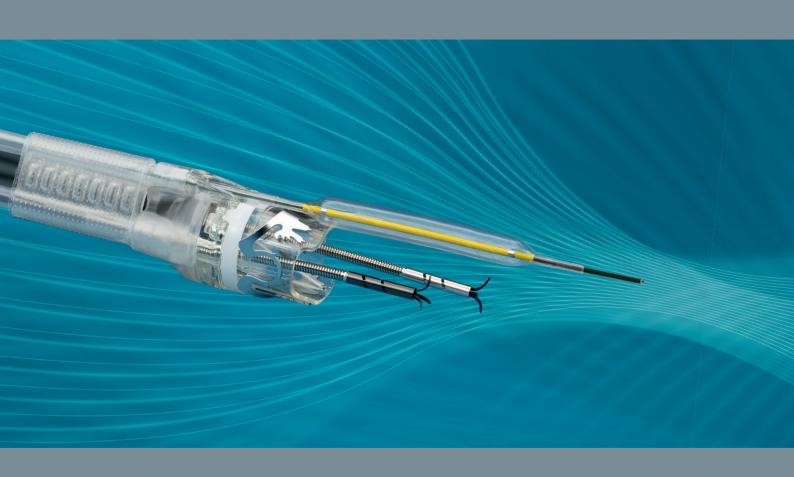
O O O O V E S C O innovation in scope



BARS®

Endoscopic anastomosis treatment and lumen reduction



BARS® facilitates endoscopic anastomosis treatment for lumen reduction.

BARS® features:

- Transluminal and minimally invasive technique
- For grasping large volumes of tissue
- Dynamic compression with continuous adaptation to the tissue thickness
- Complete set for the BARS® procedure

BARS®

Treatment of enlarged anastomoses for lumen reduction, e.g. after gastric bypass

The BARS® is based on the well-established OTSC® System and was developed especially for lumen reduction and anastomosis treatment, e.g. after previous RYGB.

BARS® enables the simultaneous use of three different application aids with conventional single-channel endoscopes. This makes it possible to collect tissue evenly and ensures a defined result.

The BARS® application cap is mounted on the tip of the endoscope while the application aids are guided along the outside of the endoscope in working channels. By turning the hand wheel, the thread is tensioned and the clip is released. During clip application, the balloon that is inserted into the anastomosis prevents the lumen from closing completely and defines the remaining lumen.

Application

Reduction of an enlarged anastomosis (case example after RYGB)¹





Target the application site





Insert the guide wire into the outer BARS® working channel and place it in the anastomosis



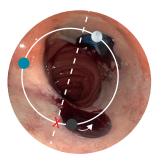


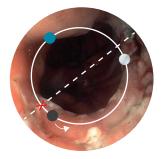




Insert the anchors into the endoscope working channel and the inne BARS® working channel. Crossed placement of the anchors in the prepared target tissue.







EMR²

Mucosal incision²

Preparing the target tissue using EMR or mucosal incision offers significant benefits.

- Enables a more secure hold for the Anchors in the muscular (submucosal) layer of tissue.
- A fresh lesion is created which can promote healing and thus support the long-term results.

Correct positioning of the BARS® Anchors is crucial to the success of the treatment.

- 1. Divide the anastomosis into two halves with an imaginary centre line.
 - **X** = exit point of the endoscope working channel
- 2. Position the Anchors just below the centre line.
 - = BARS® Anchor Black, = BARS® Anchor Silver.
- 3. The space keeper balloon (•) defines the remaining lumen in the opposite semi-circle.













BARS[®]



Details and components



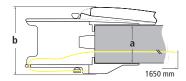


The BARS® Set is supplied as a complete treatment unit and comprises the following products:

- BARS® application cap with mounted clip and thread
- Two additional working channels that are integrated in the cap
- BARS® Anchor (1x Silver & 1x Black)
- BARS® hand wheel
- Insertion Balloon
- Guide wire
- Thread retriever
- Space Keeper Balloon

Dimensions

BARS®	
Ref. no.	100.60
a Compatible endoscope diameter	10.0–12.0 mm
b Max. outer diameter of application cap	21.2 mm
Min. working channel diameter	3.7 mm
Endoscope insertion length	103–110 cm





The BARS® Set includes the following application aids:



ANCHOR Silver & Black



Mobilisation aid for bringing together the two opposing anastomosis sides in the BARS® application cap. The BARS® Anchors are supplied in black and silver so they can be easily differentiated.



Insertion Balloon with guide wire

The insertion balloon supports the safe insertion of the BARS®, particularly when passing through the upper oesophageal sphincter.



Space Keeper Balloon

The space keeper balloon defines the diameter of the required remaining lumen. At the same time, it prevents excessive reduction of the lumen during clip application.

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Ovesco Endoscopy AG is a medical device company specialising in the fields of flexible endoscopy,

