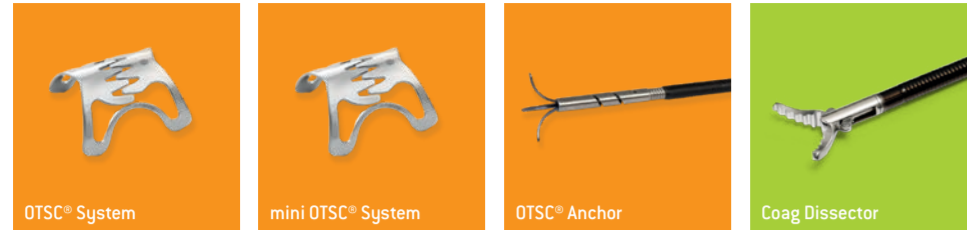


# Bleeding management

## Hemostasis

one & done. Clinically proven efficacy, also in first-line therapy



## Blood clot removal

Maximum grasping capacity with free working channel



## Severe bleeding

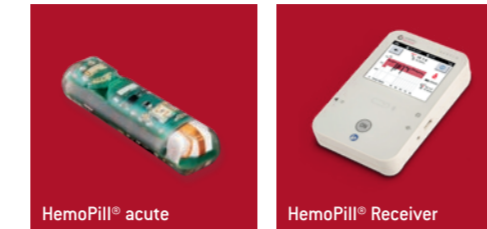
Additional working channel leaves endoscope working channel free for suction and irrigation



# Diagnostics

## Blood detection

Sensor-based real-time measurement without patient preparation



## Full-thickness biopsy

Minimally invasive biopsy for the diagnosis of e.g. motility disorders



# Removal

## Ovesco Clips

Safest and most effective method for OTSC and FTRD clip removal



## Foreign bodies

Safe removal of foreign bodies



## Tissue

Optimal for large-volume removal of difficult-to-grasp tissue [e.g. for necrosectomy]



# Endoscopic resection

## Polypectomy/EMR/EMR+

Larger en-bloc resection thanks to long-lasting safety cushion



## ESD/ESD+

Faster ESD result by means of traction through bimanual working



## Full-thickness resection incl. hybrid technique

Established procedure for decisive clinical benefit in endoluminal surgery



## POEM

Blunt dissection for safe preparation



# Closure

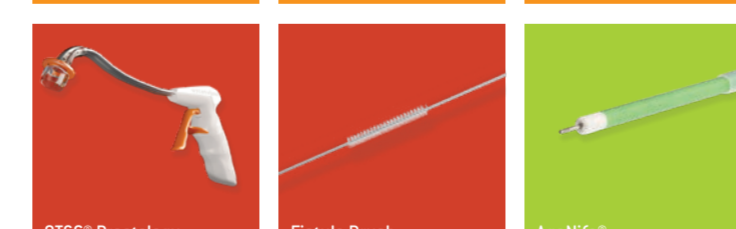
## Perforation & anastomotic insufficiencies

Safe and effective endoscopic closure



## Fistulas

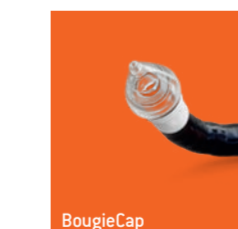
Gentle endoscopic closure with optimized procedures



# Esophageal stenosis / stent fixation

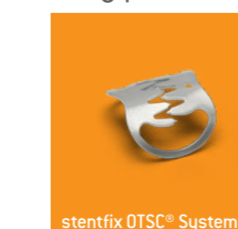
## Stricture management / Bougienage

Immediate visual control during bougienage



## Stent fixation

Easy procedure to avoid stent migration



Complication management with established techniques

Complication management with established techniques

Treatment of strictures after resection

Endoscopic clip removal if required

Endoscopic clip removal if required

Endoscopic clip removal if required

