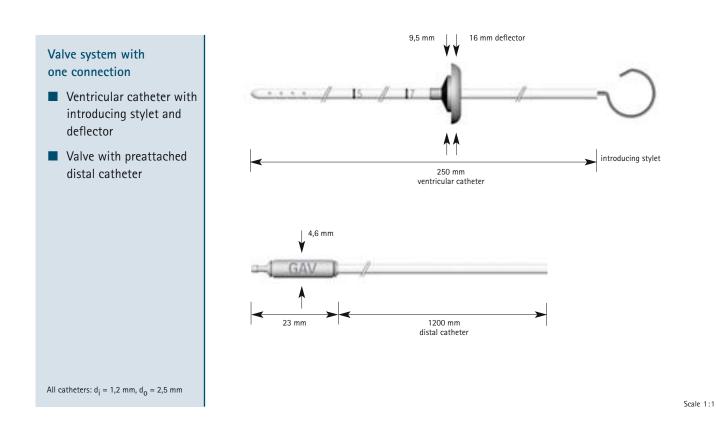
### GAV® with distal catheter



**\*\*Standard pressure levels** recommended levels only; may vary according to patient and medical history

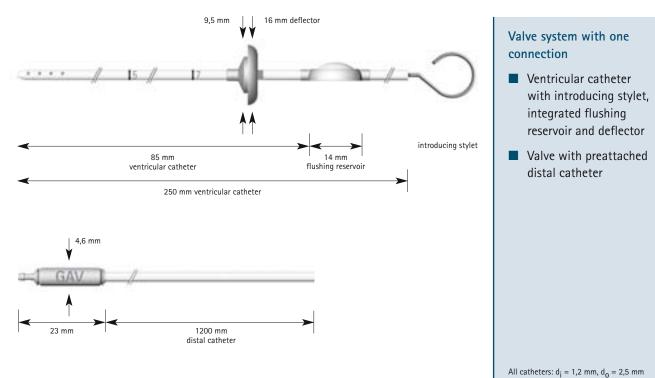


GAV®- system



	Valve pressure level (cmH <sub>2</sub> O*)	
Cat. no.		
FV 322 T up	to 160 cm** <b>5</b>	30
FV 323 T 160	) – 180 cm** <b>5</b>	35
FV 324 T ov	er 180 cm** <b>5</b>	40
FV 325 T	10	30
FV 326 T	10	40
FV 327 T	10	50

**\*\*Standard pressure levels** recommended levels only; may vary according to patient and medical history



### GAV®- system with flushing reservoir

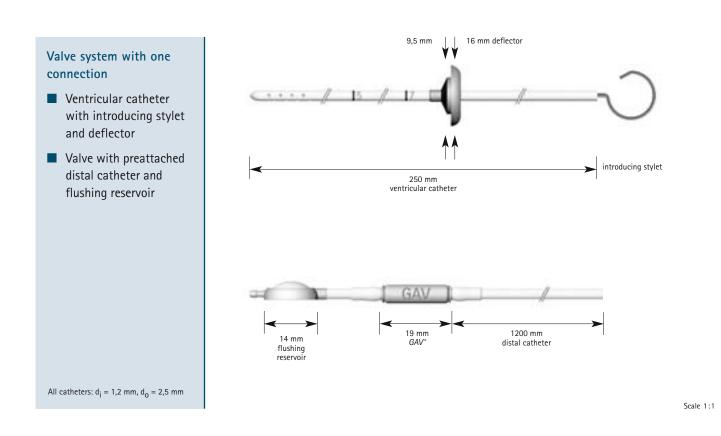
Scale 1:1

		Valve pressure level (cmH <sub>2</sub> O*)	
Cat. no.			J)
FV 328 T	up to 160 cm**	5	30
FV 329 T	160 - 180 cm**	5	35
FV 330 T	over 180 cm**	5	40
FV 331 T		10	30
FV 332 T		10	40
FV 333 T		10	50

**\*\*Standard pressure levels** recommended levels only; may vary according to patient and medical history



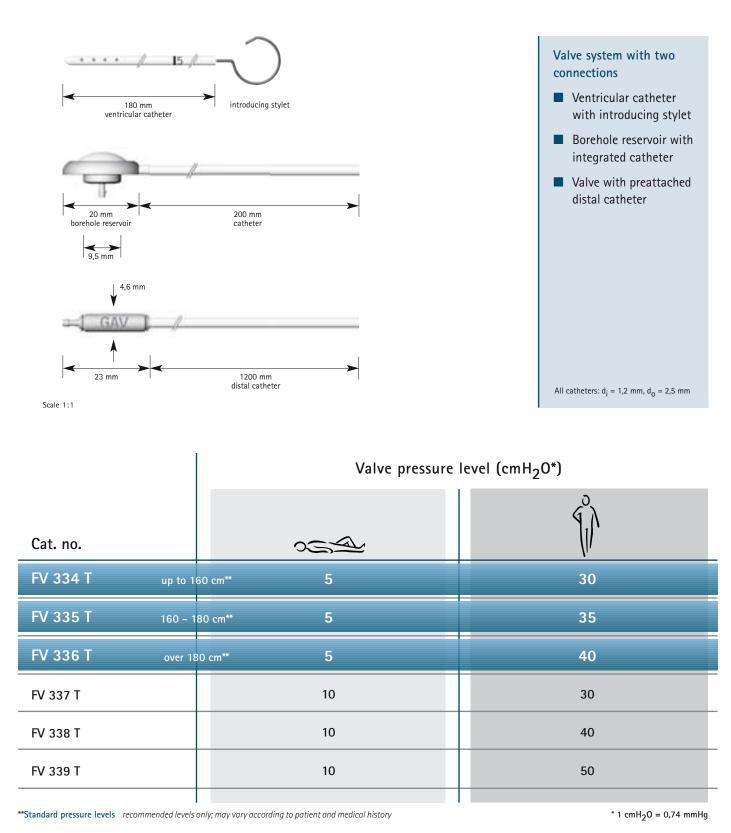
### GAV®- system with flushing reservoir



	Valve pressure level (cmH <sub>2</sub> O*)	
Cat. no.		
FV 340 T up to 1	60 cm** <b>5</b>	30
FV 341 T 160 - 1	80 cm** 5	35
FV 342 T over 18	30 cm** 5	40
FV 343 T	10	30
FV 344 T	10	40
FV 345 T	10	50

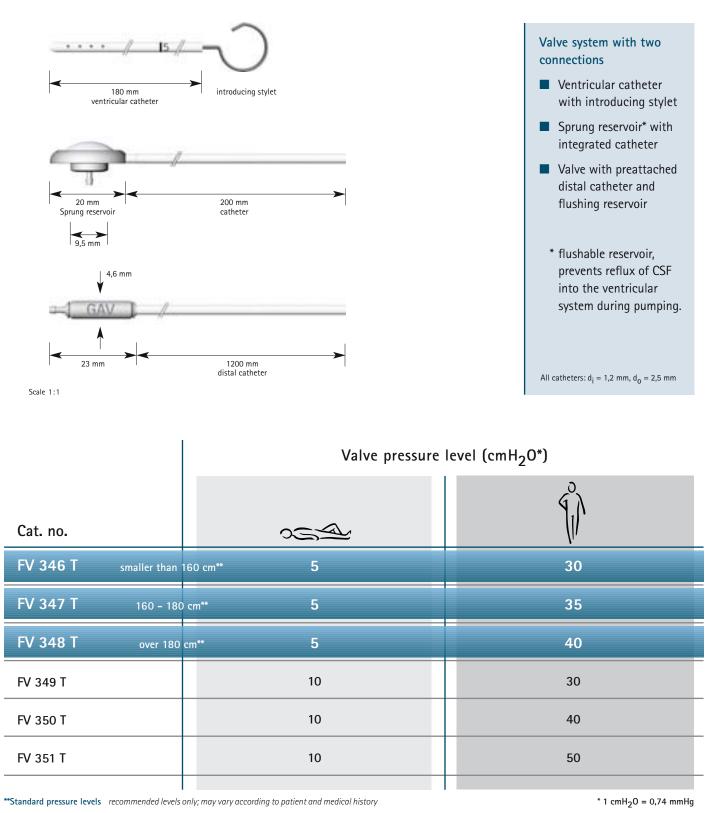
\*\*Standard pressure levels recommended levels only; may vary according to patient and medical history

GAV®- system with borehole reservoir



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GAV®- system with Sprung reservoir\*



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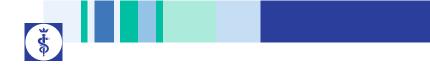




# Aesculap Neurosurgery

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- Programmable ball-in-cone valve with opening pressure range 0–200 mmH<sub>2</sub>O
- Integral "ShuntAssistant" for effective protection against overdrainage
- "Active Lock" mechanism prevents accidental readjustment during MRI at 3 Tesla
- No x-rays necessary to identify the pressure level set
- Handy instruments for easy reading and programming of the pressure level
- High precision titanium valve technology



# **AESCULAP**<sup>®</sup>

Manufacturer acc. 93/42/EWG

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