Histoacryl®
Topical Skin Adhesive

FDA approved Histoacryl® topical skin adhesive is the proven choice for wound closure with over 40 years of clinical experience and more than 1000 articles in clinical publication worldwide.

Histoacryl® consists of n-Butyl-2 Cyanoacrylate. This sterile liquid topical skin adhesive is available in two formulations: Histoacryl® and Histoacryl® Blue. Histoacryl® is translucent and Histoacryl® Blue contains a blue dye in order to make it easier to see the adhesive being applied.

Why Choose Histoacryl®?

Seals Wounds Quickly
Histoacryl® polymerizes in seconds and has been proven to be as effective as sutures in closing many types of surgical incisions and lacerations.

Forms a Strong Bond
Histoacryl® has twice the bond strength as compared to other legally marketed skin adhesives. Only one layer of adhesive is necessary to achieve a full strength bond, saving both time and adhesive.

Inhibits the Growth of Bacteria
Histoacryl® inhibits the growth of bacteria as long as the adhesive film remains intact. Histoacryl’s® ability to inhibit bacteria growth has been demonstrated by in-vitro and in-vivo studies.

Provides a Precise, Controlled Application
Histoacryl® utilizes a non-clogging ampoule that provides a precise application with every use. Histoacryl® may be applied as minute drops or as a thin film along the edges of the wound.

More Cost Effective than Other Skin Adhesives
Histoacryl® polymerizes when exposed to water or water-containing substances such as human tissue. Histoacryl® will not clog or dry out when opened, unlike other legally marketed skin adhesives that polymerize when opened and cause the ampoule to clog. Less product is discarded and one ampoule is often all that is needed for an entire procedure.

Patient Advantages
Patients no longer have to endure injections, restrictive dressings, and the painful process of suture removal. When the wound is healed, Histoacryl® sloughs off naturally. An additional visit for suture removal is not required. Patients may shower or bathe but allow only transient wetting of the treatment site.
Application Instructions

How To Open

- Pull apart foil pouch to expose the sterile, single patient use ampoule.
- Hold ampoule with the tip pointing upward.
- Sharply flick the tip to remove any excess adhesive trapped in the tip.
- Twist off cap at the tip of ampoule to open. To increase the volume of adhesive being applied, cut tip down closer to base of ampoule.

Preparation of Wound

- Clean and dry wound prior to application.
- Debride wound and remove excessive blood when necessary.
- Tissue edges should be approximated and maintained in apposition during application. Use optional non-stick forceps to help approximate wound edges.

Application of Histoacryl®

- Apply light pressure to the ampoule to express Histoacryl® from the tip.
- Do not apply Histoacryl® directly into the wound as it impairs healing.
- Apply Histoacryl® very sparingly, either as minute drops or as a very thin film along the edges of the wound.

Polymerization Process

- Light pressure should be applied to the wound edges for approximately 30 seconds to allow for the skin adhesive to cure.
- Wounds under tension can be secured by subcuticular sutures prior to the application on the adhesive.

Storage

Histoacryl® can be stored at ambient conditions (72°F/22°C). Do not expose Histoacryl® to elevated temperatures (i.e., 104-140°F, 40-60°C) for more than eight hours. Histoacryl® is packaged sterile for single patient use.

Histoacryl®

Ordering Information

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Description</th>
<th>Packaging</th>
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<tbody>
<tr>
<td>TS1050071FP</td>
<td>Histoacryl® Clear Topical Skin Adhesive</td>
<td>10 / 0.5mL ampoules per box</td>
</tr>
<tr>
<td>TS1050044FP</td>
<td>Histoacryl® Blue Topical Skin Adhesive</td>
<td>10 / 0.5mL ampoules per box</td>
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</tbody>
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Tensile strength of Histoacryl®

![Bar graph showing tensile strength comparison between Histoacryl® and 2-Octyl Cyanoacrylate.](image)

Comparative testing in accordance with ASTM F 2458-05, unpublished data.