

PUBLICATION INFORMATION

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MANUFACTURING DISCLOSURE: Apyx Medical manufactures and owns the J-Plasma technology discussed in this article.

INDICATIONS FOR USE & INTENDED USE DISCLOSURES

- The Renuvion Precise, Precise Open, and J-Plasma Handpieces are intended to be used with compatible electrosurgical generators for the delivery of radiofrequency energy and/or helium plasma for cutting, coagulation, and ablation of soft tissue during open surgical procedures.
- Apyx Medical wants to present you with current scientific discourse. Specific usage outside of the cleared indications may not be safe or effective.
- The use of the terms “skin cancer treatment” in relation to the use of the J-Plasma/Renuvion technology has not been approved or cleared by the FDA.

RISKS:

- Risk associated with the use of the device may include: Helium embolism into the surgical site due to inadvertent introduction into the venous or arterial blood supply system, unintended burns (deep or superficial), pneumothorax, temporary or permanent nerve injury, ischemia, fibrosis, infection, pain, discomfort, gas buildup resulting in temporary and transient crepitus or pain, bleeding, hematoma, seroma, subcutaneous induration, pigmentation changes, increased healing time, and/or unsatisfactory scarring. There may be additional risks associated with the use of other devices along with Renuvion/J-Plasma and there may be an increased risk for patients who have undergone prior surgical or aesthetic procedures in the treatment area.

As with any procedure, individual results may vary. As with all energy devices there are inherent risks associated with its use, refer to the IFU for further information.

The Use of Cold Atmospheric Plasma Device in Flap Elevation

Massimo Pinelli, MD; Marta Starnoni, MD; Giorgio De Santis, MD

Dear Sir,

We have found a lot of interest in the use of a cold atmospheric plasma device (Renuvion/J-Plasma; Apyx Medical, Clearwater, Fla.). This surgical instrument can be used for both therapeutic and cosmetic applications. It has been used in different fields (from general to gynecology surgery) for open and laparoscopic cases.¹ In plastic/cosmetic surgery, radio frequency helium plasma has been shown to be very effective for skin rejuvenation and skin tightening and also for rhinophyma reduction and skin cancer treatment.²

We have focused our attention on the use of J-Plasma in flap elevation. In fact, in an attempt to improve and enhance surgical techniques and patient care, the use of surgical instruments different from traditional electro-surgery for flap elevation is widely described in the literature. For example, the use of harmonic scalpel has been reported in the latissimus dorsi, deep inferior epigastric perforator, and fibula flap harvest.³⁻⁵

The technical advantages of J-Plasma when compared with conventional electro-surgical devices include minimal lateral and depth of thermal spread, a high level of precision, and less smoke, odor, and eschar. Moreover, the ability to provide consistent power across a wide range of tissue impedances makes it effective on many tissue types.²

We have experienced this surgical instrument for the dissection of osteoseptocutaneous flaps (12 cases of fibula free flap), fasciocutaneous flaps (10 cases of radial free forearm flap) (Fig. 1), and musculocutaneous flaps (15 cases of latissimus dorsi flap) without any observed complications. The setting of the instrument used was different in fibula free flap (J-Plasma mode, at 4-L flow and 30% power), radial free forearm flap (J-Plasma mode, at 3-L flow and 20% power), and latissimus dorsi flap (J-Plasma mode, at 4-L and 50% power) harvest.

We would like to share our experience in the attempt to facilitate the setting of this instrument for plastic surgeons interested in its use in flap elevation.

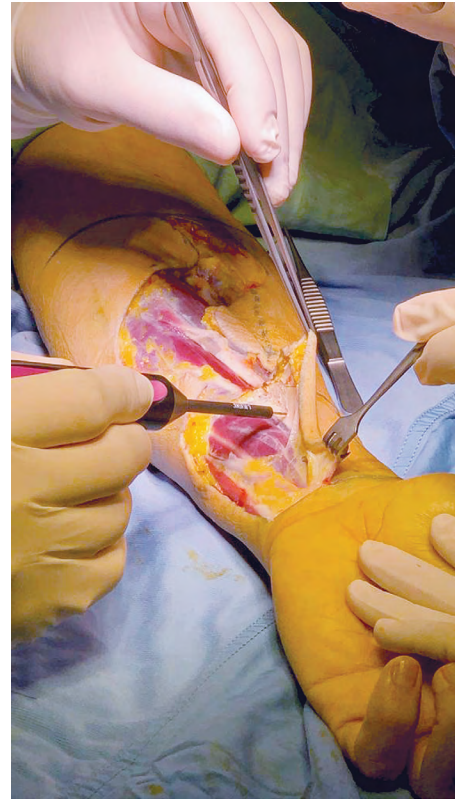


Fig. 1. Use of cold atmospheric plasma device in radial-free forearm flap elevation.

In our experience, we have observed significant differences between the use of the J-Plasma cool helium plasma and the traditional monopolar electro-surgery in flap elevation such as simultaneous tissue dissection and hemostasis, the absence of muscle contraction, the absence of fat necrosis without oil formation and tissue burn during dissection, and surgeons' reduced fear of unintended tissue trauma.

Our limited use in few cases, coupled with good outcomes, has allowed us to continue with the use of this surgical device moving forward. In our opinion, this instrumental device can be very useful in plastic surgery not only for skin tightening but also for pedicle and free flap elevation utilizing the proper settings.

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DISCLOSURE

The authors have no financial interest to declare in relation to the content of this article.

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