The colonic FTRD® is an instrument for flexible endoscopy for full-thickness resection and diagnostic tissue acquisition through resection of suitable lesions in the colon and rectum.

The colonic FTRD® can find application in:
- not pretreated non-lifting adenoma
- non-lifting recurrent adenoma
- adenoma at the base of the appendix
- adenoma in diverticula
- small subepithelial tumors
- early carcinoma

Endoscopic full-thickness resection in the colon

Details and components

The respective FTRD® sets (colonic, diagnostic, gastroduodenal) are delivered as procedural set and consist of the following products:
- FTRD® cap with preloaded clip and thread
- snare integrated into the distal end of the cap
- FTRD® hand wheel
- thread retriever
- endoscope sleeve with fixation tapes
- FTRD® Marking Probe
- FTRD® Grasper
- insertion balloon (only gastroduodenal FTRD®)
- guide wire (only gastroduodenal FTRD®)

HF coagulation probe for marking the target lesion before using the FTRD® system. Marking will facilitate both finding the lesion and verify complete resection of the target tissue.

Gripping forceps for proper grip on the target tissue and precise retrieval of the sample into the FTRD® application cap. The FTRD® Grasper is also available separately (5 items per package, ref. no. 201.73).

The FTRD® pRove Cap is a cap with the same dimensions as the cap of the respective FTRD® Set in order to test the possible application of the FTRD® Set in advance. The FTRD® pRove Cap is not included in the respective FTRD® Set.

(2 items/package; colonic FTRD® pRove Cap ref. no. 200.71; gastroduodenal FTRD® pRove Cap ref. no. 200.77).

Application aid

For a better mobilization of tissue in submucosal findings (especially in the stomach) a specially modified anchor is available (not included in the FTRD® Set).

FTRD® versions

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<tr>
<th>FTRD® versions</th>
<th>Set ID</th>
<th>Colonic</th>
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Source: Prof. Dr. K. Caca, Klinikum Ludwigsburg, Germany

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Ovesco Endoscopy AG is a medical device company specializing in the fields of flexible endoscopy and endoluminal surgery. Ovesco develops, manufactures, and markets innovative products for the treatment of gastrointestinal disease. Ovesco products stand for therapeutic efficacy and efficient application.
The colonic FTRD® is an instrument for flexible endoscopy for full-thickness resection and diagnostic tissue acquisition through resection of suitable lesions in the colon and rectum.

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Endoscopic full-thickness resection in the colon

The respective FTRD® sets (colonic, diagnostic, gastroduodenal) are delivered as procedural set and consist of the following products:
- FTRD® cap with preloaded clip and thread
- snare integrated into the distal end of the cap
- FTRD® handwheel
- thread retriever
- endoscope sleeve with fixation tapes
- FTRD® marking probe
- FTRD® grasper
- guide wire (only gastroduodenal FTRD®)

HF coagulation probe for marking the target lesion before using the FTRD® system. Marking will facilitate both finding the lesion and verify complete resection of the target tissue.

Application aid

For a better mobilization of tissue in submucosal findings (especially in the stomach) a specially modified anchor is available (not included in the FTRD® set).

Details and components

Endoscopic full-thickness resection in the colon

The respective FTRD® sets (colonic, diagnostic, gastroduodenal) are delivered as procedural set and consist of the following products:
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FTDR® versions

<table>
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<th>FTDR® versions</th>
<th>FTRD® cap with thread</th>
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<th>Application aid</th>
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<td>3.7</td>
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</table>

Application aid

FTDR® ANCHOR

For better mobilization of tissue in submucosal findings (especially in the stomach) a specially modified anchor is available (not included in the FTRD® set).
The FTRD® System enables endoscopic full-thickness resection (EFTR) of lesions and diagnostic tissue acquisition in the colon and rectum (colonic FTRD®/diagnostic FTRD®), respectively in the stomach and duodenum (gastroduodenal FTRD®).

- Transluminal and minimally invasive technique
- Proven OTSC® technology for safe closure
- Good histological evaluation of en bloc specimen with minimal thermal damage
- Complete set for endoscopic full-thickness resection procedure

**FTRD® System**

**Full-Thickness Resection Device for flexible endoscopy**

It is based on the well-established OTSC® System and enables the removal of suitable lesions with all layers of the wall, including the serosa. The design of the FTRD® System ensures that the transection of the organ wall occurs only after the target site has been safely closed. The organ lumen is therefore never opened during the procedure.

The FTRD® application cap is mounted on the tip of the endoscope with the snare running along the outside of the endoscope protected by the endoscope sleeve. By turning the hand wheel the thread is tensioned and the clip released. Subsequently, the tissue above the clip is resected with the integrated HF snare.

The gastro-duodenal FTRD® is a smaller FTRD® System for endoscopic full-thickness respectively deep partial-wall resection (especially in the stomach) and diagnostic tissue acquisition in the stomach and duodenum.

- Transluminal and minimally invasive technique
- Proven OTSC® technology for safe closure
- Good histological evaluation of en bloc specimen with minimal thermal damage
- Complete set for endoscopic full-thickness resection procedure

**Diagnostic FTRD®**

The diagnostic FTRD® is a smaller FTRD® System for full-thickness biopsy in the colon and rectum e.g. for diagnostic purposes.

- It enables histology in functional diseases in the colon e.g. for neuro-gastroenterological examination. Full-thickness biopsies allow accurate histological presentation of enteric neurons and can provide important insights into the diagnosis of motility disorders.

**Full-thickness biopsy finds application in:**

- Hyper- and aganglionosis (e.g. Hirschsprung’s disease)
- Enteric ganglionitis
- Visceral neuropathy (e.g. in chronic constipation)
- Gastrintestinal amyloidosis
- Enteric manifestations of neurological diseases (e.g. Parkinson’s disease)

**Full-thickness biopsy finds application in:**

- Hypo- and aganglionosis (e.g. Hirschsprung’s disease)
- Enteric ganglionitis
- Visceral neuropathy (e.g. in chronic constipation)
- Gastrintestinal amyloidosis
- Enteric manifestations of neurological diseases (e.g. Parkinson’s disease)

**Application**

**Endoscopic full-thickness resection**

- Marking and targeting the lesion with the FTRD® Marking Probe.
- Marking and verifying the lesion with the FTRD® Grasper.
- Grasping and mobilizing the lesion with the FTRD® Grasper.
- Closing the snare and releasing the clip with the FTRD® Snare.

**Endoscopic full-thickness resection in the stomach**

- Marking and targeting the lesion with the FTRD® Marking Probe.
- Grasping and mobilizing the lesion with the FTRD® Grasper.
- Clip application and subsequent resection of the lesion.

**Diagnostic full-thickness biopsy in the colon**

- Marking and targeting the lesion with the FTRD® Marking Probe.
- Grasping and mobilizing the lesion with the FTRD® Grasper.
- Clip application and subsequent resection of the lesion.

- Up to 2 cm full-thickness specimen from the stomach.
- For submucosal lesions (especially for GIST indications) the utilization of the Anchor instead of the Grasper can represent a good alternative.

- Ensuring that the tissue is completely within the FTRD® application cap – releasing clip with hand wheel.

**EFTR to exclude a primary neurodegenerative motility disorder.**

**EFTR for diagnosis of Hirschsprung’s disease.**
The FTRD® System enables endoscopic full-thickness resection (EFTR) of lesions and diagnostic tissue acquisition in the colon and rectum (colonic FTRD®/diagnostic FTRD®), respectively in the stomach and duodenum (gastroduodenal FTRD®).

- Transluminal and minimally invasive technique
- Proven OTSC® technology for safe closure
- Good histological evaluation of en bloc specimen with minimal thermal damage
- Complete set for endoscopic full-thickness resection procedure

**Application**

**Endoscopic full-thickness resection**
- Marking the lesion
- Preparing and stabilizing the lesion
- Closing and rewinding the snare
- Tissue resection and retrieving specimen

**Endoscopic full-thickness resection in the stomach**
- Marking and stabilizing the lesion
- Preparing and stabilizing the lesion
- Grasping and mobilizing the lesion
- Clip application and subsequent resection

**Diagnostic full-thickness biopsy in the colon**
- Marking the lesion
- Preparing and stabilizing the lesion
- Grasping and mobilizing the lesion
- Clip application and subsequent resection

**GASTRODUODENAL**

The gastroduodenal FTRD® is a smaller FTRD® System for endoscopic full-thickness respectively deep partial-wall resection (especially in the stomach) and diagnostic tissue acquisition in the stomach and duodenum.

For an easier and safer insertion of the system into the upper GI tract (esophageal/ pyloric passage) the gastroduodenal FTRD® Set is delivered with an insertion balloon and guide wire. The clip of the gastroduodenal FTRD® has been modified especially for the application in the duodenum and stomach.

The gastroduodenal FTRD® can find application in:
- not pretreated non-lifting adenomas
- non-lifting recurrent adenomas
- small subepithelial tumors
- early carcinoma

For submucosal lesions (especially for GIST indications) the utilization of the Anchor instead of the Grasper can represent a good alternative.

**Diagnostic full-thickness biopsy in the colon**
- Marking and stabilizing the lesion
- Grasping and mobilizing the lesion
- Marking the lesion with the FTRD® Marking Probe.

**Endoscopic full-thickness resection in the colon**
- Preparing the lesion
- Grasping and mobilizing the lesion
- Clip application and subsequent resection of the lesion

**Full-Thickness Biopsy Application**

Full-thickness biopsy finds application in:
- Hypo- and aganglionosis (e.g. Hirschsprung’s disease)
- Enteric ganglionitis
- Visceral neuromyopathy (e.g. in chronic constipation)
- Gastrintestinal amyloidosis
- Enteric manifestation of neurological diseases (e.g. Parkinson’s disease)

The diagnostic FTRD® is a smaller FTRD® System for full-thickness biopsy in the colon and rectum e.g. for diagnostic purposes.

For an easier and safer insertion of the system into the upper GI tract (esophageal/ pyloric passage) the gastroduodenal FTRD® Set is delivered with an insertion balloon and guide wire. The clip of the gastroduodenal FTRD® has been modified especially for the application in the duodenum and stomach.

The gastroduodenal FTRD® can find application in:
- not pretreated non-lifting adenoma
- non-lifting recurrent adenoma
- small subepithelial tumors
- early carcinoma

For submucosal lesions (especially for GIST indications) the utilization of the Anchor instead of the Grasper can represent a good alternative.
The Full-Thickness Resection Device for flexible endoscopy (FTRD® System) enables endoscopic full-thickness resection (EFTR) of lesions and diagnostic tissue acquisition in the colon and rectum (gastroduodenal FTRD®). It is based on the well-established OTSC® System and enables the removal of suitable lesions with all layers of the wall, including the serosa. The design of the FTRD® System ensures that the transection of the organ wall occurs only after the target site has been safely closed. The organ lumen is therefore never opened during the procedure.

The gastroduodenal FTRD® is a smaller FTRD® System for endoscopic full-thickness respectively deep partial-wall resection (especially in the stomach) and diagnostic tissue acquisition in the colon and stomach.

• Transluminal and minimally invasive technique
• Proven OTSC® technology for safe closure
• Good histological evaluation of en bloc specimen with minimal thermal damage
• Complete set for endoscopic full-thickness resection procedure

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It enables histology in functional diseases in the colon e.g. for neuro-gastroenterological examination. Full-thickness biopsies allow accurate histological presentation of enteric neurons and can provide important insights into the diagnosis of motility disorders.

Full-thickness biopsy finds application in:
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- Enteric ganglionitis
- Visceral neural- and myopathy (e.g. in chronic constipation)
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- Enteric manifestation of neurological diseases (e.g. Parkinson’s disease)

The gastroduodenal FTRD® is a smaller FTRD® System for endoscopic full-thickness respectively deep partial-wall resection (especially in the stomach) and diagnostic tissue acquisition in the stomach and duodenum.

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The gastroduodenal FTRD® can find application in:
- not pre-treated non-lifting adenoma
- non-lifting recurrent adenoma
- small subepithelial tumors
- early carcinoma

For submucosal lesions (especially for GIST indications) the utilization of the Anchor instead of the Grasper can represent a good alternative.

Application

Endoscopic full-thickness resection

Gastrointestinal applications

1 Source: Prof. Dr. K. Caca, Klinikum Ludwigsburg, Germany
2 Source: PD Dr. Arthur Schmidt, University Medical Center Freiburg, Germany
3 Source: Prof. Dr. P. Bauerfeind, Stadtspital Triemli, Zürich, Switzerland
4 Source: MD A. Martínez-Alcalá, Centro de Innovaciones Digestivas Martínez-Alcalá, Sevilla, Spain

Ensuring that the tissue is completely within the FTRD® application cap – releasing clip with hand wheel.

Closing snare and resecting tissue, retrieving specimen and inspecting resection site. Upper row: Diagnostic EFTR to exclude a primary neurodegenerative motility disorder. Lower row: EFTR for diagnosis of Hirschsprung’s disease.
The colonic FTRD® is an instrument for flexible endoscopy for full-thickness resection and diagnostic tissue acquisition through resection of suitable lesions in the colon and rectum.

The colonic FTRD® can find application in:

- not pretreated non-lifting adenoma
- non-lifting recurrent adenoma
- adenoma at the base of the appendix
- adenoma at/d in diverticula
- small subepithelial tumors
- early carcinoma

Endoscopic full-thickness resection in the colon

The respective FTRD® Sets (colonic, diagnostic, gastroduodenal) are delivered as procedural set and consist of the following products:

- FTRD® cap with preloaded clip and thread
- snare integrated into the distal end of the cap
- FTRD® hand wheel
- thread retriever
- endoscope sleeve with fixation tapes
- guidewire (only gastroduodenal FTRD®)

HF coagulation probe for marking the target lesion before using the FTRD® system. Marking will facilitate both finding the lesion and verify complete resection of the target tissue.

Gripping forceps for proper grip on the target tissue and precise retrieval of the sample into the FTRD® application cap. The FTRD® Grasper is also available separately (5 items per package, ref. no. 201.73).

The FTRD® prOVE Cap is a cap with the same dimensions as the cap of the respective FTRD® Set in order to test the possible application of the FTRD® Set in advance. The FTRD® prOVE Cap is not included in the respective FTRD® Set. (2 items/package; colonic FTRD® prOVE Cap ref. no. 200.71; gastroduodenal FTRD® prOVE Cap ref. no. 200.77).

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Details and components

<table>
<thead>
<tr>
<th>FTRD® versions</th>
<th>FTRD® cap</th>
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| Required working channel Ø [mm] | 3.2 | 3.2 | 3.7 |

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