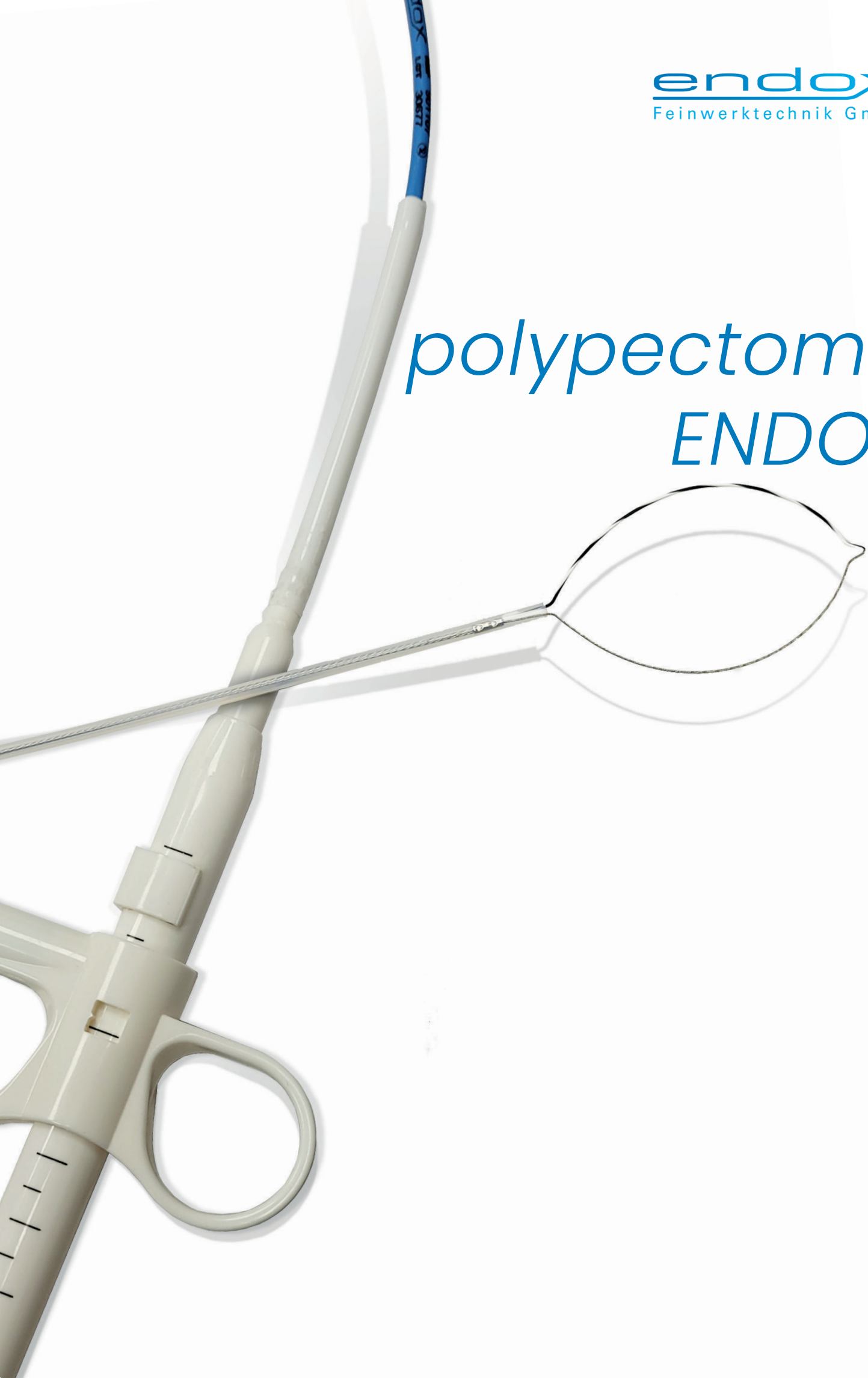


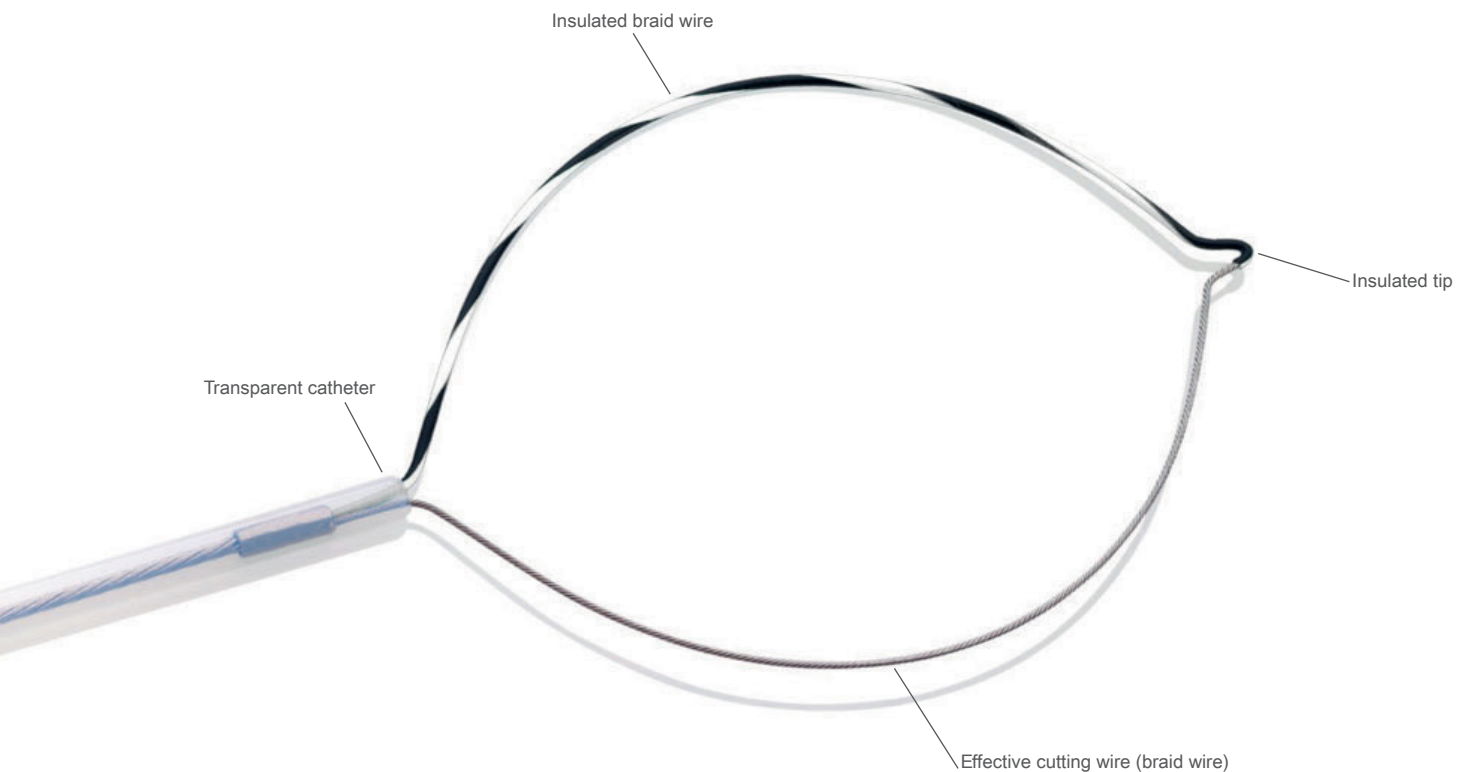
polypectomy
ENDOx



ENDOx – the partially insulated snares for precise removal without causing thermal damage to the organ walls

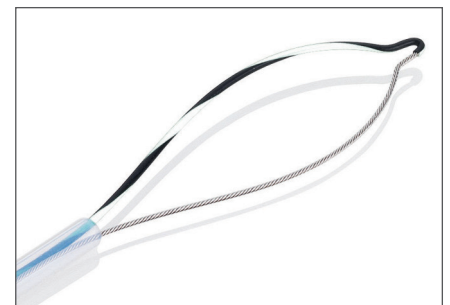
With the en-bloc removal of polyps or lesions the speed of the cut is vital to ensure the blood vessels are successfully sealed. The slower the cut is made, the more effective it is. However, if it is done too slowly, the organ wall can be thermally damaged.

The ENDOx polypectomy snare takes a new approach. One half of the symmetrically opening snare is electrically insulated and the other half is HF-surgically inactive. The first cut and the cutting phase are therefore extra effective. The low use of HF electricity minimises both thermal damage to the muscular layer and serous membrane as well as thermal artefacts.



Endoscopic check of the cut speed thanks to the markings on the resection snare

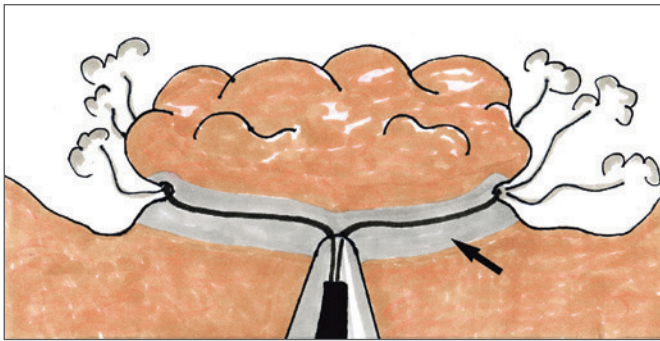
If the cut is made too fast it may cause bleeding, while if the cut is too slow it may lead to thermal blood vessel damage. To minimise these risks the insulated part of the ENDOx snare is equipped with markings, like a guide wire, which can be seen by the endoscope thanks to the transparent catheter. This allows the endoscope user and assistants to see clearly on the monitor whether or how fast the snare closes and whether it cuts.



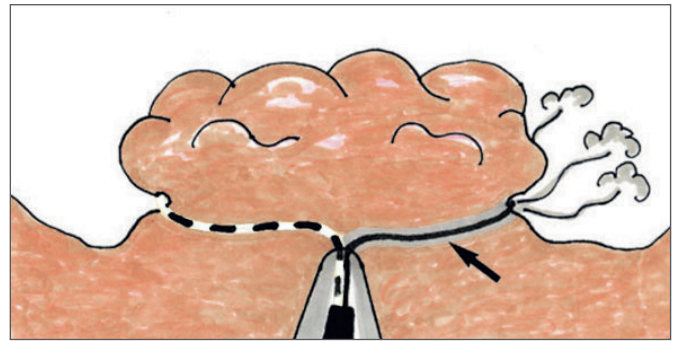
Less thermal damage to the muscular layer thanks to the shorter first cut delay

The HF-surgically active cutting wire of the ENDOx snare is around 50% shorter than on similarly-sized, non-insulated snares. The first cut delay is also much shorter as a result. Furthermore, the risk of cutting towards the organ wall with

the ENDOx snare is only half of the risk compared to conventional polypectomy snares. Consequently the ENDOx snare is particularly suitable for removing large polyps.



When using ENDOx resection snares the first cut delay is relatively short even with large polyps (> 1cm) and as a result the thermal blood vessel damage (to the coagulation plus the adjacent devitalisation zones) is only relatively small and not deep (see arrow).



When using conventional polypectomy snares on large polyps (> 1cm), long first cut delays can cause big and deep blood vessel damage (to the coagulation plus devitalisation zones) (see arrow).

Ergonomic handle for controlled cutting

For the precise application of the snare and cutting, the ENDOx snare is equipped with an ergonomically-shaped handle. Axial and rotational movements are transferred very precisely from the handle to the snare. At the same time, when the snare touches the organ you can feel it clearly with your hand. The catheter is also separated from the handle, allowing the snare to be precisely opened and closed.

- No friction or jamming
- Minimum mechanical clearance
- HF connection at the side
- The high-quality multi-contact plug avoids loose connections



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As a manufacturer of technical medical products, endox has stood for first-class quality and tailor-made service for years. The product range covers both standard instruments as well as individual solutions. The latest production technology, together with high-quality materials and extensive know-how guarantee high reliability – and ensure that our customers are very happy.

Technical data for the HF snare ENDOx

Opening and closing of the effector	symmetrical
Rotating the snare	yes, at the catheter axis
Maximum opening width of the snare	approx. 3 cm x 4 cm
Diameter of the cutting wire	0,38 mm
Length of the effective cutting wire	50% of the length of similarly-sized conventional snares
Length of the catheter	200 cm
External diameter of the catheter	2.3 mm

HF electricity required during the initial cut phase	maximum 1,5 A _{eff}
HF electricity required during the cutting phase	< 1,0 A _{eff} , depending on the cutting speed

HF electricity required for the cutting phase

* with a low risk of bleeding	250 to 300 V _p
* with a moderate risk of bleeding	300 to 400 V _p
* with a large risk of bleeding	400 to 500 V _p
Maximum permitted HF operating voltage	1600 V _p
Minimum available output of the HF generator	200 Watts
Maximum required electrical output	200 Watts

If HF generators are used with the amplitude of the HF output voltage automatically controlled, an output limit of less than 200 Watts is neither necessary nor recommended.

Plugs available on ENDOx for cables to connect a 4mm HF surgical device	4 mm, male
Certification	CE 0483

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