



o v e s c o  
innovation in scope



# RESECT+ .....

Optimised endoscopic resection techniques



RESECT+ is an instrument line consisting of optimised instruments for ESD+, EMR+ and other endoscopic resection techniques. They are also suitable for haemostasis and POEM, and facilitate clip removal. An appropriate product is thus available for every phase of endoscopic resection.

## RESECT+

### Optimised endoscopic resection techniques

RESECT+ provides products for every phase of ESD+ and EMR+.

#### Multi-modality

- Combination of classic dissection using HF knives with the option of blunt dissection using the Coag Dissector

#### Efficiency

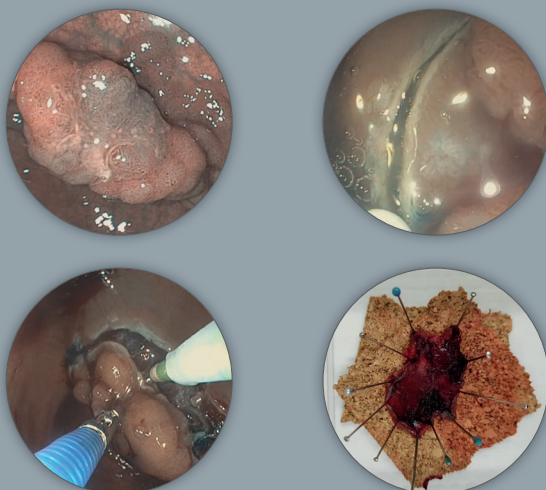
- Reduced procedure time due to fewer instrument changes
- Easy and fast performance of EMR and ESD
- Efficient resection of large en-bloc specimens

#### Safety

- Flushing of the target tissue for better overview and fast identification of bleeding
- Submucosal re-injection without instrument exchange
- Stable and high injection cushion for safe performance of the endoscopic resection
- Blunt spreading and preparation with the Coag Dissector facilitates keeping the dissection plane

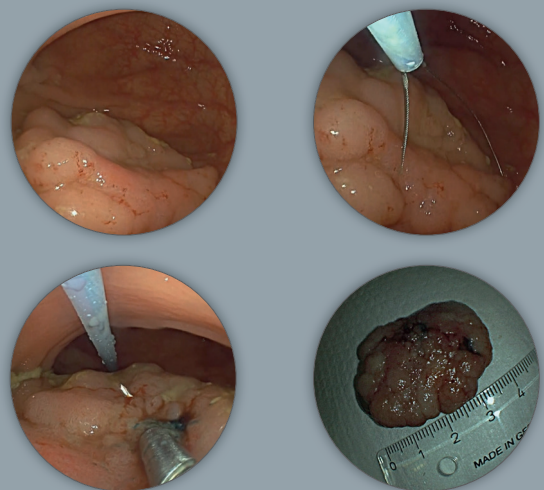
## Application

### ESD+ in the rectum



ESD+ of a rectal polyp with grasper and AqaNife using the Additional Working Channel (AWC)<sup>1</sup>

### EMR+ in the colon



EMR+ in the colon with OTSC<sup>®</sup> Anchor and snare using the Additional Working Channel (AWC)<sup>1</sup>

The AWC® (Additional Working Channel) is an endoscopic system that provides an additional working channel for flexible endoscopes.

**The AWC® is suitable for various procedures:**

- EMR with snare and FTRD® Grasper or OTSC® Anchor (EMR+)
- ESD with grasper and knife (ESD+)
- Clip removal with additional grasper

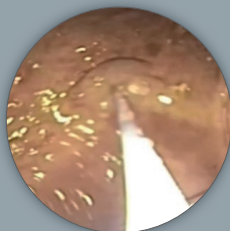
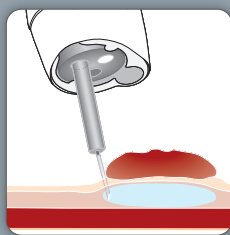
**AWC® features:**

- Easy transformation of a single-channel endoscope into a double-channel functionality
- Distance between the working channels individually adjustable and greater than with a double-channel endoscope
- Bimanual working with triangulation
- Enables effective resection
- Additional lumen for suction or flushing
- For gastroscopes and colonoscopes

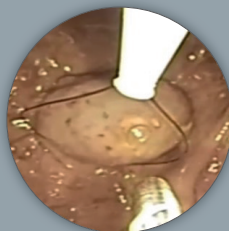
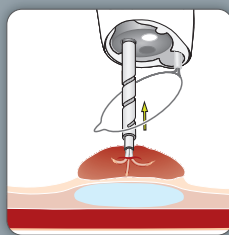


## ..... Application

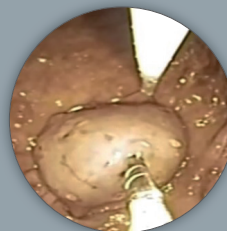
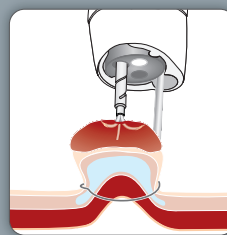
### EMR+



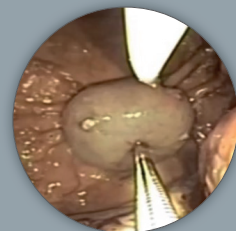
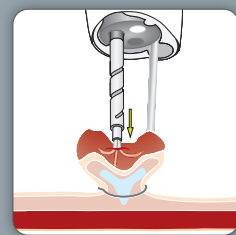
Injection of LiftUp®



Positioning of snare and OTSC® Anchor or FTRD® Grasper



Elevation of the lesion and snare closure



Push-back<sup>2</sup> of OTSC® Anchor or FTRD® Grasper while snare stays closed and subsequent resection<sup>3</sup>

2 Note: Anchor needles must not be captured with the snare during the push-back move. If in doubt, the Anchor can be closed to avoid a short circuit.

3 Dr. B. Meier, Hospital Ludwigsburg, Germany [in-vivo model]

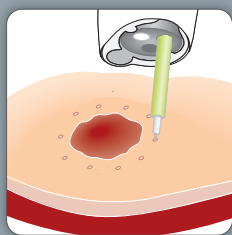
The AqaNife is a monopolar electrosurgical instrument for endoscopic submucosal dissection using flexible endoscopes. It is a fixed dissection knife.

**AqaNife features:**

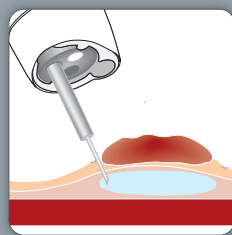
- Straight needle for flexible dissection angle
- Precise marking of tissue
- No retraction of the needle in case of tissue contact
- Defined, fixed position of the needle
- Ceramic sheath tip as stopper and protector
- Re-injection without instrument change, flushing function
- Integrated irrigation channel for connection to conventional irrigation pumps for flushing the tissue



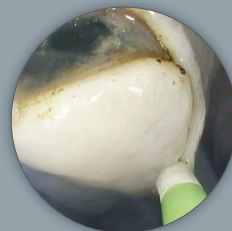
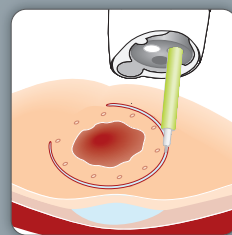
**ESD+**



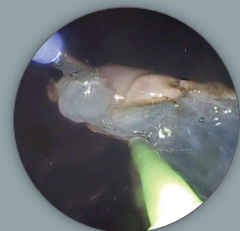
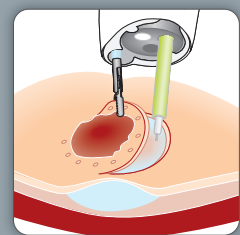
Marking



Injection of LiftUp®



Incision of 4/5 of the total circumference



Endoscopic submucosal dissection<sup>4</sup> with AqaNife and additional grasper in the AWC®

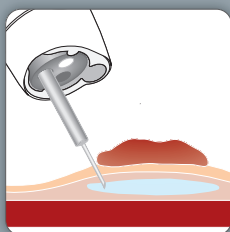
The new injection agent LiftUp® for injection in the submucosa for safe and easy endoscopic resection.

**LiftUp® features:**

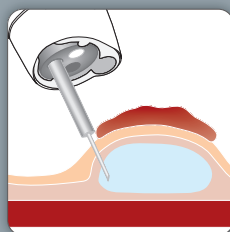
- Gels thermo-reversibly in tissue at body temperature
- Creates a permanent cushion in the submucosa even after mucosa incision
- Separates and exposes layers and structures
- Saves time due to fewer re-injections
- Enables easy, fast and safe resection



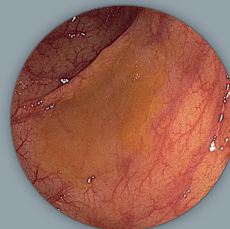
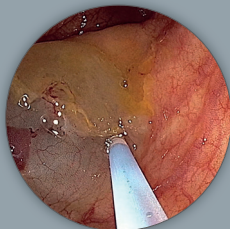
LiftUp®



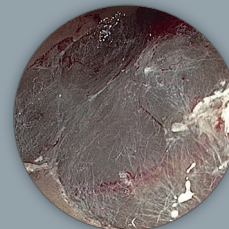
Injection of a small amount of saline solution



Injection of LiftUp® at the same spot until the desired lifting is achieved



Resection site before



Resection site after<sup>5</sup>



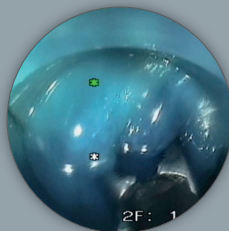
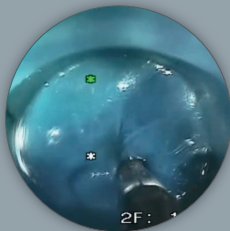
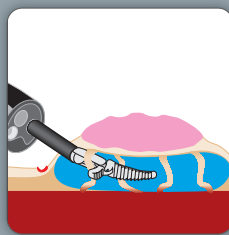
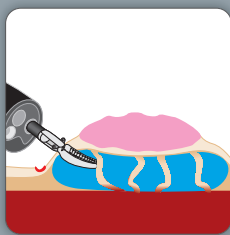
The Coag Dissector combines safe and easy blunt dissection with precise coagulation of bleeding.

**Coag Dissector features:**

- Rotatable, flexible instrument shaft for precise alignment and positioning of the grasper tip
- Curved grasper for optimal targeting of the tissue
- Blunt tissue preparation, as in surgery
- Effective HF coagulation, as with pincers
- Small geometry for easy manoeuvrability
- Wide range of applications: ESD, haemostasis, POEM



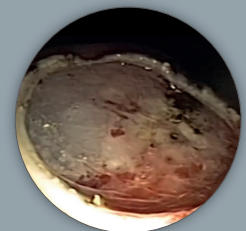
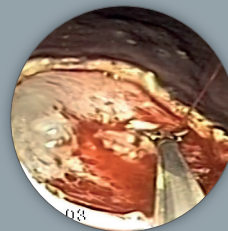
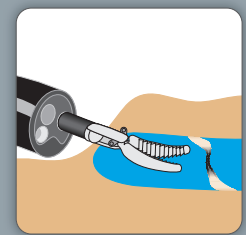
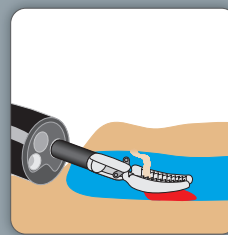
**ESD**



Injection to lift the lesion

Blunt dissection by spreading the Coag Dissector

**Haemostasis**



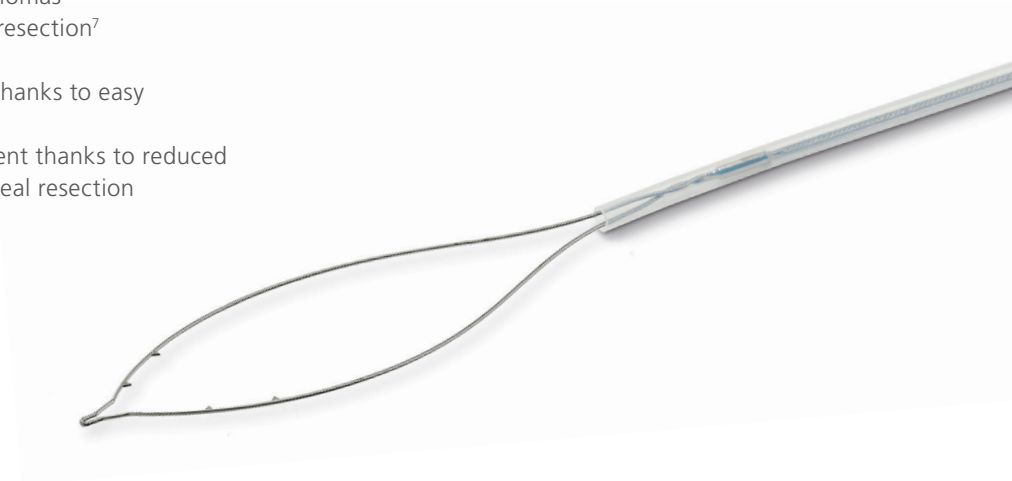
Grasping of bleeding tissue with the Coag Dissector

Effective haemostasis<sup>6</sup>

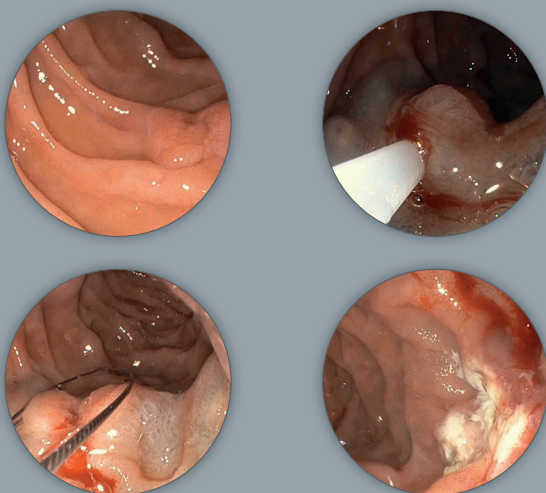
The Traction Polypectomy Snare (TPS) is a specially designed, serrated snare for grasping and removing polyps in the gastrointestinal tract via a flexible endoscope.

**Traction Polypectomy Snare features:**

- Solid grip even on broad-based adenomas
- Up to 30% more tissue capture per resection<sup>7</sup>
- Facilitates resection of flat lesions
- Re-positioning possible at any time thanks to easy opening properties
- Improved histopathological assessment thanks to reduced number of specimens during piecemeal resection

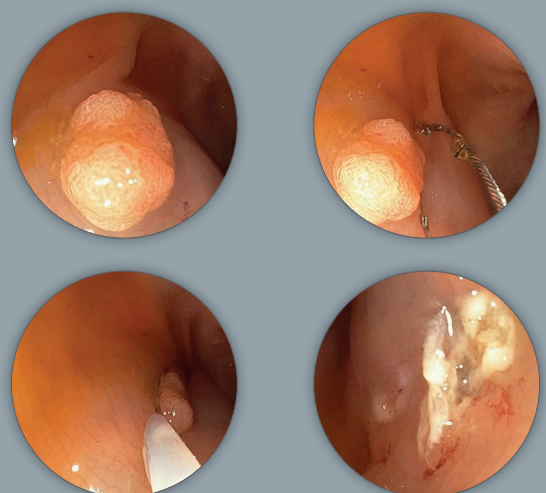


**Duodenal polypectomy**



Duodenal polypectomy using the Traction Polypectomy Snare<sup>8</sup>

**Cold snare polypectomy**



Cold snare polypectomy using the Traction Polypectomy Snare<sup>8</sup>

## Details and components

Instrument line consisting of optimised instruments for ESD, EMR and other endoscopic resection techniques.



Additional working channel for flexible endoscopes, available for gastroscopes and colonoscopes.

- For instruments with a diameter of up to 2.8 mm
  - For endoscope diameters from 8.5–13.5 mm
- Ref. no. 200.57.01 (length 122 cm), ref. no. 200.57.04 (length 185 cm)



Thermo-reversible injection solution for endoscopic resection.

- Safe and easy resection due to durable and stable cushion
  - Time saving thanks to fewer re-injections
- Ref. no. 200.56.01, ref. no. 200.56.02 (kit with injection accessories)



Monopolar HF instrument for blunt dissection and coagulation.

- Curved grasper design with rotatable instrument shaft for precise targeting
  - Length: 165 cm; compatible with working channel diameters of 2.8 mm or larger
- Ref. no. 200.50



Monopolar HF instrument for incision and dissection.

- Dissection needle length available for thin and thick tissue: 1.5 mm | 2.0 mm | 2.5 mm | 3.0 mm
  - Length: 220 cm; compatible with working channel diameters of 2.8 mm or larger
- Ref. no. 200.53.01–200.53.04



Serrated polyfile snare for endoscopic tissue resection.

- Snare diameter: 25 mm; wire diameter: 0.38 mm
  - Length: 220 cm; compatible with working channel diameters of 2.8 mm or larger
- Ref. no. 200.55.10



OTSC® Anchor in two variations with different needle length.

Ref. no. 200.10 (length: 165 cm, depth: 4 mm), ref. no. 200.11 (length: 220 cm, depth: 2–2.5 mm)



Grasping forceps for grasping tissue for working channel diameters of 2.8 mm or larger

Ref. no. 200.73 (length: 220 cm)



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