

Ambu® AuraGain™

## PROVEN PERFORMANCE IN REAL-WORLD PRACTICE

### CLINICAL EXCELLENCE IN AIRWAY MANAGEMENT: ALIGNING WITH THE NEW DAS FRAMEWORK

The Difficult Airway Society (DAS) has, for the first time, differentiated between cuffed and cuffless second-generation supraglottic airway devices (SADs) in its [DAS updated guidelines](#). DAS recommends second-generation SADs over first-generation devices, noting that cuffed designs generally achieve higher oropharyngeal leak pressures (OLP) (Strength of the airway seal), and allow cuff pressure adjustment, which can optimize airway seals.

Insertion success and insertion time are comparable across device types. DAS recommends second-generation SADs over first-generation devices and notes that cuffed designs generally achieve higher oropharyngeal leak pressures (OLP) – reflecting a stronger airway seal – while also allowing cuff pressure adjustment to help optimize seal performance. To support these recommendations, several recent studies have evaluated the [Ambu® AuraGain™ laryngeal mask](#) in adult, pediatric, laparoscopic, and positional airway scenarios. These studies demonstrate its reliability, efficiency, and safety in real-world clinical practice.

### PROVEN PERFORMANCE WITH HIGH OROPHARYNGEAL LEAK PRESSURE (OLP)

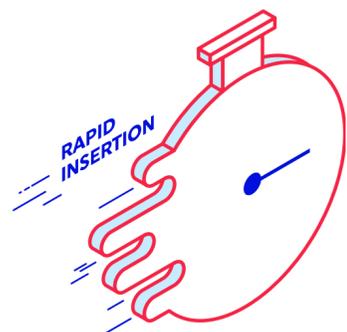
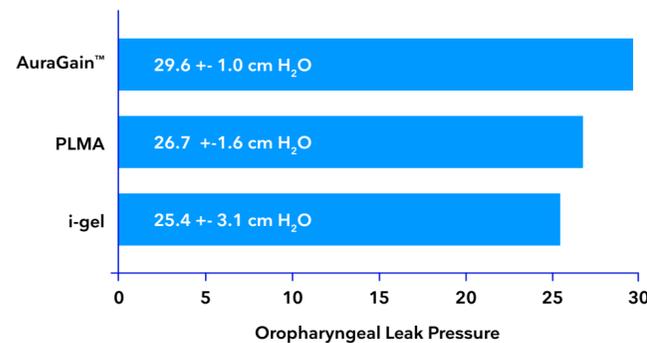
AuraGain™ performed better than ProSeal LMA and i-gel across different head and neck positions, especially when the neck was extended. It achieved an OLP of **29.6 ± 1.0 cm H<sub>2</sub>O**, compared with 26.7 ± 1.6 for ProSeal LMA and 25.4 ± 3.1 for i-gel. A higher OLP improves ventilation efficiency, may reduce aspiration risk, and ensures a reliable airway during procedures involving neck movement.

[Neha et al. \(2024\)<sup>1</sup>](#)

### MULTICENTER CLINICAL RESULTS

In a study of 250 adult patients at five Spanish hospitals, AuraGain™ performed reliably during routine anesthesia. The device achieved a median leak pressure of 32 cm H<sub>2</sub>O, 85% first-attempt insertion success, a 15-second median insertion time, 97.2% effective ventilation, 99.6% gastric tube insertion success, and a low complication rate.

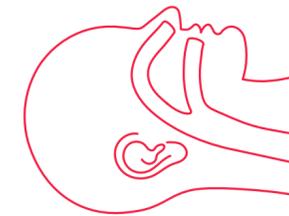
[Zaballos M et al. \(2021\)<sup>2</sup>](#)



**32 cm H<sub>2</sub>O**  
Median OLP



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### LAPAROSCOPIC AIRWAY MANAGEMENT

During a laparoscopic surgery, AuraGain created a stronger seal in the airway than i-gel and LMA Supreme, keeping the airway secure even when pressure inside the abdomen was high. It also needed fewer attempts to insert, kept patients' vital signs stable, and led to consistent recovery results for both men and women. AuraGain helps ensure safe and effective breathing during surgeries where maintaining the airway is very important.

[Prashant et al. \(2024\)<sup>3</sup>](#)

### PEDIATRIC AIRWAY MANAGEMENT

In children undergoing anesthesia, AuraGain was easier to insert and needed fewer adjustments than i-gel. It kept vital signs stable, worked just as safely after surgery, and has a design that makes managing the airway easier for clinicians.

[Grewal TK et al. \(2023\)<sup>4</sup>](#)

### CONCLUSION

By aligning with the DAS preference for cuffed second-generation devices that allow for seal optimization, the Ambu® AuraGain™ provides clinicians with a safe, efficient, and guideline-supported solution for both routine and challenging airway management.



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